

# Virginia Department of Corrections

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Group Response I	nterventio	n Team			
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#### REVIEW

The Content Owner will review this operating procedure annually and re-write it no later than three years after the effective date.

#### COMPLIANCE

This operating procedure applies to all units operated by the Virginia Department of Corrections (DOC). Practices and procedures must comply with applicable State and Federal laws and regulations, American Correctional Association (ACA) standards, Prison Rape Elimination Act (PREA) standards, and DOC directives and operating procedures.

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#### **DEFINITIONS**

**Animal Assisted Response (AAR)** - A critical incident response designed to help meet the needs of DOC staff involved in work-related serious incidents, in which a registered therapy dog will be present during critical incident debriefings; the therapy dog will only be utilized by trained/registered Animal Assisted GRIT members.

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**Animal Assisted Response Team (AART)** - A select group of DOC staff who have been trained specifically in Animal Assisted Therapy and as GRIT members; each AART is composed of a registered therapy dog and their handler.

**Critical Incident** - Any incident, action, or event outside the range of usual work experience that may cause a significant emotional reaction in staff.

**Group Response Intervention Team (GRIT)** - A select group of DOC Mental Health Clinicians who have been trained specifically to assist staff who experienced a serious work-related incident; the primary goal is to help staff members cope with the experience as effectively as possible through a formal group debriefing process.

**Group Response Intervention Team (GRIT) Co-Facilitator -** A Mental Health Clinician who serves on a voluntary basis at the request of the Chief of Mental Health and Wellness Services to be a co-facilitator/designee in recruitment, organization, maintenance, training, and implementation of GRIT duties.

**Group Response Intervention Team (GRIT) Debriefing** - A group meeting designed to reduce the probability that an employee involved in a serious incident will experience long-term consequences of traumatic stress.

**Group Response Intervention Team (GRIT) Member** - A specially trained DOC Mental Health Clinician who has volunteered to provide formal group debriefing services.

**Mental Health Clinician** - An individual with at least a Master's degree in psychology, social work, or relevant human services field with knowledge, training, and skills in the diagnosis and treatment of mental disorders, which may include a Psychiatric Provider, Social Worker, or Registered Nurse.

**Organizational Unit Head** - The person occupying the highest position in a DOC organizational unit, such as a correctional facility, Regional Office, Probation and Parole Office, Virginia Correctional Enterprises, Academy for Staff Development, Infrastructure and Environmental Management Unit, Agribusiness Unit, and individual Headquarters units, e.g., Human Resources, Offender Management, Internal Audit.

Work Related Trauma - Emotional, psychological, or physical consequences following a serious work-related traumatic event; the degree of life threat experienced during the incident, the speed of onset of the incident and its duration, the loss of significant others, and the potential for recurrence impact the extent and severity to which these consequences occur. Traumatic events may be re-experienced through dreams, flashbacks, or prompted by events similar to the original trauma. The individual may experience feelings of detachment, numbing, or avoidance. Sleep disturbances, irritability, outbursts of anger, difficulty concentrating, hypervigilance, etc. frequently occur.

## **PURPOSE**

This operating procedure defines the structure and utilization of the Department of Corrections (DOC) Group Response Intervention Team (GRIT).

## **PROCEDURE**

- I. Mission of the GRIT
  - A. The GRIT is available to respond to and provide support for staff directly or indirectly involved in a serious work-related incident when the Critical Incident Peer Support (CIPS) Team Coordinator or designee has requested a formal debriefing as a supplement to other services already being provided; see Operating Procedure 075.7, Critical Incident Peer Support Team.
  - B. The primary goal of the GRIT is to help those staff involved cope, as effectively as possible, with a traumatic work-related incident by providing a formal group debriefing process as well as other resources resulting in a satisfactory adjustment in the aftermath of the incident so that the staff can return to duty on a timely basis. Peer support is the key component of the GRIT.
  - C. The secondary goal of the GRIT is to provide relevant and necessary training and consultation to CIPS Team Members upon request of the regional CIPS Team Leader.

#### II. Structure of the GRIT

- A. The Chief of Mental Health and Wellness Services (CMHS) is responsible for oversight of the GRIT's overall operations.
  - 1. The GRIT Co-Facilitator, who has special training and knowledge of crisis and trauma management assists the CMHS.
  - 2. GRIT operations include recruiting and training GRIT members, assisting in the coordination of GRIT responses to incidents, and providing direct services, when necessary.
  - 3. Operational responsibilities may also include serving as a point of contact for coordinating the response of team members to an incident, updating Attachment 2, *GRIT Directory*, and serving as the point-of-contact for the collection of relevant data.
  - 4. The GRIT Co-Facilitator will also serve as a member of the GRIT.
- B. Mental Health Clinical Supervisors (MHCS) serve as the point of contact at the regional level for GRIT members; see Attachment 1, *Mental Health Clinical Supervisors*, for contact information.
  - 1. MHCS will work with the CIPS Team Coordinator or designee to coordinate GRIT services as needed or requested.
  - 2. Additional responsibilities of the MHCS include, but may not be limited to:
    - a. Obtaining and outlining a brief description of the incident
    - b. Collecting information about the number of staff directly and indirectly involved
    - c. Describing any injuries
    - d. Consulting with the CMHS and/or the GRIT Co-Facilitator to decide particulars of a response
    - e. Attending to any post-incident activity as necessary
- C. Organizational Unit GRIT contact For each work-related incident, the CIPS Team Leader or the Organizational Unit Head will designate a unit employee to serve as the point of contact for the GRIT members. When contacted regarding an incident, the GRIT members will work with this employee to arrange and coordinate intervention and follow-up services.
- D. The CMHS and the GRIT Co-Facilitator will plan and coordinate refresher training every two years.
- E. GRIT interventions are delivered in accordance with ethical, evidence-based practices for the management of traumatic incidents.

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#### III. GRIT Members

- A. The CMHS, the GRIT Co-Facilitator, and MHCSs will determine when new members will be recruited. Recruitment notices will be provided electronically to the Regional Administrators.
  - 1. A Mental Health Clinician may apply for membership on the GRIT by completing the following:
    - a. A *Group Response Intervention Team Application* 075\_F14 approved by their immediate supervisor and the Organizational Unit Head.

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- b. A face-to-face interview with a panel of GRIT members, as designated by the CMHS.
- 2. The Mental Health Clinician must be a current DOC employee, rated as at least a *Contributor* on their last performance evaluation, and have no active disciplinary actions.

## B. GRIT Training

- 1. Initial and refresher training will familiarize the GRIT members with their role on the team, will facilitate the understanding of trauma and critical incident stress, and will allow the GRIT members to participate in skills training and role play, relative to formal group crisis intervention techniques.
- 2. Refresher training will be offered at least every two years and will be coordinated by the CMHS and the GRIT Co-Facilitator.
  - a. Unless excused by the CMHS or the GRIT Co-Facilitator, the GRIT members must participate in refresher training sponsored by the DOC every two years.
  - b. If the team member misses refresher training, they will be required to attend, at their own expense, relevant outside training on this topic approved by the CMHS or the GRIT Co-Facilitator to remain on the team.
- C. Removal of a GRIT member Any member can be removed for the following reasons:
  - 1. Breach of confidentiality
  - 2. Request submitted by the member's immediate Supervisor to the CMHS, the GRIT Co-Facilitator, or the MHCS to review the employee's membership.
  - 3. Written resignation submitted to the CMHS or the GRIT Co-Facilitator.
  - 4. Receipt of a Written Notice for disciplinary action.
  - 5. The CMHS or the GRIT Co-Facilitator may remove any GRIT member or candidate if, in their opinion, the continued participation of the GRIT member may be detrimental to or not in the best interest of the member, the GRIT, or the DOC.
  - 6. Lack of relevant training completed for two sequential years.

#### IV. Contacting GRIT

- A. The regional CIPS Team Leader or designee can request the GRIT by contacting the CMHS, the GRIT Co-Facilitator, or the MHSC for the region.
- B. The CMHS can be contacted at (804) 887-8107 during regular working hours or (804) 221-1134 at any time.
- C. The GRIT Co-Facilitator can be contacted at (804) 372-4492 during regular working hours or via statewide phone at any time, at (804) 335-4963.
- D. The contact information for the MHCS of the unit's region is provided on Attachment 1, *Mental Health Clinical Supervisors*.

#### V. Types of Incidents

A. The GRIT may be requested to respond to staff who are impacted by a critical incident when the CIPS Team Coordinator has determined that a formal group debriefing will be beneficial. Such incidents include, but may not be limited to, assault of an employee, offender suicide, death of an employee, hostage

situation, etc.

B. The GRIT does not respond to incidents of typical work-related stress such as problems with Supervisor(s), co-worker(s), or administration, serious illness or death of an employee's family member, or other issues such as workforce transitions e.g., lay-offs and facility closings.

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C. Any time there is a question about the GRIT responding to an incident, staff should contact the CMHS, the GRIT Co-Facilitator, or MHCS.

# VI. Responding to an Incident

- A. If a GRIT member becomes aware of an incident to which it would be appropriate to respond, they will notify the CIPS Team Coordinator or designee to contact the GRIT Co-Facilitator, the MHCS, or the CMHS to advise them of the situation prior to the provision of services. Upon being contacted, the GRIT Co-Facilitator, MHCS or CMHS will:
  - 1. Contact the designated Organizational Unit GRIT contact to obtain pertinent details about the incident and to arrange for the provision of services (*with whom, when, and where*).
  - 2. Follow-up as agreed.
  - 3. Arrange a mutually convenient time and location to meet.
  - 4. If, after a GRIT debriefing, services still appear to be needed the Organizational Unit GRIT contact will consult with the appropriate CIPS Team Leader or designee and the Human Resource Officer (HRO) or Benefits Administrator. The HRO or Benefits Administrator will provide information to the individual in need about available resources (e.g., Employee Assistance Program, etc.) including how to access those resources.
- B. When a GRIT group debriefing is needed the following steps should be taken:
  - 1. The appropriate MHCS should be contacted by a GRIT Co-Facilitator and informed that a GRIT group debriefing is requested.
  - 2. The MHCS will arrange with the Organizational Unit GRIT contact a time and place to hold the group debriefing.
  - 3. Once a time and place are determined, the MHCS will inform the GRIT members.
  - 4. The Organizational Unit GRIT contact will inform staff at their facility of the time and place for the GRIT group debriefing.
- C. Organizational Unit Heads are encouraged to allow GRIT members responding to incidents outside of regular work hours to adjust their schedules.
- D. GRIT members may request reimbursement for mileage when personal vehicles are used to respond to an incident, see Operating Procedure 240.1, *Travel*.

# VII. Animal Assisted Response (AAR)

- A. When GRIT services are requested, the GRIT Co-Facilitator, MHCS, or CMHS will determine the appropriateness of providing AAR which may include:
  - 1. Determining if the unit allows therapy dogs on its premises.
  - 2. Determining if an alternate site, close to the requesting unit, would be more appropriate for an intervention that includes a therapy dog.
- B. If AAR is determined to be appropriate, the recipient of the request will utilize Attachment 2, *GRIT Directory*, to select an Animal Assisted Response Team (AART). The AART may be from the unit where the incident occurred or from a nearby unit.
- C. If an AART member becomes aware of an incident to which it would be appropriate to respond, the AART member will contact the GRIT Co-Facilitator, MHCS, or the CMHS to advise them of the situation.

1. The GRIT Co-Facilitator, MHCS, or the CMHS will contact the CIPS Team Coordinator or designee, prior to the provision of services.

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- 2. Upon being contacted, the AART will:
  - a. Contact the designated Organizational Unit GRIT contact to obtain pertinent details about the incident and to arrange for the provision of services (*with whom, when, and where*).
  - b. Follow-up as agreed.
  - c. Make initial face-to-face or telephone contact with the CIPS Team Coordinator or designee. When this individual requests services, arrange a mutually convenient time and location to meet.
  - d. The AART member will coordinate with the designated Organizational Unit GRIT contact.
  - e. When a GRIT group debriefing is needed, and one or more AART's is requested, individuals involved in the debriefing should be told in advance that therapy dogs will be present to determine if anyone is allergic or afraid of the dogs. AART's may need to secure a separate location to debrief staff who are interested in receiving AART services.
- D. The handler will maintain documentation pertinent to AART's with copies provided to the GRIT Co-Facilitator. This documentation should include the AARTs certification, and rabies vaccination records.

## VIII. Documentation

- A. At the end of a contact, the GRIT members will complete and forward the *GRIT Intervention Information* 075 F15 to the GRIT Co-Facilitator.
- B. The GRIT Co-Facilitator will enter the information into the GRIT tracking system and will compile the data on an annual basis.
  - 1. Information will be maintained in a confidential manner.
  - 2. No identifying details or information will be included in the compiled data.
  - 3. This data will be used only to track the number of critical incidents responded to and the outcome of the incidents.

## IX. Confidentiality

- A. When providing an intervention, the GRIT member should explain to the employee that, except for the following specific circumstances, the contents of their discussion are confidential. GRIT members will *not* maintain confidentiality if:
  - 1. An individual expresses a clear intent to harm self or others.
  - 2. The safe and orderly operation of the work site is threatened either by statements or actions of an individual.
  - 3. The GRIT member is subpoenaed to testify in a judicial hearing.
  - 4. The affected employee consents for the release of information to designated others such as the Organizational Unit Head.
- B. When disclosure of confidential information is necessary, the GRIT member will report the information to the Organizational Unit Head or designated individual and document the following on the *GRIT Intervention Information* 075\_F15:
  - 1. That information was shared
  - 2. The nature of the information
  - 3. The name of the individual with whom it was shared
  - 4. Unless there are safety or security concerns, the GRIT member must advise the employee that the information will be reported.

# **REFERENCES**

Operating Procedure 075.7, Critical Incident Peer Support Team

Operating Procedure 240.1, Travel

# **ATTACHMENTS**

Attachment 1, Mental Health Clinical Supervisors

Attachment 2, GRIT Directory

# FORM CITATIONS

Group Response Intervention Team Application 075\_F14

GRIT Intervention Information 075\_F15



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