



Critical Incident Reintegration Program

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Critical Incident Reintegration Program

A streamlined, peer-driven return-to-work program for police officers and other public safety personnel, featuring an interactive process of dealing with the stress of a critical incident.

The program has two variants: **short term** and **long term**.

Short-term Program

Audience

Police officers and other public safety personnel, who have experienced critical incidents, like officer-involved shootings, fatal Conductive Energy Weapon deployments, fatal or serious collisions involving first responders, and serious “use of force” events.

Goals of the Short-term Reintegration Program:

The primary goal is to get the officer back to work shortly after a critical incident while diminishing the potential for long-term psychological injury. There is

a step-by-step process involved that can address the unique stressors officers may experience soon after a critical incident. The pace, scope, depth and goals of the program must be dictated by the individual officer.

The program has been designed to acknowledge that the officer has been through a potentially traumatic event and to provide the opportunity to work through any triggers the event has created, while ensuring the officer is in the safety of a controlled environment. This ensures that the officer is able to properly reflect on the event at his or her own pace while regaining his or her confidence post-event.

Steps within the Short-term Reintegration (post-shooting) Program

Prelude:

Once the initial investigative steps are completed the day of the shooting, the officers should be afforded time off to spend with their families and to begin the process of returning to normal.

Prior to the start of the reintegration process and once it is completed, the involved officer should be seen by a registered, organizational psychologist to confirm that he or she is ready for reintegration and subsequently, ready to return to operational duties once the reintegration process is complete.

The reintegration process typically starts 5-10 days after the shooting. Once the reintegration date is set, one of the reintegration instructors will make contact with the officer to ensure that there is no confusion related to the details or the purpose of the meeting. Depending on the specific case, a home visit or coffee discussion may be appropriate.

Stage 1:

Initial meeting.

The importance of this first meeting cannot be overstated. This meeting is designed to establish trust between the officer and the instructor involved in the reintegration process. Officers and instructors may be in or out of uniform. The meeting must not be in close proximity to the range where sounds and smells may trigger a reaction.

At this meeting, the officer is afforded the opportunity to tell his or her story. This allows the instructors the opportunity to normalize the reactions the member

has been experiencing since the shooting. Additionally, this identifies the areas that the instructors need to pay attention to in later stages.

Instructors need to ensure that they never make this stage about themselves and their own experiences. Although instructors can use quick stories to aid in bridging communication, this process is about the "client."

Any details that an instructor has learned from other officers that were at the same operational event and have already come through a reintegration, must be kept from the officer being worked with at the time. In essence, all efforts must be made to avoid cross-contamination of information to protect the integrity of the overall investigation and any eventual court proceedings.

Stage 2:

Physical dexterity of firearm.

This may include: touching, racking, loading magazines, dismantling a firearm, or wearing eye and ear protection. Dry-firing of a gun is an important aspect of this stage to reconnect the officer to the weapon. This stage may take place on the same day as the initial meeting or at a time more suitable. The speed of this part of the program is driven by the officer involved, with no pressure to complete anything he or she is not comfortable with.

Stage 3:

Acclimation to gunfire.

The officer is located away from the range, gradually moving towards the sound of gunfire. The officer will be encouraged to get as close to the firearm as he or she feels is needed. A similar process can be used for

other stimuli that may have been present at the time of the critical incident (i.e., cracking of a Conductive Energy Weapon, engine revving, etc.)

Stage 4:

Live fire.

The officer begins to fire live rounds. New drills will be introduced as the officer's confidence increases with the weapon. Some experimentation is allowed to try to make it fun for the officer.

Stage 5:

Officer-directed training.

The officer needs to confront reality and regain confidence in the use of his or her weapon and feel in control of his or herself, the suspect(s), and the situation. Commence with easy low key scenarios. Our experience suggests this is often the first time post-incident that the officer starts to feel some overall control again.

Once this stage is complete and the officer has indicated that he or she is feeling comfortable with the firearm and the instructor has no concerns, the reintegrated officer is cleared out of the program

Stage 6:

Reintroduction.

The officer returns to normal training and eventual requalification. It may be prudent to make instructors aware of the situation on the day the officer returns for requalification.

Stage 7:

Followup.

The reintegration team should followup with the officer at the one month, three month and one year anniversary to check on progress and ensure continuity of support.

The process for non-firearm related incidents should follow the same overall template used for officer-involved shooting events as outlined above. Importantly, officers that were at the scene of the shooting, who were in a position to shoot but were unable to for whatever reason, should also come through the short-term program. Often, these officers struggle more than the officers who did fire their weapon because of concerns over self-doubt and a decrease in confidence.

Both shooters and non-shooters should attend the range or start the short-term process within 7-10 days after the incident. Importantly, the stages should neither be rushed, nor belaboured. Further, the officer must be afforded considerable control over the process including the manner in which the sessions are conducted at each stage.

Officers often want to attend their reintegration sessions with a partner; however, they must proceed through the program on their own. This individualized design helps to ensure an open dialogue between the client officer and the reintegration team. The design also provides protection against potential of a cross-contamination of the critical incident details. To ensure management and adherence to all safety protocols, two instructors of the reintegration team must be present during stages 1 to 5, to ensure nothing is missed during the process.

Long-term Program

Audience

- **Officers who have suffered a major injury at work**
- **Officers who have had suicidal ideations or attempts and have resulted in seizure of firearm**
- **Officers who are returning to work after a Post-Traumatic Stress Disorder diagnosis or other mental health injury/illness/disorder**

Goals of the Long-term Reintegration Program:

The goal is to assist officers who have been off work for an extended period of time return to the normalcy of work settings by providing supports and training that are outside the scope of what they have received from their health care provider (i.e., psychologist, clinician, or occupational therapist).

Specially trained instructors use profession-specific tools and equipment to ease the officer back into work settings while at the same time conducting confidence-building exercises and drills. Psychologists, occupational therapists, and other clinicians do not have access to police cars, guns, ammunition, and body armour. The long-term program is a hybrid approach joining clinical care, peer support and traditional police training. The sessions are at the client officer's pace and are individually tailored to his or her needs. The basic framework for sessions within the long-term program follows that of the short-term program. One key exception is that sessions are spread out and slowed down for officers within the long-term program.

Referrals

Referrals for the long-term program come from various sources including psychologists, occupational therapists, Worker's Compensation Board case managers, Employee Assistance Programs, and Disability Management Consultants.

Clinician Approval

Before sessions start with an officer who has been suicidal in the past, it is imperative that the work is approved by the officer's psychologist and/or psychiatrist. The "sign-off" for the work to start will ensure there is proper accountability and that the officer is mentally ready.

Skill Building

Strengthening a police officer's physical skills is an important aspect and relates to the officer's ability to return to work with confidence. Faster and more accurate shooting, stronger handcuffing abilities, smoother and faster driving skills, are all examples of the type of skill building exercises that can be conducted with officers. These skills will aid the officer in feeling that he or she has the ability to return to the normalcy of daily work.

The ability to strengthen an officer's physical skills is the key to maintaining perceptions the officer has of how peers now view him or her after the critical incident. In other words, skill building exercises will improve an officer's self-confidence. This added self-confidence should decrease the officer's self-stigma. Further, a strengthening of the officer's skills should be viewed favourably by his or her co-workers which could be seen as an all-around benefit.

Exposure Therapy

At times, an officer's concerns center around some specific conditions of police work. Hearing a police radio, seeing the overhead lights on a police vehicle flashing, attending court, wearing a uniform, and entering into a police facility are all examples of stressful conditions that instructors of the reintegration team can assist with. Not all stressors can be dealt with, but instructors can do their best to assist the officer in this regard.

Often, the officer's clinician or occupational therapist do not have access to organizational-specific conditions such as police stations, vehicles, ranges, etc. It is at these times that the reintegration team is integral in the successful treatment of the client officer. Access to these locations ensures that the officer's treatment is complete and not inhibited simply due to access issues.

Relationship Building

Officers absolutely must feel supported throughout the process and NEVER judged. The reintegration team must build trust with the client officer, while protecting confidentiality at all times. As plans are built and work begins with individual officers, significant levels of cooperation and communication are required with the officer's other care providers. With consent of the officer, his or her entire care team can communicate freely via email, text, phone or in-person about the treatment options and plans. The care team can include the officer's psychologist, psychiatrist, occupational therapist, case workers, reintegration team members, and the organization's disability coordinator. There is a psychologist on standby.

This cooperation and communication appears to be vital to the officer's success. Many times, the reintegration team becomes the strongest advocates for the officer when it comes to coordinating with the other care providers.

Street Exposures

Some officers experience stress at the thought of returning to operational roles. Officers can be eased into patrol work again with the reintegration team by working partial or full shifts in the operational setting as an extra unit. The client officer and the reintegration team log on as normal, but gauge the intensity of work on a continual basis. These "street exposures" allow the client officer to acclimate to several different stimuli including, but not limited to, radio transmissions, vehicle stops, calls for service, and interactions with the public.

Additional Learning

Members of a reintegration team should familiarize themselves with the various psychological treatment options available to officers to ensure everyone understands how the client officer is being treated. These treatment theories include, but are not limited to:

- **Prolonged Exposure**
- **Eye Movement Desensitization and Reprocessing**
- **Exposure Therapy**
- **Systematic Desensitization**
- **Cognitive Behavioural Therapy**

Testimonials

"I feel it got me back to work as fast as possible while still making me feel 100% confident that I was ready."

"I found it beneficial to tell some normal cops my side of the story and answer any questions. You guys are pros and made it easy to get through."

"With this program, you were able to shed light on what my body and mind were doing and WHY they were reacting differently."

"I was constantly surrounded by positivity which was extremely beneficial for my attitude towards reintegration."

"Throughout my time in the reintegration, it was always made clear that I was in control. I was able to dictate how long the sessions were, what we talked about and how fast or slow I wanted to proceed. This took an enormous weight off and made me more comfortable attending the sessions. The program was specifically designed to meet my specific needs and was delivered at my pace."

"It was calming that you both let us work at our own pace and did not put us through a strict routine practice which I think is very important at that stage."

"I didn't feel judged by either of you...which to be honest, was something I was worried about."

"I'm a supporter of the program. I know anyone involved in high stress events feels better knowing that someone in the service took the initiative to make sure they were alright."

"It takes a lot of stress away since there is no time limit or length to the process. I am grateful for the opportunity to have been through it."

"This program proves that the service does care about its members and their mental health."

For Further Information, Please Contact:

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