

State of Iowa Department of Corrections

Policy and Procedures

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1: Administration & Management Sub

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Staff Support Teams

PREA Standards: 115.67(b), 115.267(b)

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1. PURPOSE

To describe procedures to be used in Iowa Department of Corrections (IDOC) to provide assistance to employees and their families in the event of a traumatic incident, or due to a personal or professional crisis

2. POLICY

It is the policy of the IDOC to develop and implement a program to provide assistance and intervention to employees and their families during and after times of personal and professional crises, to include a major emergency.

CONTENTS

- A. Objectives
- B. Rules of Confidentiality
- C. Coordinators of Staff Support Teams (SST)
- D. Staff Support Team (SST)

- E. Supportive Services Provided by the SST
- F. Activating SST
- G. Consultation Services with Mental Health Professionals

3. DEFINITIONS – As used in this document:

1. Critical Incident Stress Management (CISM) - A comprehensive, integrative, multicomponent crisis intervention system. This systems approach offers multiple intervention options to achieve the goal of crisis stabilization and symptom mitigation for staff following a critical or traumatic incident and includes: (1) pre-crisis preparation, (2) disaster or large-scale briefings or staff advisement, (3) defusing, (4) Critical Incident Stress Debriefing, (5) one-on-one crisis intervention/counseling, (6) follow-up or referral. Also see **AD-PR-25 Attachment A** *Critical Incident Management (CISM) Guide*.
2. Corrections Fatigue - An umbrella term for a constellation of stressors and stressful circumstances, and the cumulative toll they can take, upon **corrections** professionals and upon the entire **corrections** workplace culture.
3. Crisis Response Services - Crisis intervention services often offered by a local mental health agency.
4. Critical Incident Stress Debriefing (CISD) – A post critical or traumatic incident group meeting with those staff who directly responded to the incident, providing a framework for the discussion of the event, the impact on the individual, and any resulting distress. The CISD includes dissemination of information and resources for staff to utilize following the CISD.
5. Defusing - Conducted a short time following a critical/traumatic incident with those who directly responded to the incident. The purpose is to assess the affected staff's immediate physical, emotional or psychological needs, and provide appropriate resources.
6. Employee Assistance Program (EAP) – An employee benefit program in the Department of Administrative Services (DAS) designed to provide counseling referrals for employees with personal problems and/or work-related problems that may impact their job performance, health, mental and emotional well-being.¹

¹ PREA Standard §§115.67/115.267

7. Major Emergency - An emergency which is life threatening, may not be contained by on-duty staff and/or which may require the assistance of off-duty staff or outside personnel.
8. Manager of the SST Program - Person who is assigned to oversee the implementation of the Staff Support Teams and the associated program, procedures, training and policy.
9. Staff Support Services - A broad range of services designed to provide for the needs of individuals affected by a critical incident or traumatic event, cumulative stress/corrections fatigue, or a personal or professional crisis. Services may include, but are not limited to, providing pre-crisis preparation information or training, providing Defusing services, scheduling a CISD, and providing one-on-one support and referral services.
10. Staff Support Team (SST) - A peer support team made up of staff that work under the SST Coordinators to provide emergency, staff victimization, and peer support services.
11. Staff Support Team Coordinators - A two-person peer support team responsible for coordination of the Staff Support Teams and programs in their respective Institution or District.
12. Traumatic Incident - An incident that significantly affects one's life, perhaps causing feelings of total loss of control, fear of loss of limb or life, or fear of permanent change to one's integrity. A traumatic incident is often unexpected, unpredictable, or of sudden onset, and it may generate severe panic. Such incidents include, but are not limited to, the following: physical assault; sexual assault; death of a staff member, volunteer, close work associate, or incarcerated individual/releasee; psychological assault or death threat; hostage or riot situation; natural disaster or fire; exposure to a potentially life-threatening disease; or witnessing of a suicide or an attempted suicide to a staff member, volunteer, close work associate, or incarcerated individual/releasee.
13. Victim Advocate - A person who works for a crime victim agency, is certified as a victim counselor by the crime victim agency, and is under the supervision of a crime victim agency, whose primary purpose is the rendering of assistance to the victims of crime.

4. PROCEDURES

A. Objectives

The objectives of the IDOC's SST Program are to:

1. Develop a plan at each site (institution, facility, site) in conjunction with this policy to provide an immediate, accessible and planned response to employees involved in a trauma-related or critical incident. Any critical incident response plan must have the approval of the Warden or District Director.
2. Establish a Staff Support Team (SST) of employees at each site (institution, facility, site) readily available on a daily/volunteer basis for the purpose of providing emergency, or peer support services to employees.
3. Assist an employee's access to community resources, as needed, to address trauma or stress related issues that impact the employee's functioning. Provide immediate access to victim advocacy services in the community for staff victims who have been victimized by a criminal act.
4. Promote confidentiality, trust, and anonymity for employees receiving SST services consistent with **Iowa Code section 622.10**.
5. Provide information about and referrals to supportive services for immediate family members of employees as needed or requested.
6. Provide opportunities for employees who receive services and those providing services to offer feedback in order to assess the effectiveness of SST services.

B. Rules of Confidentiality

The SST team members shall not disclose any information shared with them by an affected employee(s) with the exception of the following:

1. The SST team member may consult with the SST Manager, other SST Coordinators, or other SST team members.
2. Matters involving the following are not considered confidential:
 - a. Danger to self
 - b. Danger to others
 - c. Where divulgence is requested by the individual involved

- d. When required to give testimony in a legal action pursuant to **Iowa Code 622.10**.

C. Coordinators of Staff Support Teams (SST)

- 1. Selection
 - a. The Warden/District Director shall authorize the two-person SST Coordinator team.
 - b. It is recommended that all candidates for the Coordinator position have previous experience or training in trauma-related care, victim services, or similar field.
- 2. The SST Coordinators shall be responsible for the following duties:
 - a. Provide guidance and counsel to Warden or District Director on matters regarding staff exposure to traumatic incidents, accumulated stress or corrections fatigue.
 - b. Develop and maintain a listing of support services that may be available in the event of a major emergency, or traumatic event. Develop resources to assist individuals when problem areas are identified.
 - c. Provide critical information to staff who have been victims of a crime regarding their rights as a crime victim, and referrals to local victim service providers
 - d. Meet annually with other SST Coordinators to assess the program and identify or develop appropriate training to help improve skills needed for an effective staff support team.
 - e. Be prepared to offer support for staff and/or their families during a major emergency. The role of SST team members during such an emergency must be approved by the Warden or District Director.
 - f. Work to promote pre-crisis education and awareness of the SST program throughout the IDOC, and to provide assistance and guidance to all program members.

- g. Ensure that all active program members have participated in initial training and refresher training, as needed or required.
- h. Generate, and maintain a list of the SST team members and their telephone numbers and work site locations. Determine where such a list should be located. Promote the program and ensure staff of the respective Institution or District are aware of SST team members and how to access their services.
- i. Coordinate with SST team members in specific situations and make the final decision regarding the extent, location, and time of appropriate services and the need for ongoing or follow-up services.
- j. Provide statistical information and a summary of activities to the manager of the SST program, or the Warden or District Director as requested.
- k. Recruit and coordinate the screening of SST team applicants.
- l. Offer guidance to SST team members when problems occur.

3. Training Coordinator

- a. Upon selection, the Coordinators shall participate in an initial 16-20 hours of training as required by the manager of the SST program. Training shall be designed to ensure the Coordinators are familiar with available resources, and to develop the Coordinator's skills in the provision of peer support.
- b. It is recommended that Coordinators and team members be given opportunities to receive additional training and attend appropriate seminars and workshops in order to enhance his/her knowledge and skills.

4. Removal/Withdrawal

- a. District Directors/Wardens may request the removal of an SST Coordinator or team member in consultation with the manager of the SST program.
- b. The following actions may result in the removal of a coordinator/team member:
 - 1) Failure to participate in meetings/training during the year.
 - 2) Failure to follow established program guidelines.
 - 3) Any misrepresentation of the program goals and objectives that may prove harmful to the overall program.
- c. Coordinator/team member participation is voluntary. He/she may withdraw at any time, without prejudice, by stating in writing a desire to do so, and submitting it to the manager of the SST program or the Warden/District Director.

D. Staff Support Team (SST)

1. Selection

- a. All prospective SST team members shall complete an application form attached to this policy. The application is for screening and selection per established guidelines and the selection process may include an interview. (See **AD-PR-25 F-1**)
- b. The Staff Support Team should reflect the employee population of the work site.
- c. The SST team member selection criteria should include the following considerations:
 - 1) Accessibility for team meetings, training programs and calls out to respond to victimized staff,
 - 2) Respect and trust of peers,
 - 3) Ability to maintain confidence,

- 4) Maturity,
- 5) Ability to work within established guidelines,
- 6) Sensitivity to others and ability to listen,
- 7) Previous experience and training relevant to critical incidents, trauma, and/or victimization, and
- 8) Ability to work as a team member.

- d. Each SST team member may serve as long as they are willing and able to follow the expectations of this role.

2. Roles and Responsibilities of SST Team Members

- a. Actively participate and complete all training as required by the SST manager.
- b. Initial requests for SST involvement may be at the request of the affected employee or his/her Warden/District Director, supervisor or the SST Manager.
- c. A SST team member may be requested to provide services to other work sites based upon need.
- d. The SST team members should be prepared to act following a traumatic or critical incident. When contacted, the SST team member should immediately be relieved from duty (if necessary) to go to the aid of the affected employee and remain until the situation is under control and/or the affected employee is stable, or referred to other needed services.
- e. The SST team member may coordinate the provision of notification of the traumatic incident to the affected employee's immediate family member(s), and schedule a follow-up contact to provide information about and referrals to supportive services for family members.
- f. The SST team member may conduct a defusing, if trained in the provision of defusing, as early as possible after the incident to provide information to the affected employee and determine the need for further services. All affected staff should be offered a defusing.

- g. The SST team member may arrange a Critical Incident Stress Debriefing (CISD) for all staff impacted by a traumatic or critical incident. CISD's shall be approved by the Warden/District Director.
- h. The SST team member should be knowledgeable about and facilitate employee access to appropriate resources, such as: Human Resources, medical care, Employee Assistance Program, workers compensation, Crime Victim Compensation Program, community-based victim assistance programs, etc. and be available to the individual for additional follow-up support.

3. Training for SST Team Members

- a. A minimum of 16-20 hours of initial training is required for all SST team members and coordinated through the DOC SST Manager and shall include, but not be limited to, the following topics:
 - 1) Corrections and the scope of workplace violence;
 - 2) Characteristics of traumatic events, including criminal victimization, the impact on affected staff, and resulting mental health issues, recovery and resiliency;
 - 3) Overview of program components and services, members' roles and responsibilities, and SST-related policies and procedures;
 - 4) Confidentiality and privilege;
 - 5) The Critical Incident Stress Management model, including crisis intervention, defusing and debriefing; and
 - 6) Information and referrals to mental health services, victims' rights and services, and state or community-based victim services programs.
- b. It is recommended that each SST Team have members trained in the following:
 - 1) Emergency Preparedness
 - 2) Death Notification

3) Critical Incident Stress Management

E. Supportive Services provided by the SST may include the following:

1. Crisis Intervention;
2. Defusing/-Critical Incident Stress Debriefing (CISD) coordination;
3. Peer and Family Support services;
4. Staff Wellness activities and resources to mitigate Corrections Fatigue;
5. Assistance with Traumatized Employee's referral needs and/or return to work concerns;
6. Referrals to the Iowa Crime Victim Compensation Program, Employee Assistance Programs, victim services agencies, or other community resources;
7. Referrals to the IDOC Office of Victim and Restorative Justice Services (OVRJP) for additional peer or crime victim support/information.

F. Activating SST

1. Major Emergency
 - a. In the event of a major emergency, the SST Coordinator may establish contact with the command post, Warden/District Director or their designee as soon as possible.
 - b. The SST Coordinator may assist in the provision of support services to affected staff and/or their families including, but not limited to, provision of amenities and establishing a family briefing area.
2. Other than Major Emergency
 - a. In general, SST services shall be available to staff by request, or offered to them as appropriate. Participation in services is voluntary.
 - b. Critical Incident Response

- 1) Traumatic incidents shall be reported immediately to the Warden or District Director. Any doubt as to reporting incidents of this nature should be resolved in favor of reporting.
- 2) The SST Coordinator and Warden or District Director shall assess the incident to determine the appropriate SST response. Factors to consider include:
 - a) Severity and nature of incident
 - b) Number of individuals involved
 - c) Noticeable changes in employee's behavior
- 3) When the Warden or District Director determines that a Critical Incident Stress Debriefing (CISD) is warranted he/she may contact the SST Coordinator, or the DOC SST Manager to arrange for the CISD.
- 4) All staff directly involved in the incident, whether or not they experience any effects, are encouraged to participate in the CISD. Wardens/District Directors may require staff to attend a CISD for the initial introduction of materials and information, but further participation in the CISD should be voluntary.

c. Immediate Actions Following a Line of Duty Death (LODD)

- 1) When an employee is involved in a work-related incident which results in a fatality, the SST Coordinator and team shall utilize the Iowa DOC's Line of Duty Death Manual as a response guide.
- 2) In cases where the Line of Duty Death was the result of a criminal act, the SST Coordinator may consult with Iowa Homicide and Other Violent Crime (HOVC) advocates for assistance and guidance.

G. Consultation Services with Mental Health Professionals

1. SST Coordinators are encouraged to collaborate and consult with mental health professionals such as an IDOC Psychologist, the EAP, or community mental health providers
2. SST Team Members should be aware of their personal limitations and should seek consultation from an IDOC psychologist or the DOC's SST Manager when determining when to disqualify themselves from working with individuals who have problems for which they have not been trained or about which they may have strong personal beliefs.
3. Referral Procedure
 - a. Employees who demonstrate symptoms of personal or professional crisis may be referred to the SST Coordinator for evaluation and referral for outside assistance. Participation in counseling by the employee, however, is strictly voluntary and should be considered therapeutic and in the best interest of the individual's wellbeing.
 - b. The IDOC shall not consider referrals as disciplinary action, nor shall any bias be held against any employee who may be referred for treatment.
4. Voluntary Treatment/Access
 - a. Employees are encouraged to voluntarily seek information or access to the range of the staff support programs.
 - b. All contacts to the SST program shall be followed up by SST team members to ensure employees' progress/needs.
 - c. The IDOC shall be responsible for providing the SST.
5. An individual's decision to seek staff support services shall be voluntary.

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