I. POLICY

The Illinois State Police (ISP) will make appropriate assistance and support systems available for all employees.

II. RESPONSIBILITY

The Peer Support Advisor (PSA) Coordinator, Office of Equal Employment Opportunity (EEO), Office of Director (OOD), and PSA Regional Coordinators will oversee and supervise the daily operations of the Peer Support Program.

III. DEFINITIONS

III.A. Child Abuse/Neglect - as defined in the 325 ILCS 5/1, “Abused and Neglected Child Reporting Act.”

III.B. Critical incident - as used in this directive, means any work-related event with sufficient impact to produce significant emotional reactions in emergency services personnel at the time of the incident or later having the potential to overwhelm the person’s normal coping skills. This includes, but is not limited to:

III.B.1. Line of duty death
III.B.2. Serious line of duty injury/assault/sexual assault
III.B.3. Suicide
III.B.4. Officer-involved shootings/victim of shooting
III.B.5. Disarming/siege/hostage
III.B.6. Disappearance/kidnapping
III.B.7. Multi-casualty incident/disaster
III.B.8. Significant event involving children
III.B.9. Knowing the victim of an incident


III.E. Elder Abuse/Neglect - as defined in 320 ILCS 20/1, “Elder Abuse and Neglect Act.”

III.F. Employee - any individual acting on behalf of the Department, including sworn officers and civilian personnel. Employee includes both retired and currently employed personnel.


III.H. Homicidal - anyone possessing the intent to take another’s life. This behavior can be observed through either direct means or implied through written/verbal means.
III.I. Peer Support Advisor (PSA) - an employee who voluntarily provides confidential support and assistance to fellow employees experiencing personal or professional problems. This is accomplished primarily through listening, assessing, assisting with problem-solving, making referrals to a professional when necessary and conducting follow-up as needed.

III.J. Peer Support Advisor Coordinator - a sworn or code employee appointed by the Chief of EEO, and confirmed by the Chief of Staff, OOD, to oversee and supervise the daily operations of the Peer Support Program.

III.K. Peer Support Advisor Regional Coordinator - a sworn or code employee appointed by the Chief of EEO, and confirmed by the Chief of Staff, OOD. One PSA Regional Coordinator will be assigned to each of the four operational Regions within the ISP.


III.M. Suicidal - anyone possessing the intent to take one’s own life. This intent can be observed through either direct means or implied through written/verbal means, and/or through self-destructive behaviors.

IV. PROCEDURES

IV.A. Support for department personnel and their families in times of need is the primary and paramount responsibility of the Peer Support Program.

IV.B. The Peer Support Program is meant to be proactive and is designed to reach out to employees and their families in times of need to offer support, guidance, referral, and any other appropriate assistance.

IV.C. Program Coordination

IV.C.1. The PSA Regional Coordinators (or designees) will:

IV.C.1.a. Provide advice and guidance relative to the program’s operation and selection of PSAs.

IV.C.1.b. Check messages and delegate messages affecting their respective Region on a daily basis and ascertain if any incidents require contact from a PSA.

IV.C.2. PSA Regional Coordinator selection process:

IV.C.2.a. An individual must volunteer for the position and submit written approval from his/her supervisor.

IV.C.2.b. The individual will interview with the PSA Coordinator when more than one person volunteers for the position.

IV.C.2.c. The PSA Coordinator will request the Division of Internal Investigation check to ensure the employee has not had any disciplinary action within the last 24 months that resulted in a suspension of at least three days.

IV.C.2.d. The PSA Coordinator will appoint the PSA Regional Coordinator with approval by the EEO Chief and confirmed by the Chief of Staff, OOD.

IV.D. Program Personnel

IV.D.1. Program staff consists of volunteer employees who serve as PSAs.

IV.D.1.a. Participation in the program is voluntary.

IV.D.1.b. No overtime will be authorized.

IV.D.1.c. All efforts should be made to use PSAs while they are working since no overtime is available.

IV.D.2. Position Requirements:

IV.D.2.a. An excellent service record (have not had any disciplinary action within the last 24 months that resulted in a suspension of at least three days)

IV.D.2.b. Excellent ethical and moral values with the ability to maintain strict confidentiality
IV.D.2.c. A strong desire to help others
IV.D.2.d. A sincere appreciation of, and willingness to work with, all people and cultures
IV.D.2.e. An ability to be empathetic while maintaining emotional stability
IV.D.2.f. An ability to be non-judgmental and non-aggressive
IV.D.2.g. An ability to listen to others while keeping personal projections to a minimum
IV.D.2.h. An ability to accept rejection and show respect to others
IV.D.2.i. Successful completion of 32 hours of Peer Support Training

IV.D.3. PSA Selection Criteria

IV.D.3.a. Three PSA evaluation forms (a copy is available from EEO) will be supplied by the PSA Coordinator to the PSA candidate for distribution and completion by the following people:

IV.D.3.a.1) A peer
IV.D.3.a.2) His/her immediate supervisor
IV.D.3.a.3) His/her Commander/Bureau Chief/Lab Director

NOTE: These forms should be completed prior to the PSA Coordinator scheduling an oral interview.

IV.D.3.b. The applicant will participate in an oral interview by a panel of EEO personnel.
IV.D.3.c. The PSA Coordinator and EEO Chief will recommend the applicant to the Director’s Office.
IV.D.3.d. The PSA Coordinator will request the Division of Internal Investigation check to ensure the employee has not had any disciplinary action within the last 24 months that resulted in a suspension of at least three days.
IV.D.3.e. The Director’s Office will have final approval authority of the applicant.

IV.D.4. Service Assignment

IV.D.4.a. Peer Support duties will be performed in addition to regular assigned duties of the PSA.
IV.D.4.b. PSAs will respond to assignments as directed by the PSA Regional Coordinators or the PSA Coordinator, or designee, since these assignments can be of a critical nature.
IV.D.4.c. Requests for Peer Support assignments will be made through the PSA’s Commander/Bureau Chief/Lab Director from the PSA Regional Coordinator and/or the PSA Coordinator. Every effort will be made to allow the PSA to respond to the needs of department personnel and their families unless removing the PSA from normal duties presents a greater hardship to their primary assignment.
IV.D.4.d. PSAs may voluntarily withdraw from participation in the program at any time with immediate notification in writing to the PSA Coordinator.
IV.D.4.e. PSAs will be removed from participation in the program for:

IV.D.4.e.1) Conduct inconsistent with program objectives
IV.D.4.e.2) Sexual conduct or a personal relationship between the PSA and the person being assisted (during the time the assistance is being provided)
IV.D.4.e.3) Receiving a disciplinary suspension of at least three days

NOTE: The PSA Coordinator will make an annual request to the Division of Internal Investigation to check to ensure the current PSAs have not had any disciplinary action within the last 24 months that resulted in a suspension of at least three days.
IV.D.4.f. The PSA Regional Coordinator will:

IV.D.4.f.1) Document any voluntary or involuntary failure to respond to a request for service.
IV.D.4.f.2) Forward the documentation to the PSA Coordinator for review in order to prevent future voluntary or involuntary failure to respond to requests for service.

IV.D.5. Support Resources

Department resources will be available through EEO to assist the PSAs.

IV.D.5.a. PSAs may use available department vehicles or their assigned vehicles to travel to and from peer support-related meetings with other employees. The Department will reimburse travel expenses or training and assignment referrals to a location outside the PSA’s current assignment, when approved by the OOD.

IV.D.5.b. PSAs are authorized to use department facilities to meet with employees. If such facilities are not available or conducive to the meeting, the PSA is authorized to use other facilities where privacy can be ensured.

IV.D.5.c. PSAs may consult with employees while the PSAs are on duty with approval of the PSA’s immediate supervisor.

IV.D.5.c.1) Supervisors should grant such requests unless to do so adversely affects operational needs.
IV.D.5.c.2) PSAs will not give employee names or personal identifiers to the supervisor.

IV.E. Program Services

The program’s services are directed toward both service connected and non-service connected problems.

IV.E.1. Access and Outreach

All employees will be made aware of the services offered as well as the limitations/ restrictions of the Peer Support Program through various methods of communication.

IV.E.1.a. All personnel will receive written information about the PSA Program to enable them to make appropriate referrals to a PSA.
IV.E.1.b. A toll-free number, 1-800-237-7987, has been established for the Peer Support Program that can be used on a 24-hour basis.
IV.E.1.c. Presentations on the Peer Support Program will be conducted, as requested.
IV.E.1.d. The PSA Regional Coordinators and the PSA Coordinator will assist PSAs in conducting outreach with employee organizations, professional associations, and other groups, as requested.
IV.E.1.e. The PSA Regional Coordinators and the PSA Coordinator will monitor traumatic incidents and notify the appropriate PSA when outreach should be initiated.
IV.E.1.f. PSAs will monitor events and circumstances within their assigned geographic areas and will immediately report all critical incidents (and other circumstances that may warrant more than one-to-one intervention) to the PSA Regional Coordinator.

IV.E.2. Referral Network

IV.E.2.a. The EEO maintains a statewide manual of support groups and services available in the state of Illinois.
IV.E.2.b. When necessary, the PSA will act as an advocate for the employee and assist them in obtaining any professional assistance needed.
IV.E.2.c. All professional referrals for employees should go through the employee’s specific insurance plan first to avoid out of pocket expenses.
IV.F. Confidentiality

IV.F.1. The PSA’s most important responsibility is the promotion of trust, anonymity, and confidentiality for employees who seek assistance from the program.

IV.F.2. Authorized Breach of Confidentiality

All communication between the PSA and the employee and information obtained by a PSA in connection with services to an employee will remain confidential, EXCEPT for the following:

IV.F.2.a. Information regarding any violations of law by the employee
IV.F.2.b. Information that suggests the employee is suicidal or homicidal
IV.F.2.c. Any information mandated by law or directive to be reported, including, but not limited to:

   IV.F.2.c.1) Domestic violence
   IV.F.2.c.2) Child abuse/neglect
   IV.F.2.c.3) Elder abuse/neglect
   IV.F.2.c.4) Information related to Discrimination, Harassment, and Retaliation to the extent reporting is required (see ISP Directive, PER-032, “Discrimination, Harassment, and Retaliation.”)

IV.F.3. Unauthorized Breach of Confidentiality

IV.F.3.a. The PSA Coordinator and the respective PSA Regional Coordinator will investigate any written complaint from the involved employee of an unauthorized breach of confidentiality.

IV.F.3.b. If, upon a completed investigation, a breach in confidentiality is found to have occurred by a PSA, that PSA will be terminated from the program.

IV.F.4. Consultation

IV.F.4.a. Consultation may occur among PSAs, the PSA Regional Coordinators, or the PSA Coordinator, to enhance the PSAs understanding of a difficult situation and to assist the PSA in determining the best course of action to take in helping the employee.

IV.F.4.b. All identifying information will remain confidential, except in cases of absolute necessity at which time the employee being assisted must sign a Peer Support Advisor Confidential Disclosure Authorization form 8-030a (this form is available in the ISP Document Library at http://maphome/documentlibrary/).

IV.F.5. Authorized Release of Confidential Information

IV.F.5.a. If a PSA believes the release of specific information would prove helpful to an employee, the PSA will discuss this with the employee.

IV.F.5.b. If the employee agrees to the release of information, a Peer Support Advisor Confidential Disclosure Authorization form 8-030a will be completed in detail.

IV.F.5.c. Only information specified on the Peer Support Advisor Confidential Disclosure Authorization form 8-030a is authorized for release.

   IV.F.5.c.1) This information will only be released to those persons/entities so indicated.
   IV.F.5.c.2) Information not specified on the Peer Support Advisor Confidential Disclosure Authorization form 8-030a will remain confidential.
IV.F.6. Peer Support Confidentiality Warning

PSAs will provide the following Confidentiality Warning to any employee requesting PSA assistance:

“It is important you understand that all information shared by you is confidential; EXCEPT for matters which involve all violations of law, if you or someone else you report is suicidal/homicidal, or if you report an act involving child abuse/neglect, elder abuse/neglect, domestic violence, Discrimination, Harassment, and Retaliation or sexual harassment which mandates reporting.”

IV.G. Duty to Report

IV.G.1. When an employee discloses to a PSA his/her involvement in any violation of the law or that he/she committed an act that mandates a report be made, the PSA must report the violation to the employee’s respective Commander/Bureau Chief/Lab Director. In addition, the PSA must notify his/her respective PSA Regional Coordinator and the PSA Coordinator.

IV.G.2. When the employee discloses that he/she is suicidal, the PSA must follow the guidelines on the Suicide Evaluation form provided in the Peer Support Manual.

IV.H. Record Keeping

All PSAs and PSA Regional Coordinators must complete a Monthly Peer Support Activity Report.

IV.H.1. Only basic statistical information will be documented. No names will be recorded.

IV.H.2. PSAs will submit all monthly reports to the respective PSA Regional Coordinator and separately to the PSA Coordinator by the seventh day of the following month.

IV.H.3. PSAs will submit monthly reports even if there is no activity to report.

IV.I. Peer Support Advisor Pin

IV.I.1. The PSA pin is one way the Peer Support Program is advertised and marketed. The pin is circular in shape with “ISP Peer Support Advisor” around the outside. The center of the pin is white with the ISP logo engraved.

IV.I.2. PSAs will wear the pin at all times when at work or when involved in work-related business.

IV.I.3. Code personnel will wear the pin around the collar or chest area of their outer clothing, not to include winter coats or jackets designed for outside use only.


Indicates new or revised items.

-End of Directive-