UTAH DIVISION OF JUVENILE JUSTICE AND YOUTH SERVICES POLICY AND PROCEDURES	
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EMPLOYEE PEER SUPPORT PROGRAM	
RATIONALE: This policy establishes the Employee Peer Support Program (EPSP) to offer confidential support to Division staff. The goal is to develop a knowledgeable, skilled, and trained EPSP to help employees navigate the personal and professional difficulties inherent in a high-stress work environment.	

Original Effective: **September 11, 2020**	**Revision:** **January 28, 2026**	**Next Review Due:** **January 28, 2029**

I. DESCRIPTION

The EPSP supplements existing resources, utilizing a trained Peer Support Team to offer support services and appropriate referrals. The policy strictly defines confidentiality rules, exceptions to those rules, and the procedures for team selection, training, conduct, and response to various employee-initiated contacts and critical incidents.

II. DEFINITIONS

The following terms are defined for this policy as:

A. **Employee Peer Support Program (EPSP):** A voluntary employee support program that supplements resources already available (e.g., Employee Assistance Program [EAP], health insurance, and other available resources) and helps identify and resolve concerns for employees experiencing personal and professional problems that may impact job performance and personal life.

B. **Communication:** An oral statement, written statement, note, record, report, or document made during, or arising out of, a meeting between a division employee and a team member.

C. **Critical Incident:** Includes safety concerns, or non-routine, unusual, or potentially threatening events that are critical in nature, require an immediate response, and impacts the wellbeing of minors or staff.

D. **Mental Health Coordinator:** Qualified Mental Health Professional (QMHP) available to the Peer Support Team to answer questions and consult on issues or concerns related to mental health.

E. **Peer Support Advisory Group (Advisory Group):** The Peer Support Advisory Group is designated to recommend policy and procedure. The Advisory Group coordinates and administers the EPSP. Advisory Group members are selected from trained peer supporters, approved by the Program Directors, and serve at the discretion of the Division Director. They should reflect the diverse workforce within the Division.
F. **Peer Support Management Group:** Composed of the Peer Support Program Director, Peer Support Team Coordinator, and the Mental Health Coordinator.
G. **Peer Support Program Director:** JJYS Program Director who oversees the EPSP and is the liaison with the Director and Deputy Director of JJYS. They also provide support to team members and serve as a peer support team member.
H. **Peer Support Team (Team):** Division employees trained to deliver appropriate confidential peer support, support services, and provide appropriate referrals.
I. **Peer Support Team Coordinator (Coordinator):** Serves as the primary liaison between the Advisory Group, Peer Support Team, JJYS administration, and community resources. They also provide support to team members and serve as a peer support team member.
J. **Peer Support Team Member (Team Member):** An employee who has voluntarily applied for, interviewed, been selected by the Advisory Group, and trained to deliver the EPSP.
K. **Qualified Mental Health Professional (QMHP):** A licensed psychologist, psychiatrist, or therapist with experience in child or adolescent development.
L. **Self-Care:** An activity that is done deliberately in order to take care of one's mental, emotional, and physical health.

III. POLICY

A. Staff may request peer support through the desktop icon anytime day or night.
B. Peer support services and follow-up is provided at the involved employee's discretion and may be waived or terminated at any time the involved employee wishes.
C. Confidentiality:
    1. Employees seeking services through the program shall be ensured confidentiality.
    2. No one outside of the peer support team shall become involved with the functioning of the team in a manner which might threaten:
        a) The confidentiality of employees; and
        b) Career development or advancement opportunities.
    3. While providing peer support, a team member shall maintain communications with Division employees as strictly confidential.
    4. Information identifying the employee receiving peer support services and knowledge shared while performing peer support shall not be shared. Team members may seek guidance from the Advisory Group.

5. Examples of peer support provided may be used for training purposes within the team while maintaining confidentiality as defined by this policy.

D. Conduct:
    1. While acting in an official peer support capacity, a team member is expected to maintain a level of professionalism and appropriate conduct that is in accordance with current division policies and codes of ethics.
    2. Team members may not provide peer support in the following instances:
        a) To any employee they directly supervise;
        b) In response to any incident in which they were involved or materially aware of;
        c) In situations where a personal or professional conflict may arise;
        d) When an employee is placed on administrative leave during an investigation; or
        e) As otherwise directed by the coordinator.

E. Team Membership:
    1. To be eligible to be a member of the Peer Support Team, employees must be in good standing, meaning they have not received any formal discipline in the last two years and are not currently on a Performance Improvement Plan (PIP).
    2. The Peer Support Management Group reserves the right to suspend or terminate a team member's role as a peer supporter if that individual receives formal discipline or is placed on a PIP.
    3. Team members must have the approval of their supervisor and APD to participate.
    4. Team membership may be withdrawn at any time by a Program Director, Peer Support Coordinator, or the Deputy Director.
    5. Team members' services may be required at any time, and they should have the availability to answer phone calls or respond to call-outs day or night if needed.
    6. Team members are encouraged to maintain good self-care.
    7. Members of the team who respond to an incident, debriefing, training class or meeting where they would normally be off duty may be allowed to accrue overtime, comp time, or excess leave.

IV. PROCEDURE

A. Confidentiality:
    1. Exceptions to confidentiality of the employee. The following disclosures shall be reported to the appropriate authority:
        a) Threat or intent of harm to self or others;
        b) Child abuse or neglect, past or present;
        c) Unlawful conduct under federal, state, or local laws;

d) Violations of DHHS or JJYS policy;
e) Diagnosed mental health disorder that would interfere with the employee's ability to perform duties safely; or
f) Substance use that could cause the employee to be unable to perform their job duties safely.

2. A team member shall immediately notify the Peer Support Program Director if an employee discloses any of the incident types listed in IV.A.1.
3. Breach of confidentiality shall be considered a violation of this policy.
    a) Allegations of a breach of confidentiality by a team member shall be made in writing and submitted directly to the Program Director, Peer Support Coordinator, or the Deputy Director for a thorough review.
    b) The Peer Support Coordinator, Mental Health Coordinator and Program Director over Peer Support will conduct an in depth review and make findings and recommendations.
    c) The team member accused of the breach shall be temporarily suspended from the team and peer support functions until an in-depth review has been completed. If the complaint is unfounded, the member may continue their duties as part of the team.
    d) Members of the team who have been found to have violated the confidentiality of an employee shall be removed from the team, and may be subject to further disciplinary action.

B. Statistical Reporting:
    1. Team members shall report statistical information to determine how the program is being accessed by staff.
    2. Statistical information shall not contain identifying information.
    3. Statistical information may include the following:
        a) Date peer support was provided;
        b) Reason for Peer Support contact;
        c) Name(s) of the peer support responder(s);
        d) Type of support provided;
        e) If a follow-up response was requested; and
        f) If this was a follow-up response.
    4. Personally identifying information about employees who receive peer support services shall not be included to protect employees' confidentiality.

C. Team Selection:
    1. Applicants for the team shall be interviewed by the Advisory Group and be reviewed for suitability by a Mental Health Coordinator or designee.
    2. Team members who fail to fulfill any of the outlined responsibilities may be withdrawn from the program.
    3. A team member may withdraw from the program at any time, for any reason, by giving written notification to the Peer Support Program Director or Coordinator.

D. Training and Meetings:
    1. Team members are required to complete initial Peer Support Training.
    2. Team members are required to complete quarterly training, unless excused by a member of the advisory council.
    3. Advisory Group members shall attend monthly meetings, unless excused by a member of the advisory council.
    4. Team members shall participate in monthly meetings with their designated Advisory Group Member unless excused by a member of the advisory council.

E. Peer Support Referral:
    1. Employee initiated contacts: An employee who desires to speak with a team member about a critical incident or other peer support situation may communicate directly with a team member in person, by phone, virtually or email and shall inform the peer supporter that they are seeking peer support at the onset of the conversation.
    2. Event response: The Peer Support Program Director, Coordinator, or Mental Health Coordinator shall coordinate a response by members of the team to any of the following events:
        a) Death or serious injury of a minor in care or who has received services through the Division; and
        b) Serious injury or death of a coworker.
        c) The facility or program APD, or designee, shall contact the Coordinator or the Mental Health Coordinator to inform them of the event as soon as they become aware of events outlined in IV.E.2. If the Coordinator or Mental Health Coordinator is not immediately available, contact will be made with a Program Director overseeing the EPSP.
    3. Mandatory Communication Response: Within two business days of receiving a peer support referral, the Coordinator shall initiate and coordinate team contact with affected employee(s) in response to any of the following events:
        a) Serious injury or death of a coworker off the job including major illness, or disability;
        b) Serious injury, illness or death of an employee's family member; or
        c) Any situation in which an employee requests contact on behalf of themselves or another employee by administration or by utilizing the Peer Support Icon on each Division staff's desktop.
    4. The facility or program APD, or designee, shall contact the Program Coordinator or the Mental Health Coordinator within one business day to inform them of the event as soon as they are aware of any of the previously mentioned events. Should the Program Coordinator or Mental Health Coordinator not be available, contact shall be made with the Peer Support Program Director.

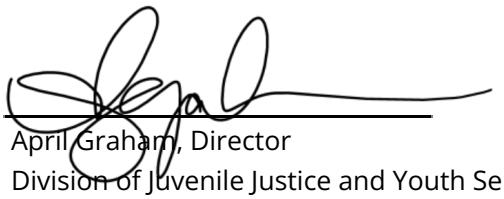
F. Pay and Compensation

1. Team members who receive a peer support call while on duty shall coordinate with their supervisor if coverage is needed while they handle the call.
2. Team members shall notify their Supervisor and APD in writing within 24 hours, documenting any overtime, comp time or excess hours accrued while performing team activities outside of their normal work hours.
3. The Supervisor or APD shall notify the coordinator of any overtime, comp time or excess hours accrued while performing peer support duties.

V. Continuous Renewal

This policy shall be reviewed every three years to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Division of Juvenile Justice and Youth Services Executive Management Team, and is approved upon the signature of the director.



April Graham, Director
Division of Juvenile Justice and Youth Services

01/28/2026
Signature Date