#### PHOENIX FIRE DEPARTMENT

#### **VOLUME 1 – Operations Manual**

# MEMBER SERVICES / MEMBER ASSISTANCE PROGRAM

MP105.01A 10/18 - R

## **Background**

The Phoenix Fire Department Member Services Program is Labor and Management working together to provide resources and tools to enhance our member's quality of life. Our members encounter the same daily stress as the general population such as: finances, relationships, raising a family, caring for sick or injured family members and elder care issues. In addition to these, firefighters are also exposed to on the job stress such as sleep deprivation, traumatic and cumulative effects of calls, repeat callers, and industrial injuries. The combination of life and job stressors can negatively impact our member's wellness if not properly dealt with throughout our careers / lives.

# **Member Services**

Member Services is a Joint Labor/Management team created to monitor the efficiency of services provided and to ensure compliance with policy and procedures. *Our mission: Our Family Helping Our Family* 

Member Services exists to support our fire department family through any challenges they may face and assist in connecting each other to available resources. Member Services encourages members to watch out for each other, and to seek support early and to deal with life challenges while they are still small. The success of Member Services relies on you, if you see a member that could use help, we are here to help you get them connected.

United Phoenix Fire Fighters Local 493 provides Behavioral Health programs for sworn and non-sworn employees and their families. These services are free of charge to employees and their families. Additional services are provided by the City of Phoenix health care benefit plan. These resources can be accessed and found at www.firestrong.org.

#### **Phoenix Fire Department**

Phoenix Fire Department Member Services section staff positions:

#### **Deputy Chief**

Facilitate the Member Services Subcommittee, peer support team, Firestrong resources, retiree program, develop and coordinate trainings, oversee leave tracking and high stress incident programs, develop and maintain community partnerships, provide ongoing support, outreach and referrals.

#### Cantain

Work with battalion chiefs to develop a plan to communicate with their battalion members and rovers to identify those experiencing high levels of stress and providing the proper resources to mitigate the stress. Monitor high stress incidents, assign peers to follow up with members and crews after high stress incidents (HSI) (see MP 105.01B, High Stress Incident Protocol) as needed, and follow-up with battalion chiefs. Monitor sick leave usage report and follow up with battalion chiefs. Maintain communication with members on industrial leave.

## **Member Services Coordinator**

The Member Services Coordinator works with department members and their families to help find the appropriate resource to mitigate their crisis. This position provides consultation, outreach and training, and helps advise the Peer Support Team to ensure compliance of policies and procedures. The Member Services Coordinator is a member of the Mental Health Task Force Advisory Board and assists with training of Peer

members. Assist with compliance of High Stress Incident follow up. Provide relevant mental health education during battalion wide company, Captain, and Battalion Chief trainings.

# **Peer Support Team Coordinator**

This position assists with the peer team profiles and resources on the Firestrong.org website, coordinates marketing of programs, assists with training of Peer Support Team members, and updating of resources and testimonials on department webpage, assign and follow up with members and crews after high stress incidents (HSI) as needed. Available to assist all members and their families with accessing mental health resources.

# **Peer Support Team Members**

Members on this team have successfully completed the Peer Support Team training course, as well as maintain the mandatory continuing educations classes. They provide support to the membership through self referral and high stress incident support and outreach. Member of the team maintain their knowledge of the mental health benefits and resources available to the members and their families.

#### **Local Union 493**

Local 493 Member Services programs and positions:

#### V.P. of Member Services

The V.P. of Member Service facilitates an array of services to fire department members such as oversight of Behavioral Health Assistance Programs contract, Employee Assistance Program contract, Firestrong website management and resources, assisting with funeral arrangements, following up with crews and members after high stress incidents, acquiring medical equipment and special charity events, following up and assisting with retirees.

#### **Member Services Trustees**

Assist the V.P. of Member Services carry out services and assist with funeral arrangement, hospital visits, medical equipment, charity events, and any other assistance necessary to help our members, their families, and retirees.

# **Behavioral Health Assistance Program (BHAP)**

The services for these programs are contracted by Local 493 and are in place to provide the following services to the Phoenix Fire members and their families as recommended by NFPA 1500 (section 11.1.1 – 11.1.4). Services are provided free of charge and are confidential in protection afforded by the Health Insurance Portability and Accountability Act (HIPAA).

- Provide assessment and coordination to appropriately trained EAP counseling providers for Trauma, Substance Abuse, or general mental health counseling.
- Trauma/Post-Traumatic Stress related evaluations from High Stress Incidents
- Assist with crisis stabilization of members and their family
- Consultation to supervisors on mental health related issues and assist with evaluation and oversight of member's ability to perform essential job functions and adhere to Conditions of Employment/Remand

The EAP provides counseling sessions to Members and anybody living in their household. Pursuant to Arizona House Bill 2310 (effective July 2017) members are eligible to receive up to 12 counseling sessions by a licensed counselor who has had training and expertise in Trauma.

Examples of situations that the state has deemed a requirement to offer counseling

- In the case of a public safety employee: visually witnessing the death or maining or visually witnessing the immediate aftermath of such a death or maining of one or more human beings
- Responding to or being directly involved in a criminal investigation of a dangerous crime against a child
- Requiring rescue in the line of duty where one's life was endangered

Behavioral Health Assistance Program (BHAP) services will work with the member or household member to find a therapist that will accept their medical insurance if long term counseling is needed.

• All behavioral health resources, instructions and benefits are listed on the Phoenix Fire Department resource page on the FIRESTRONG.ORG website.

# **Firestrong Website**

Firestrong is a website with online resource for members of the Fire Service and their families. The mission of Firestrong is to offer mental, emotional, and physical support to each member of the fire department and their families by providing educational tools, resources, crisis intervention assistance (crisis line) and peer support services.

# **Fire Support Line**

This is a member support line that is completely confidential and separate from the department or union and available 24 hours a day. They can provide crisis stabilization and referrals on the phone or send out a trained crisis intervention team, in unmarked vehicles, to help members and their family on or off duty. The Fire Support contact number is 602- 845-FIRE (3473)

# Behavioral Health Assistance Program (BHAP) Supervisory and HR/Personnel Services Supervisory Consultation

Supervisory consultation is a resource tool for supervisors and managers to use for employees who are experiencing emotional issues which are or have the potential to impact job performance. The supervisor's focus should be on job performance issues and refer to the appropriate professional for counseling. Counseling services are available for employees who have been recommended or remanded.

# Supervisors may also need Member Services Support. Any member regardless of rank can help another member get help.

#### Recommendations

Supervisory <u>referrals</u> are made in the event a supervisor notes that employee is experiencing emotional/psychological difficulties but have not reached the point of significantly impacting job performance. Supervisors noting or being informed by the employee that they are experiencing personal problems may be provided information about counseling services as a matter of concern and caring by the supervisor.

When recommendations are made, the supervisor is not informed of the employee's attendance, course of treatment, or discharge date. Employees receiving counseling services through supervisor recommendations are covered by all the statutory rights of confidentiality afforded a self-referral.

#### Remanded

In the event a supervisor determines that job performance is negatively impacted and the employee is requiring counseling services, he or she may be mandated to the Program as a condition of employment.

When an employee is remanded for care he or she will be required to sign a release of information during their consultation with their supervisor. This release specifies that the provider release to the Department and the supervisor:

- 1. Confirmation that the employee is attending counseling sessions
- 2. Progress on treatment plan

- 3. Reports of drug screens where this is required
- 4. Cooperation and motivation of the employee in counseling
- 5. Date of completion of services

#### **Client Records and Files**

An individual client record documenting presenting problem, treatment process and termination/close-out information for everyone who utilizes the employee assistance program is maintained. Those records are the property of the provider and are confidential and maintained accordingly.

# **Policy**

Federal confidentiality regulations, data privacy acts and State Statues regarding confidentiality of client information are strictly followed. Exceptions to these standards may be required by law if the member presents an obvious danger to self or others, child or elder abuse. The other two exceptions will be to fulfill the requirement of a court subpoena or national security risks.

Names of employees or dependents that utilize this service shall not be made available either directly or indirectly to any party as explained in the above paragraph.

In the case of supervisory referral, the supervisor will be notified when the initial appointment is made only with the written approval of the client.

Employee Assistance Program records and information will not be disclosed or provided on receipt of a subpoena for records without a signed consent from the client on file with EAP, unless EAP subsequently receives a court order ordering disclosure, and that the court order has been reviewed by legal counsel before compliance with the order.

## **Additional Resources**

# Crisis Response (CR) Supervisors

The CR supervisors can be directed by Fire Department Management or Member Services Staff to assist with member service issues. They are master level clinicians with a wide range of experience navigating mental health and social services resources, grief, child IEP school issues, elder care issues, domestic violence, custody, and crisis intervention and management.

## **Peer Support Team Program Policies**

# Mission Statement: Listen, Refer, & Support

Peers are to Listen to the member to understand their situation and possible needs. If it is appropriate according to the member's situation they are to then Refer the member to the appropriate Professional Provider and/or Program. Afterwards, the Peer is to continue to Support and reevaluate their needs. The Peer Team member's role is one of support and allowing the Professional Provider to facilitate the members' reactions to a critical incident, job related stress or personal crisis.

#### **Purpose**

The Peer Support Team functions as a means for members to utilize other members for emotional support of everyday issues, and to provide information and assistance. The support team acts as a liaison for connecting members with complex or more severe issues to wellness professionals. Peer Support Team members are not trained mental health professionals, but are trained to Listen, Refer and Support fire department members and their family.

The Peer Support Team is comprised of department members who have been specially trained in stress management, crisis intervention and communication techniques. Support team members will work in conjunction with designated mental health professionals.

#### **Policy**

The Peer Support Program shall consist of volunteer Peer Support Team Mentors who have had training in active listening skills, referral and crisis intervention. This includes common issues and feelings associated with critical stress. These volunteers will be trained to provide support and reassurance to fellow members who are experiencing job or personal stress, a critical incident and/or are in crisis. Peers will not break confidentiality unless the person is a danger to himself/herself or to others.

Peer support is not to be considered a substitute for professional counseling. Peer Support members are not trained mental health professionals; they are peer support providers. All peer support activities shall be voluntary. It is only meant to be an extra available resource to the members when needed. Members may choose to utilize or reject Peer Support services.

# Peer Support Advisory Board (Consists of Member Services Deputy Chief, L493 Member Services Vice President, and Licensed Behavioral Health Professional)

- Oversees the selection of Peers
- Develop and advise on policy
- Constitute a line of authority from the Mental Health Professional to the department
- Receive information on the progress of the program
- Help find funding for the program
- To provide administrative support to the program
- Evaluate the program's operation
- Maintain adherence to the Peer Support Program Standard Operating Procedures

# **Peer Support Team Coordinator**

The Peer Support Team Coordinator manages the program and coordinates the team of peers and the role is designed to be the link between the program and the Board.

The functions of the Peer Support Team Coordinator are:

- The Peer Support Team Coordinator is appointed by the Advisory Board and their main responsibility is to assist the Advisory Board in continuous evaluation and maintaining of the Peer Support Program.
- Have a running list of professional resources for potential referrals.
- Maintain an accounting of resources utilized by the Program, including appropriate statistical data.
- Coordinate the educational materials for the Peer Support Program.
- Coordinate individual peer support outreach to members after high stress incidents.
- Ensure that Peers adhere to the Program's confidentiality policies.
- Receive complaints regarding any part of the Program, process, advise Advisory Board of major complaints, and notify complainants of action taken **Goals of the Peer Support Team Program**
- To provide an added resource that will aid members and their families in their personal and professional crisis situations and to continue to nurture their mental and emotional wellness.
- To provide a liaison between the member and their resources for support.
- To continue to build a reputation that members can trust and ultimately a successful program.

# Member Services Leave Use Tracking and Industrial Injury Leave Use Tracking

An increase in sick leave use is often an indication that a member is dealing with some type of life stressor. Leave use tracking is a means to identify these members and get them connected early with appropriate resources. A leave report is generated and analyzed each quarter and presented to battalion chiefs and sections heads by Member Services staff.

The criteria for a member to appear on this report is 100 hours or less accumulated sick leave, or 4 or more sick leave occurrences in 90 days. This report is generated as an awareness to supervisors and is non-punitive in nature.

# **Industrial Injury**

Being off of work due to an industrial injury for an extended period of time can significantly impact a member's quality of life. These members are usually in pain and are placed off of work and often become distanced or isolated from their crews at the station. This situation can both physically and psychologically effect the injured member and their family. Members who are on industrial leave will be contacted by Member Services on a monthly basis to see how they are doing and if additional support or resources are needed. This contact is in addition to the communication already provided by Health Center staff.

# \*8 Function of Crisis Care Flow Chart



- Person is Safe.
- No need for crisis professionals.
- Offer support, CR Supervisors, Peer Support Team, (Department Counselor, Member Services, EAP, or Counseling through insurance all resources are on Firestrong.org.
- Assign person to check in with this member before next shift.
- Remember you can use Supervisor Referral to aid in accountability for them to seek help.

# 8 Functions of Member Services Crisis Care

Listen, Refer, and Support (Call for help early before things get big)

# **Assume Command**

- Point of contact.
- Listen & Support. Non-Judgmental.
- Define issue and problem.

START

- Start thinking will you need support
- Second person to assist you
- Do you need to take truck out of service.
- Bring others in before it gets big

#### Evaluation / Size up

- Evaluate:
  - Member Condition
  - History of Behavior
- Red Flags at home. (Divorce, substance use)
- Danger to Self or Danger to Others (DTS/DTO).
  - -Do they have a Plan?
- Can this be de-escalated
- What does your gut say?
- Can this person be left alone. If ,YES go up.
- If NO continue flow chart.
- "For-Cause" Drug Test?

#### Communications

- If this person can not be left alone.
- Initiate phone contact with professionals.
- Don't work alone.
- Be open and transparent with the member on your concerns.
- Convince them to stay with you.
- DO NOT LEAVE THIS PERSON ALONE.

#### Deployment

- If resources are coming let the person know the plan, as appropriate.
- Do they need hospitalization.
- See if they have a peer they would like to call for support.
- What support do they already have in their life; spouse, therapist.

#### Strategy

- Develop an action plan with member and professionals.
- Is this Offensive (Need to act fast) Crisis mobile teams/Rescue to get member to a facility.
- Is this defensive (slow down operations) Talk the person into going to the facility.

#### • Organize the plan into sections.

- Who is going to take the person.
- Who will contact Shift Command.
- Do you need a move up truck as the crew may need some time to get their heads straight.
- Do you need somebody for the crew. Let professional and personnel know

- Review and revise strategy as needed.
- Hand operations over to Member Services and or Personnel.
- They will revise and work with ongoing treatment of member including paperwork, remand, or Referral therapist -Dept. Counselor and then Alternative Assignment as needed.
- Member Services/Personnel will provide continuity of care working with Dept. Counselor.
- They will keep appropriate persons involved of progress as needed until discharge of member back into field as they are determined fit for duty.

Organization / Sectors

**Review Evaluate Revise** 

**Termination / Transfer** 

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**Assume Command**: Point of Contact

Evaluate: Member Condition

Are they a Danger to Themselves or Others (DTS/DTO)

If they are not DTS or DTO go over resources and phone numbers

Think about Supervisor Referral

Communication: If they are DTS or DTO call professionals

Deployment: Bring in others to help you before it gets Big

Do Not Leave this Person alone

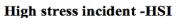
Strategy: Make a plan with Professionals on where the best place is to take this member

Organization / Sector: Who will transport the member, who will stay with the member?

Review, Evaluate, Revise: Member Services will continue with treatment and follow-up

Termination / Transfer: Members Services / Personnel will keep appropriate persons involved of progress and

"fit for duty" status



- Let crew know that you are aware of the call they have been on
- Ask them about the call. "Tell me what happened on this call?"

"What information were you given prior to arrival?"

"What happened on-scene?"

- Listen for information or cues on how they feel about what took place. If you sense anger or frustration at customer, parents, PD, hospital staff, or other members don't agree or disagree, just listen and tell them you hear and understand their frustration
- If you sense they are feeling good about how the call was handled, commend their actions if they were beneficial
- Try to ascertain if any of the crew members have personal circumstances that are similar to the HSI and remind them of FIRESTRONG.org to find resources and peers and/or advise them to go home.
- Tell crew that they know each other better than anyone and to look out for each other. If the call continues to carry with them in their thoughts, remind them to talk about it with other peers, trusted supervisors, family, and friends. Utilize FIRESTRONG.ORG for other helpful options. Emotions and stress are normal to experience in this type of job. Every call will affect everyone differently. It depends on what's going on in your life at this moment and what has gone on in your life prior to this moment.
- CR supervisors can assist in retrieving answers to questions crews may have about the incident by gathering info from CR crews that were on scene or PD detectives that worked the incidents. CR supervisors and member services staff available to have reach out respond and allocate peers for support services.
- It is normal to replay an incident over in your mind but if this starts to affect your ability to concentrate, sleep etc and is not diminishing over a couple of days then you should seek out the following resources. Once you reach out and talk through this incident or others that might be contributing to the reaction you will unload the stress. If you don't it will keep accumulating with each call or stressful situation you encounter at home or at work.

Physical distress: Headaches, Muscle spasms, Fatigue/exhaustion, Indigestion, nausea, vomiting

Severe Physical distress: Chest pain, Re-current headaches, Persistent Irregular heartbeats Emotional distress: Anxiety, Irritability, Anger, Mood swings, Depression, Grief

Severe Emotional Distress: Panic attacks, Overwhelming feelings, Persistent flat affect, Lack of emotional expression, Speaking in monotone voice, Absence or diminished

facial expressions, Immobilizing depression

Behavioral Distress: Impulsiveness, Alcohol/Drug Use, Hyper startle, Sleep disturbance, Withdrawal, Family Discord

