



# Operating Procedure

<b>Effective Date</b> November 1, 2017	<b>Number</b> 730.8
<b>Amended</b>	<b>Operating Level</b> Department
<b>Supersedes</b> First Issue	
<b>Authority</b> COV §53.1-10; §54.1-3601	
<b>ACA/PREA Standards</b> None	
<b>Office of Primary Responsibility</b> Chief of Mental Health Services	

**Subject**  
**GROUP RESPONSE INTERVENTION TEAM**

<b>Incarcerated Offender Access</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Public Access</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	<b>Attachments</b> Yes <input checked="" type="checkbox"/> #1 No <input type="checkbox"/>

## I. PURPOSE

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

## II. COMPLIANCE

This operating procedure applies to all units operated by the Department of Corrections (DOC). Practices and procedures shall comply with applicable State and Federal laws and regulations, Board of Corrections policies and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

## III. DEFINITIONS

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

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

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

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

**Group Response Intervention Team (GRIT) Co-Facilitator** - A QMHP who serves on a voluntary basis at the request of the Chief of Mental Health 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 staff involved in a serious incident will experience long-term consequences of traumatic stress.

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

**Organizational Unit Head** - The person occupying the highest position in a DOC unit, such as a correctional facility, regional office, probation and parole office, Virginia Correctional Enterprises (VCE), Academy for Staff Development, Corrections Construction Unit, Agribusiness Unit, and individual headquarters unit (i.e. Human Resources, Offender Management, Internal Audit).

**Qualified Mental Health Professional (QMHP)** - An individual employed in a designated mental health services position as a Psychologist or Psychology Associate, Psychiatric Provider, Social Worker (Masters level) or Registered Nurse or 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.

**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. Events may be re-experienced through dreams or 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, hyper-vigilance, etc. frequently occur.

#### IV. PROCEDURE

##### A. Mission of the Group Response Intervention Team

1. The Group Response Intervention Team (GRIT) is available to respond to, and provide support for employees 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 per Operating Procedure 145.5, *Critical Incident Peer Support Team*.
2. The primary goal of the GRIT is to help those employees 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 employees can return to duty on a timely basis. Peer support is the key component of the GRIT.
3. The secondary goal of GRIT is to provide relevant and necessary training and consultation to CIPS Team members upon request of the regional CIPS Team Leader.

##### B. Structure of the GRIT

1. The DOC Chief of Mental Health Services (CMHS) is responsible for oversight of the GRIT's overall operations.
  - a. The Chief of Mental Health Services is assisted by the GRIT Co-Facilitator, who has special training and knowledge of crisis and trauma management.
  - b. GRIT operations include recruiting and training GRIT members, assisting in the coordination of GRIT responses to incidents, and providing direct services, when necessary.
  - c. Additional operational responsibilities may include serving as a point of contact for coordinating the response of Team members to an incident, updating the GRIT Directory, and serving as the point-of-contact for the collection of relevant data.
  - d. The GRIT Co-Facilitator will also serve as a member of the GRIT.
2. Mental Health Clinical Supervisors (see Attachment 1 for contact information) serve as the point of contact at the Regional level for GRIT members. Mental Health Clinical Supervisors will work with the CIPS Coordinator or designee to coordinate GRIT services as needed or requested. Additional responsibilities 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 Chief of Mental Health Services and/or GRIT Co-Facilitator to decide particulars of a response
  - e. Attending to any post-incident activity as necessary
3. Organizational Unit GRIT Contact - For each work-related incident, the CIPS Team Leader or the Organizational Unit Head shall designate a unit employee to serve as the point of contact for GRIT members. When contacted regarding an incident, GRIT members will work with this employee so

that intervention and follow-up services can be arranged and coordinated.

4. The Chief of Mental Health Services and the GRIT Co-Facilitator will plan and coordinate the annual training.
5. GRIT interventions are delivered in accordance with ethical, evidence based practices for the management of traumatic incidents.

#### C. GRIT Members

1. The Chief of Mental Health Services, GRIT Co-Facilitator, and MHCSs will determine when new members will be recruited. Recruitment notices will be provided electronically to the Regional Administrators.
  - a. A QMHP may apply for membership on the GRIT by completing the following:
    - i. A [Group Response Intervention Team Application](#) 730\_F39 approved by their immediate supervisor and the Organizational Unit Head.
    - ii. A face-to-face interview with a panel of GRIT members, as designated by the Chief of Mental Health Services
  - b. The QMHP must be a current DOC employee, and should be scored as at least a *Contributor* on their last evaluation and have no active disciplinary actions.

#### 2. GRIT Training

- a. Training will be offered at least annually and will be coordinated by the Chief of Mental Health Services and the GRIT Co-Facilitator. Initial and annual follow-up training will familiarize GRIT members with their role on the Team, will facilitate the understanding of trauma and critical incident stress, and will allow GRIT members to participate in skills training and role play, relative to formal group crisis intervention techniques.
- b. Unless excused by the Chief of Mental Health Services or the GRIT Co-Facilitator, GRIT members must participate in annual training sponsored by the DOC. If the team member misses two sequential trainings, they will be required to attend relevant outside training on this topic approved by the Chief of Mental Health Services or GRIT Co-Facilitator at their own expense to remain on the team.

#### 3. Removal of a GRIT Member - Any member can be removed for the following reasons:

- a. Breach of confidentiality
- b. Request submitted by the member's immediate supervisor to the Chief of Mental Health Services, GRIT Co-Facilitator, or the Mental Health Clinical Supervisor to review the employee's membership
- c. Written resignation submitted to the Chief of Mental Health Services or GRIT Co-Facilitator.
- d. Receipt of a Written Notice disciplinary action
- e. The Chief of Mental Health Services or 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, GRIT, or the DOC
- f. Lack of relevant training completed for 2 sequential years

#### D. Contacting GRIT: GRIT can be requested by the regional CIPS Team Leader or designee by contacting one of the following:

1. Chief of Mental Health Services at (804) 887-8107 during regular working hours or (804) 221-1134 at any time
2. GRIT Co-Facilitator at (804) 372-4492 during regular working hours or via statewide phone at any time, at (804) 335-4963
3. Mental Health Clinical Supervisor for the DOC unit's region (see Attachment 1 for contact information).

#### E. Types of Incidents

1. GRIT may be requested to respond to employees who are impacted by a critical incident when the CIPS Team Leader has determined that a formal group debriefing will be beneficial. Such incidents include, but may not be limited to, assaults on staff, offender suicide, death of an employee, hostage situation, etc.
2. 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 (lay-offs and facility closings).
3. Any time there is a question about the GRIT responding to an incident, contact the Chief of Mental Health Services, GRIT Co-Facilitator, or Mental Health Clinical Supervisor.

#### F. Responding to an Incident

1. If a GRIT member becomes aware of an incident to which it would be appropriate to respond, they will notify the CIPS Coordinator or designee to contact the GRIT Co-Facilitator, the Mental Health Clinical Supervisor, or the Chief of Mental Health Services to advise them of the situation prior to the provision of services. Upon being contacted, the GRIT Co-Facilitator, MHCS or Chief of Mental Health Services 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. Arrange a mutually convenient time and location to meet
  - d. If, after a GRIT debriefing, services still appear to be needed, the GRIT contact person will consult with the appropriate CIPS Coordinator or designee and the 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.
2. When a GRIT Group Debriefing is needed the following steps should be taken:
  - a. The appropriate Mental Health Clinical Supervisor should be contacted and informed that a GRIT group debriefing is requested.
  - b. The MHCS will arrange with the Organizational Unit GRIT contact a time and place to hold the group debriefing.
  - c. Once a time and place are determined, the Mental Health Clinical Supervisor will inform the GRIT members.
  - d. The Organizational Unit GRIT contact will inform staff at their facility of the time and place for the GRIT group debriefing.
3. Organizational Unit Heads are encouraged to allow GRIT members responding to incidents outside of regular work hours to adjust their schedules. When personal vehicles are used to respond to an incident, GRIT members may request reimbursement for mileage.

#### G. Animal Assisted Response

1. When a request for GRIT services is made, the GRIT Co-Facilitator, Mental Health Clinical Supervisor, or Chief of Mental Health Services will determine the appropriateness of providing Animal Assisted group response. This may include determining if the unit allows therapy dogs on its premises. It may also include determining if an alternate site, close to the requesting unit, would be more appropriate for an intervention that includes a therapy dog.
2. If Animal Assisted Response (AAR) is determined to be appropriate, the recipient of the request will utilize the GRIT Directory to select an Animal Assisted Response Team (AART). The AART Team may be from the unit where the incident occurred or from a nearby unit.
3. If an Animal Assisted Response Team member becomes aware of an incident to which it would be

appropriate to respond, the AART member will contact the GRIT Co-Facilitator, Mental Health Clinical Supervisor, or the Chief of Mental Health Services to advise them of the situation. One of these individuals will contact the CIPS Coordinator or designee. This will occur prior to the provision of services. Upon being contacted, the AART Team 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 Coordinator or designee. If this individual requests services, arrange a mutually convenient time and location to meet
  - d. The AART member will coordinate with the designated Organizational Unit contact
  - e. When a GRIT group debriefing is needed, and one or more Animal Assisted Response Teams is requested, people 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. Animal Assisted Response Teams may want to secure a separate location to debrief people who are interested in receiving AART services.
4. Documentation pertinent to Animal Assisted Response Teams will be maintained by the handler with copies provided to the GRIT Co-Facilitator. This documentation should include the AART Team's certification, and rabies vaccination records.

#### H. Documentation

1. At the end of a contact, the GRIT member(s) will complete and forward the [GRIT Intervention Information](#) 730\_F40 to the GRIT Co-Facilitator.
2. The GRIT Co-Facilitator will enter the information into the GRIT tracking system and will compile the data on an annual basis.
3. Information will be maintained in a confidential manner. No identifying details or information will be included in the compiled data. This data will be used only to track the number of critical incidents responded to and the outcome of the incidents.

#### I. Confidentiality

1. 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 member will *not* maintain confidentiality if:
  - a. An individual expresses a clear intent to harm self or others
  - b. The safe and orderly operation of the work site is threatened either by statements or actions of an individual
  - c. The GRIT member is subpoenaed to testify in a judicial hearing
  - d. The affected employee consents for the release of information to designated others such as the Organizational Unit Head.
2. When disclosure of confidential information is necessary, the GRIT member will report the information to the Unit Head or designated individual and document the following on the [GRIT Intervention Information](#) 730\_F40.
  - a. That information was shared
  - b. The nature of the information
  - c. The name of the individual with whom it was shared
  - d. Unless there are safety or security concerns, the GRIT member must advise the employee that the information will be reported.

V. REFERENCES

Operating Procedure 145.5, *Critical Incident Peer Support Team*

VI. FORM CITATIONS

[Group Response Intervention Team Application](#) 730\_F39

[GRIT Intervention Information](#) 730\_F40

VII. REVIEW DATE

The office of primary responsibility shall review this operating procedure annually and re-write it no later than three years after the effective date.

*Signature Copy on File*

*10/11/17*

N. H. Scott, Deputy Director for Administration

Date