

Wellness Program

1033.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance on establishing and maintaining a proactive wellness program for department members.

The wellness program is intended to be a holistic approach to a member's well-being and encompasses aspects such as physical fitness, mental health, and overall wellness.

Additional information on member wellness is provided in the:

- Line-of-Duty Deaths Policy 1032.
- Drug- and Alcohol-Free Workplace Policy 1006.

1033.1.1 DEFINITIONS

Definitions related to this policy include:

Critical incident – An event or situation that may cause a strong emotional, cognitive, or physical reaction that has the potential to interfere with daily life.

Critical Incident Stress Debriefing (CISD) – A standardized approach using a discussion format to provide education, support, and emotional release opportunities for members involved in work-related critical incidents.

Peer support – Mental and emotional wellness support provided by peers trained to help members cope with critical incidents and certain personal or professional problems.

1033.2 POLICY

It is the policy of the University of Maryland, Baltimore Police Department to prioritize member wellness to foster fitness for duty and support a healthy quality of life for department members. The Department will maintain a wellness program that supports its members with proactive wellness resources, critical incident response, and follow-up support.

1033.3 WELLNESS COORDINATOR

The Commander of the Support Services Bureau or designee will serve as the wellness coordinator. The coordinator should report directly to the Chief of Police or the authorized designee and should collaborate with advisers (e.g., Human Resource Services, legal counsel, licensed psychotherapist, qualified health professionals), as appropriate, to fulfill the responsibilities of the position, including but not limited to:

- (a) Identifying wellness support providers (e.g., licensed psychotherapists, external peer support providers, physical therapists, dietitians, physical fitness trainers holding accredited certifications).
 1. As appropriate, selected providers should be trained and experienced in providing mental wellness support and counseling to public safety personnel.

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2. When practicable, the Department should not use the same licensed psychotherapist for both member wellness support and fitness for duty evaluations.
- (b) Developing management and operational procedures for department peer support members, such as:
1. Peer support member selection and retention.
 2. Training and applicable certification requirements.
 3. Deployment.
 4. Managing potential conflicts between peer support members and those seeking service.
 5. Monitoring and mitigating peer support member emotional fatigue (i.e., compassion fatigue) associated with providing peer support.
 6. Using qualified peer support personnel from other public safety agencies or outside organizations for department peer support, as appropriate.
- (c) Verifying members have reasonable access to peer support or licensed psychotherapist support.
- (d) Establishing procedures for CISDs, including:
1. Defining the types of incidents that may initiate debriefings.
 2. Steps for organizing debriefings.
- (e) Facilitating the delivery of wellness information, training, and support through various methods appropriate for the situation (e.g., phone hotlines, electronic applications).
- (f) Verifying a confidential, appropriate, and timely Employee Assistance Program (EAP) is available for members. This also includes:
1. Obtaining a written description of the program services.
 2. Providing for the methods to obtain program services.
 3. Providing referrals to the EAP for appropriate diagnosis, treatment, and follow-up resources.
 4. Obtaining written procedures and guidelines for referrals to, or mandatory participation in, the program.
 5. Obtaining training for supervisors in their role and responsibilities, and identification of member behaviors that would indicate the existence of member concerns, problems, or issues that could impact member job performance.
 6. Meeting the requirements of Md. Code PS § 3-523 for no cost mental health assistance for officers to address their personal and work-related concerns, including stress, financial issues, legal issues, family problems, office conflicts, and alcohol and substance abuse disorders.

1033.4 DEPARTMENT PEER SUPPORT

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1033.4.1 PEER SUPPORT MEMBER SELECTION CRITERIA

The selection of a department peer support member will be at the discretion of the Coordinator. Selection should be based on the member's:

- Desire to be a peer support member.
- Experience or tenure.
- Demonstrated ability as a positive role model.
- Ability to communicate and interact effectively.
- Evaluation by supervisors and any current peer support members.

1033.4.2 PEER SUPPORT MEMBER RESPONSIBILITIES

The responsibilities of the department peer support members include:

- (a) Providing pre- and post-critical incident support.
- (b) Presenting department members with periodic training on wellness topics, including but not limited to:
 1. Stress management.
 2. Suicide prevention.
 3. How to access support resources.
- (c) Providing referrals to licensed psychotherapists and other resources, where appropriate.
 1. Referrals should be made to department-designated resources in situations that are beyond the scope of the peer support member's training.

1033.4.3 PEER SUPPORT MEMBER TRAINING

A department peer support member should complete department-approved training prior to being assigned.

1033.5 CRITICAL INCIDENT STRESS DEBRIEFINGS

A Critical Incident Stress Debriefing should occur as soon as practicable following a critical incident. The Coordinator or designee is responsible for organizing the debriefing. Notes and recorded statements shall not be taken because the sole purpose of the debriefing is to help mitigate the stress-related effects of a critical incident.

The debriefing is not part of any investigative process. Care should be taken not to release or repeat any communication made during a debriefing unless otherwise authorized by policy, law, or a valid court order.

Attendance at the debriefing should only include peer support members and those directly involved in the incident.

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1033.6 PEER SUPPORT COMMUNICATIONS

Although the Department will honor the sensitivity of communications with peer support members, there is no legal privilege to such communications except as provided in Md. Code PS § 3-523.

1033.7 PHYSICAL WELLNESS PROGRAM

The coordinator is responsible for establishing guidelines for any on-duty physical wellness program, including the following:

- (a) Voluntary participation by members
- (b) Allowable physical fitness activities
- (c) Permitted times and locations for physical fitness activities
- (d) Acceptable use of department-provided physical fitness facilities and equipment
- (e) Individual health screening and fitness assessment
- (f) Individual education (e.g., nutrition, sleep habits, proper exercise, injury prevention) and goal-setting
- (g) Standards for fitness incentive programs. The coordinator should collaborate with the appropriate entities (e.g., human resources, legal counsel) to verify that any standards are nondiscriminatory.
- (h) Maintenance of physical wellness logs (e.g., attendance, goals, standards, progress)
- (i) Ongoing support and evaluation

1033.8 WELLNESS PROGRAM AUDIT

At least annually, the Coordinator or authorized designee should audit the effectiveness of the department's wellness program and prepare a report summarizing the findings. The report shall not contain the names of members participating in the wellness program, and should include the following information:

- Data on the types of support services provided
- Wait times for support services
- Participant feedback, if available
- Program improvement recommendations
- Policy revision recommendations

The Coordinator or designee should present the completed audit to the Chief of Police for review and consideration of updates to improve program effectiveness.

1033.9 EAP REQUIRED ASSISTANCE

Before returning to full duty, the following should be offered or provided to an officer as part of the EAP (Md. Code PS § 3-523):

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- (a) A voluntary mental health consultation and voluntary counseling services if the officer was involved in an incident that contained an accident resulting in a fatality.
- (b) A mandatory mental health consultation and voluntary counseling services for an officer seriously injured, involved in a shooting, or involved in a use of force that resulted in a death or a serious injury.

1033.10 TRAINING

The Coordinator or authorized designee shall collaborate with the E and T Lieutenant to provide all members with regular education and training on topics related to member physical and mental health and wellness, including but not limited to:

- The availability and range of department wellness support systems.
- Suicide prevention.
- Recognizing and managing mental distress, emotional fatigue, post-traumatic stress, and other possible reactions to trauma.
- Alcohol and substance disorder awareness.
- Countering sleep deprivation and physical fatigue.
- Anger management.
- Marriage and family wellness.
- Benefits of exercise and proper nutrition.
- Effective time and personal financial management skills.

Training materials, curriculum, and attendance records should be forwarded to the E and T Lieutenant as appropriate for inclusion in training records.