

COP DOC CORNER

Helping agencies be proactive about mental health and normalizing the use of mental health professionals.

by Shawna M. Baron, Psy.D., Licensed Psychologist

February 2024 Topic: Officer-Involved Shootings

What kind of mental health services do my officers need if they are involved in a shooting or another serious critical incident?

Research indicates post-shooting psychological interventions- that is, individual or group emotional debriefings- can help promote positive outcomes for officers.

At least one individual session within one week of the incident is recommended. Because symptoms of traumatic stress don't always show up right away, I always recommend follow-up sessions (at 1 month, 6 month, and 12 month marks).

In individual debriefings, the goals are to reduce officers' stress by teaching and reinforcing coping skills, assess and normalize psychological reactions, and provide education on what to expect psychologically in the coming days and weeks. At the discretion of the mental health professional, further services may be recommended (counseling, peer support, chaplaincy programs, etc.) Little to no information is provided to the agency other than documentation of attendance at the session.

Group debriefings with a psychologist are another opportunity to process through an event and receive psychoeducation. They are only recommended after individual sessions, though, and should consider including all folks involved (e.g., dispatch).

Do officers need a fitness-for-duty evaluation after a shooting?

The short answer is no, because an officer's fitness is presumed to remain intact unless you have evidence to the contrary. In other words, you cannot initiate a fitness-for-duty evaluation simply because of one's involvement in a shooting or another critical incident. Fitness-for-duty evaluations are only initiated when there are objective concerns for an officer's mental health needs. More info on initiating fitness-for-duty evaluations will be covered in an upcoming newsletter!

Should my department have a policy for OIS? What should it say?

Considering 1 in 4 police officers will be exposed to a critical incident involving some type of fatality during their career, having an OIS or critical incident policy would be wise. This helps officers know in advance how their department defines a critical incident and the steps required of them afterwards (drug testing, supervisory contact, debriefings, investigations, etc.) This also helps to clarify expectations with the public and the media following the event, especially during high profile incidents.

What types of critical incidents require an emotional debriefing?

From a mental health perspective, any event that is capable of causing intense psychological stress in the typical person, as to help prevent the development of posttraumatic stress. This includes officer-involved shootings, witness to suicide, multiple fatalities, major natural disasters, mass shooter events, and incidents involving children or known victims. Officers with a known history of trauma (miscarriage, combat deployment, etc.) may also be considered under this policy, even if not directly involved in the incident. Overall, everyone has a different baseline for trauma and there is no one-size-fits-all policy. But we can try to capture most everyone's needs by having a flexible policy and supportive culture.

If you need help with writing or updating your policy, I'd be happy to review and provide tips based on the current literature and guidelines in the mental health world. I can be reached at: Shawna@BaronPsych.com

In Other News...Baron Psychology is now on Medical Mile!

I am now at 1548 Primrose St. in Springfield. I share the office suite with Hearo, which is my husband's healthcare tech startup. On duty LEO's are welcome anytime to grab a coffee or snack, cool off in the AC, or just to use a clean restroom.

