



**UW-Madison
Police Department**

UNIVERSITY OF WISCONSIN-MADISON

Appendix O: Officer Involved Death (OID)/Officer Involved Critical Incident (OICI) Reference Guide



PUBLIC SAFETY STATEMENT QUESTIONS

1. Response to Public Safety Statement questions by the involved officer (s) is voluntary.
2. The first arriving supervisor not involved in the incident shall seek a Public Safety Statement from the involved officer. This is not an interview, and will address only the most basic information regarding the incident. Review the questions below for guidance.
3. The supervisor obtaining the Public Safety Statement shall document the information in an incident report and share it with the outside investigating agency.

Although not limited to the following questions, each question must be asked and answered if applicable.

1. **Are you injured?**
2. **What type of force was used?**
3. **In what direction did you fire your weapon?**
4. **Identify potential uninvolved victims who may be injured “down range” of the incident.**
5. **Where might there be other injured persons or persons requiring medical treatment?**
6. **Suspect(s) description, direction of travel, vehicle description, time suspect(s) last seen, and what types of weapons did the suspect(s) have?**
7. **Description and location of victims and/or /witnesses.**
8. **Is there any evidence that we should know about so it can be protected from loss, contamination, or destruction?**
9. **Is there any information you were not asked, which may help ensure public safety and assist in the apprehension of the suspect(s)?**



UW-Madison Police Department Critical Incident Partner Form

Please indicate in order of preference which department employee you wish to act as your Critical Incident Partner:

(1) Name: _____

Relationship: _____

(2) Name: _____

Relationship: _____

(3) Name: _____

Relationship: _____

Your Name

Date

Officer Involved Post Critical Incident Information

You have just been involved in a critical incident. What is next? The purpose of this document is to provide you with information to assist you in dealing with the aftermath immediately following an Officer Involved Critical Incident (OICI).

Once the scene is secured, you will be asked to provide an Supervisor or Investigator with a brief synopsis of the incident and a voluntary public safety statement. The public safety statement is a quick overview of the incident to identify injured parties, suspects, or witnesses; to identify the scene and any physical evidence; and to provide a minimal survey of the event.

An uninvolved officer will be assigned to you until your Critical Incident Partner is available. Be mindful that any statements you make are not privileged.

You will have an opportunity to contact family, friends, etc.

You will be taken to a local Emergency Room for a medical assessment. You will provide a blood sample per policy to check for the following: Alcohol, Marijuana/THC, Cocaine, Opiates, Amphetamines, LSD, & PCP.

An investigator will photograph you as soon as possible after the incident. Your uniform, equipment, and firearm will likely be collected as evidence. You will receive a replacement firearm.

Prior to going home after the incident, you will have a mandatory defusing with a mental health professional. This individual is contracted through UW-Madison Police Department to provide Critical Incident Stress Management (CISM) services.

Any formal interview with you about the incident will likely not take place until 24-48 hours after the incident. This interview will be audio recorded. At some point, usually before your formal interview, you may be asked to do a walk-through of the scene with your attorney (if applicable) and members of the investigative team.

You will also meet with a Trauma Specialist within 24-72 hours following the incident.

You will be placed on administrative leave with pay. For administrative purposes and your schedule will be 8a-4p Monday through Friday.

This document is a quick resource to help you navigate the first 24-48 hours after an OICI. For additional information, please refer to your folder that you have received. It will have more detailed information, support, resources, and the OICI Department Policy for your family and you.

Critical Incident Information

It happened again..... and now it has happened to you. We all knew it was a possibility we could become involved in a critical incident when we decided to get into law enforcement. No matter how much you prepared for this day, or even if you didn't, there are likely worries and concerns running through your mind. You need to know the agency is prepared to investigate the circumstances of your critical incident in a fair and objective manner and provide assistance.

The purpose of this packet is to provide you and your loved ones information to assist you in dealing with the stress and aftermath of a critical incident. The UW-Madison Police Department values its employees and understands that each employee will deal with the emotions of such an incident it different ways. The following information is intended to reeducate you on what to expect in the upcoming days, weeks and months and to answer some frequently asked questions.

In the past, most studies of stress in law enforcement focused exclusively on post-shooting trauma. Recently, however, the research has expanded to encompass stress induced by other traumatic events, collectively known as critical incidents. A critical incident is any event that causes people to experience unusually strong emotional reactions that have the potential to affect their ability to function at their workplace, within their families, and/or in other areas of their lives. Critical incidents typically are sudden, powerful events that fall outside the range of ordinary human experiences. Because they happen so abruptly, they often have a strong emotional impact, even on an experienced, well-trained officer. This event or events may be time-limited or may be on-going or chronic.

In law enforcement, officers generally don't have the luxury of fleeing in a life or death situation, when a threat is perceived, or the unthinkable is witnessed. Such events may include an officer involved shooting, line-of-duty death or serious injury of a coworker, a police suicide, a life-threatening assault on an officer, the death of a subject known by the officer, an incident involving multiple deaths, a traumatic death of a child, prolonged failed rescue attempt barricaded suspect /hostage situation, a highly profiled media event, or any other incident that appears critical or traumatic.

Someone will be contacting you about attending a mandatory meeting with a mental health specialist. This specialist may be a University of Wisconsin- Madison Employee Assistance Provider or a counselor from Healthy Minds consulting. Your family members or significant other is encouraged to accompany you to this appointment as the provider may have specific information they will share with them regarding assisting you to cope in this process.

In the upcoming days, you and your family should review UW-Madison Police Department policy 1.5 Officer Involved Deaths/ Other Officer Involved Critical Incidents. This will answer many of the questions you and your loved ones may have regarding what is happening. It also goes over the details about the two investigations which are already underway, the criminal investigation and the administrative investigation.

Administrative Leave

Since you have been actively involved in a critical incident, you will be placed on paid administrative leave. Others involved in this incident may or may not be placed on administrative leave as well, based on the extent of their involvement in this incident. Individuals will be placed on administrative leave and brought back to work at varying times during the investigative process based on individual and investigative need.

The time spent on paid administrative leave should not be construed as discipline or a finding of guilt on behalf of the officer. The UW-Madison Police Department has elected to place you on leave to allow you and your family to begin the process of recovering from this highly emotional incident. Your pay, health benefits and vacation/holiday/compensatory time are not affected while on administrative leave.

While on administrative leave, you are required to contact the Professional Standards Lieutenant or designee, as requested. You will be issued an administrative leave letter which will indicate who, when and how to contact the Lieutenant.

Many of your co-workers will want to show you their support as your critical incident is being investigated. An e-mail will be sent out to the entire agency indicating your involvement in this critical incident. For the time being, your co-workers will be encouraged to send their words of encouragement and support through your Critical Incident Partner. We encourage you to utilize your critical incident partner to field these calls and e-mails for you in the upcoming days so you can focus on your well-being. A separate section in this packet is designated to 'Privileged Conversation'. Please refer to this section regarding your conversations as they relate to this critical incident. It is important that you understand who you can and cannot have privileged conversations with about the incident.

While on administrative leave, you are encouraged to contact the Professional Standards Lieutenant or designee as often as you desire with any questions relating to the investigative process. Many of your questions about what is taking place behind the scenes can be answered by reviewing the department policy on Officer Involved Critical Incidents (Written Directive 1.5). Please understand there are a large number of individuals working long hours behind the scenes to complete the detailed investigation in a timely manner.

Critical Incident Partners

As you and your loved one attempt to cope with any issue that arises because of the critical incident, you are not in this alone. The UW-Madison Police Department has given officers the opportunity to designate a Critical Incident Partner (CIP) to assist you and your family. Your

CIP May be pulled from the schedule and their work assignment to act as a liaison with you and the agency. Although some contact with the agency may be directly with you, much of the agency contact can and will be through your CIP.

If your CIP was pulled from their assignment to act as your liaison with the agency, they will be returned to their regularly scheduled assignment as soon as possible but may continue to act as a liaison for as long as necessary.

Some individuals may be placed on administrative leave without an assigned CIP.

Generally speaking, law enforcement officers often have difficulty trusting and confiding in someone outside the close circle of sworn personnel. Often times, the most important function of a Critical Incident Partner is simply to act as a sounding board for you. Even though you may feel like they do not need to be present at follow-up appointments, utilize them as an escort to appointments you have in the upcoming days, as they want to be there for you.

Your CIP will be given a packet of information which outlines some expectations the agency has of them as your CIP.

It is extremely important to remember that conversation between you and your CIP regarding the critical incident you were involved in are **NOT PRIVILEGED** conversations. Please be aware of this very important fact before you discuss any details of the incident itself with your CIP.

Privileged Communication

The following can claim privilege: lawyers; physicians; registered nurses; chiropractors; psychologists; social workers; spouses; family therapists; podiatrists; professional counselors; marriage counselors; domestic partners; domestic violence or sexual assault advocates; and clergy.

The following **cannot** claim privilege: Critical Incident Partners; co-workers; friends and neighbors, etc...

Chapter 905 is the WI State Statute which deals with privileged communication. Please familiarize yourself with this statute and consult your W.P.P.A. or personal attorney with any clarification questions.

Resources Available for Officer and Family Support:

UW-Madison University Employee Assistance Program (EAP)

All immediate family members and domestic partners are encouraged to utilize the UW- Madison EAP Services. This is a free and confidential service which provides education, support, and resource referral. The EAP provides these services at all times for personal and work related stress. However, EAP can be especially valuable following a critical incident for you and your family.

Lowell Hall, Room 226 610
Langdon Street
Madison, WI 53703
608-263-2987
ea0@mailplus.wisc.edu open
weekdays 8:00am–4:30pm

Peer Support Program/Officer Assistance Program Provider

Following a traumatic event and/or critical incident, CISM services are available for officers and their families. CISM services are delivered by professionals in the areas of trauma, resiliency and recovery. Such services can include education, debriefing, defusing, and other support as needed. The UW-Madison Police Department's CISM provider is the following;

Andrew Peterson, MS, LMFT, STS
HealthyMinds, LLC
6510 Grand Teton Plaza, Suite 402
Madison, WI 53719
Toll Free: (855) 458-4966
On Call: (608) 239-8807
adpeterson@healthmindsllc.com

Individual Health Insurance

Health insurance coverage can provide service for a variety of needs including medical treatment, mental health, counseling, alcohol and other drug abuse treatment, etc. Each insurance company is a little different in coverage limits and how you can access service for

you or your family. Contact your insurance company directly or UWPD Human Resources for coordination of services.

Physicians Plus Insurance – (608) 233-3575 or (800) 683-2300

Dean Care Insurance – (800) 279-1301

Unity Insurance – (608) 233-3575

Group Health Cooperative Insurance – (608) 441-3290

UW- Madison Police Department – Peer Support Program

If you have questions regarding this process which the CIP cannot answer, or if you need any additional information, please do not hesitate to contact someone from the list below for assistance.

UW- Madison Police Department Peer Support Partners:

Maggie Augustin

Tracey Berman

Adam Boardman

William Brown

Amanda Buckley

Cherise Caradine

Megan Staab

Barrett Erwin

Jon Gonring

Patrick Lau

Marc Lovicott

Tricia Meinholz

Josh Nash

Mark Silbernagel

Theresa Waage

Nicole Zautner

In the Madison area, the following clinics are also available:

Mental Health Center of Dane County, (608) 280-2700

Catholic Social Services, (608) 256-2358

Family Services, Inc., (608) 252-1320

Lutheran Social Services, (608) 277-0610

Children's Service Society, (608) 221-3511

One of the most important things for you to realize in the upcoming hours, days, weeks and months are the feelings you are having are probably very normal.

Normal Acute Stress Reactions

- These can occur as late as 2-3 days after your incident.
- Tremors, shaking, crying, nausea and hyperventilation.
- Feelings of being in a daze, inattentive or upset.
- Increased sensitivity to people's reactions.
- Your emotions may be very blunted.
- Vivid images burned into your memory, continuously playing over and over in your mind.

Normal Extended Stress Reactions

- May last weeks, but can last months and years.
- When your adrenaline wears off, you can have an emotional crash where previously blunted emotions now begin to surface.
- Heightened sense of danger or vulnerability (Hyper vigilance is a symptom of Post Traumatic Stress Syndrome).
- Fear or anxiety about future incidents.
- Anger/rage, nightmares, flashbacks or intrusive thoughts, sleep difficulties.
- Depression, guilt, emotional numbing, isolation and emotional withdrawal.
- Sexual difficulties or promiscuity.
- Excessive worrying, situational reminders (i.e. event anniversary date), soul searching.
- Alcohol and/or drug abuse.

Common Signs and Symptoms of Stress

The signs and symptoms of a stress reaction may last a few days, a few weeks, a few months and occasionally longer, depending on the severity of the traumatic event. With understanding and the support of loved ones, the stress reactions usually pass more quickly. Occasionally, the traumatic event is so painful that professional assistance from a counselor may be necessary. This does not imply craziness or weakness. It simply indicates that the particular event was just too powerful for the person to manage by themselves.

The most commonly reported reactions after a critical incident include:

- Anxiety about being involved in a similar event.
- Fear for the safety of yourself or loved ones (hyper vigilance).
- Preoccupation about the stressful event.
- Avoidance of situations or thoughts that remind you of the incident.
- Flashbacks where you mentally re-experience the event.
- Physical symptoms: muscle tension, fatigue, headaches, nausea, bowel problems, dizziness, tremors, rapid heart rate, elevated blood pressure, change in speech patterns.
- Decreased interest in usual activities, including sex and appetite.
- Increased alcohol consumption.
- Feelings of sadness and loneliness.
- Disbelief at what has happened; feeling numb, unreal, isolated, or detached from other people.
- Insomnia, frequent awakening, disturbing dreams or nightmares.
- Increased startle response and sensitivity to people's reactions.
- Poor concentration, loss of memory, poor decision making.
- A misperception of time.
- Guilt and/or self-doubt related to the traumatic event.
- Anger or irritability at what has happened, emotional outbursts.

Family Reactions and Support

Some incidents in the careers of police officers leave a profound effect not only on the involved officers but also on their family members. Side effects of traumatic events might surface at home in the form of anger, depression, frustration, grief, insecurity, confusion, and disillusionment. Family members frequently become the convenient targets of officers' misplaced emotions.

In addition, the families of officers involved in critical incidents might show similar signs of stress. Spouses might adopt the roles of either supporter or victim. Frequently, they find themselves alternating between those roles, at times being able to support and nurture the officer, while at other moments feeling terribly vulnerable, alone, and in need of support themselves. As the children of officers who suffer from post-traumatic stress disorder mature, they also might exhibit the same fears, emotions, and cynical attitudes as their affected parent.

If you observe these signs or symptoms, or they are identified by another family or friend, do not wait until these issues manifest into a greater problem. There are programs and treatments offered through your insurance and the UW-Madison Police Department that will assist you in coping with these issues.

Ways to Offer Assistance

Discussing the impact of a critical incident with family, friends, and others is part of coping with unusual stress. However, UW-Madison Police Department personnel are encouraged to limit such discussions to debriefing sessions and departmental interviews. When you and your loved one decide to talk about the actual incident, the content of your conversations are considered "privileged communication" per Wisconsin State Statute 905.04. But keep in mind that if the content of your conversations are discussed with friends and/or neighbors, the information is no longer deemed privileged.

1. Listen carefully and spend time with the person who is hurting.
2. Offer your assistance and a listening ear even if they have not asked for help.
3. Reassure them that they are safe.
4. Help them with everyday tasks like cleaning, cooking, caring for the family, minding children.
5. Give them some private time.
6. Do not take their anger or other feelings personally.
7. Do not tell them that they are "lucky it wasn't worse"—traumatized people are not consoled by that. Tell them you're sorry this event has occurred and that you want to understand and help.
8. Do not second guess the officer or provide too much advice.
9. Do not make promises you cannot keep.

How to Sleep Well

- Sleep only when sleepy.
- If you must nap, do “tactical napping.”
- If you can’t fall asleep within 20 minutes, get up and do something boring until you feel sleepy.
- Try and get up and go to bed at the same time every day. If you can’t because of your work schedule, then try to get some “anchor sleep.”
- Don’t exercise at least four hours before bedtime.
- Develop a healthy sleep ritual that you do every day before going to bed.
- Avoid caffeine, nicotine and alcohol at least four hours before bedtime.
- Take a hot shower or bath 90 minutes before bedtime.
- Make sure your bed and bedroom are quiet and comfortable.
- Use sunlight (preferred) or artificial light to help reset your body clock.
- Try and exercise regularly to help your body burn off excess energy.
- Have a very light snack before bed (such as milk or turkey).

Things to Remember and Things to Try

- Within the first 24-48 hours, periods of strenuous physical exercise.
- Structure your time—keep busy.
- You're normal and having normal reactions. Don't label yourself crazy.
- Talk to people. Talking is the most healing medicine.
- Be aware of numbing the pain with overuse of drugs or alcohol. You don't need to complicate this with a substance abuse problem.
- Reach out—people do care.
- Maintain as normal a schedule as possible.
- Spend time with others.
- Help your co-workers as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feeling with others.
- Realize that those around you are under stress.
- Don't make any big life changes.
- Do make as many daily decisions as possible which will give you a feeling of control over your life, i.e., if someone asks you what you want to eat—answer him or her, even if you aren't sure.
- Get plenty of rest.
- Recurring thoughts, dreams, or flashbacks are normal—don't try to fight them—they'll decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).
- Do things that feel good to you.
- Media coverage and Internet Blogs often times do not contain accurate information. You are encouraged to avoid watching, reading or searching this information out.

Breathing to Relieve Stress

Dealing with stress, whether it is due to a critical incident or due to the everyday stressors of being a police officer, means having some healthy ways of coping. This is one easy technique for dealing with stress or just a good way to “take a breather.”

Rationale: You can reduce the anxious arousal you may feel in your body by doing breathing retraining. When people are upset or in a “fight or flight” mode, they tend to breathe mainly from their chest and very quickly. This can actually increase your feelings of distress. This exercise will help you to slow down your breathing, which can help you to relax. It can also be used if you are feeling angry, to help yourself settle down and feel calmer.

How to Do It: Place one hand on your chest and one on your stomach. Try to breathe deeply, and have the hand on your stomach move more than the hand on your chest. This is called “diaphragmatic breathing.” Think of how a baby sleeps, with mainly the stomach moving up and down. This is the technique we are going for. Think of your stomach as a balloon, filling up with air as you inhale, and shrinking as you exhale. Try to slow down your breathing.

Practice: The more you practice it, the better you’ll get. Doing this type of breathing every day can help lower your overall level of distress. In addition, you can use it “right in the moment” if you need to get ready to deal with a difficult situation. You can practice lying down, standing up, and sitting. You can close your eyes or keep them open. Some people like to count their breaths. Some people like to picture a relaxing place. Some people like to think “relax” or “calm” or “easy” every time they inhale or exhale. If you feel dizzy while you are learning this, that is normal. Just take a break, and when you are ready, go back to practicing.

Stretching to Relieve Stress

Stretching releases muscle tension caused by slumping, poor office chairs, long period of time on your feet, etc. Here are a few simple stretching exercises you can do most anywhere:

- Shrug your shoulders.
- Turn your head slowly from left to right, and from front to back.
- Do a full body stretch by reaching up to the ceiling.
- Stretch out your arms and move your fingers up and down.

Self Help Stress Relief Tips

- Take a deep breath – This is your first, most immediate defense against stress. If you can get in the habit of pausing and taking a nice, deep breath every time you feel stress beginning to take hold, you'll have won half the battle just by preventing it from taking over.
- Communicate – Whether you talk to a friend or talk to your dog, getting it off your chest will help a lot. If you don't feel like talking about it, write it down. Keep a journal and write down whatever it is that's bothering you. Writing is a therapy of its own.
- Laugh – Laughter is the best medicine. This is a saying that has been around for a long time, and it is one of those proverbs that actually mean exactly what it says. One of the best forms of funny stress relief is laughter as it is a great way to help you get rid of stress. By laughing, endorphins are released in your body, along with other healthy hormones. In fact, if you really get going in laughter, you find that it also gives you a decent physical workout. After having a good laugh, you tend to develop a positive frame of mind that will help you bond better with those you shared a good laugh with.
- Get fit – Perhaps your health and appearance are stressing you out, but even if they're not an issue, being physically fit can *directly* help relieve stress, which exists on both a mental and a physical level. Sometimes there's nothing like a long run, an intense yoga session, or a fresh swim after a stressful day to help you feel relaxed and stress-free again. Also, exercise releases endorphins; a feel good hormone. Chocolate releases endorphins as well (just only in moderation)!
- Be organized – For the most part, stress arises from feeling overwhelmed. There's just too much to do, and not enough time to do it. Being organized and getting your priorities straight can help you break responsibilities down into manageable pieces and focus on the things that really matter to you, rather than getting caught up in details and creating extra work for yourself--all of which leads to more stress.
- Soothe the senses – Light a scented candle that has a calming fragrance like lavender. Listen to your favorite, most relaxing music or, better yet, go somewhere that you can listen to wind rustle through trees or waves crash on the beach. Enjoy the scenery, whether you're outdoors or viewing an art exhibit. Drink some warm tea or taste--**really** taste--some dark chocolate. Treat yourself by getting a massage or, if you want to be alone, take a bath (bubbles are recommended).
- Listen to music – Listening to music does wonders and is a great way to relieve stress, if it is not something that'll make you feel worse. Listen to good songs that get you in a happy mood; and just forget about your problem. Music is known to be a significant mood-changer and reliever of stress. Ocean sounds tend to simulate calmness and serenity, so, listening to a sound machine while lying down could help.
- Do nothing – That's right, do nothing at all. Close the door, open the window, have a seat, and take a little break from life. If your mind is racing, learn to meditate and just let that stress *go*.
- Be thankful. It does wonders for your state of mind
- Be aware of your choices; you *always* have a choice.
- Learn to say no; you cannot do everything you are asked.
- Learn to forgive, particularly to forgive yourself, guilt adds pain to stress.
- Learn how to apologize and not take things personally.
- Learn how to delegate.

Family & Friends Information – Officer Involved Critical Incidents

You are being provided this information because someone very close to you has been involved in a critical incident as a result of their employment with the UW- Madison Police Department. A critical incident is any situation that forces you to face your own vulnerability and mortality, or potentially overwhelms your ability to cope. A critical incident is characterized by being sudden and unexpected, and disrupts your sense of control, and beliefs in how the world works.

“Officer Involved Critical Incident (OICI)” is an event in which an officer is involved as a principle, a victim, or is the custodial officer, where a significant injury likely to cause death occurs or when an officer intentionally discharges his/her firearm at another person.

The purpose of this documentation is to provide you with some basic information about what will be occurring in the upcoming days, weeks and months. Additionally, it is our hope that providing you with some basic information on how to best assist your involved police officer in the immediate future, will assist them in their recovery process both physically and mentally.

What You Need to Know Right Now

- Your involved police officer will be off of work until he/she, the agency and a mental health professional clears him/her to return. This time away from work is called Administrative Leave with Pay. This leave is not a suspension and is in no way to be construed as disciplinary action or any indication of wrongdoing on the part of the officer.
- Administrative Leave is not an admission of guilt or wrong doing. It is in the best interest of all to have your loved one away from the stressors of work immediately after a critical incident occurs.
- While on Administrative Leave with Pay, your involved police officer continues: their wages; their health care benefits; their holiday / vacation / compensatory balances.
- As a result of this critical incident, there will be two separate investigations taking place in the upcoming days and weeks, a criminal investigation and an internal investigation.
- **Criminal Investigation:** An investigation of a critical incident to ascertain all the relevant evidence as to whether or not anyone committed a crime during the course of the event which led up to and included the critical incident. The criminal investigation is separate and takes precedence over the internal and possible civil investigation.
- **Internal Investigation:** All Officer Involved Critical Incidents shall be reviewed for compliance with UW-Madison Police Department Policy. Professional Standards has the primary responsibility for conducting the internal investigation to ensure compliance with the UW-Madison Police Department Policies, Procedures, Regulations, Work Rules, and Training and Standards.

- For the most part what your involved police officer conveys to his/her spouse and/or attorney is privileged. That said...if his/her spouse conveys any information to anyone else (such as friends or family members), not including an attorney, in most cases this information is not privileged.

You Are Not In This Alone

All members of the UW-Madison Police Department have previously been given the opportunity to fill out paperwork on how you were to be notified of their involvement in a critical incident. Depending on the circumstances of their critical incident, the UW-Madison Police Department may or may not have been able to notify you in the manner your police officer requested. We will try our best to comply with their request.

Your involved police officer was also allowed to identify a fellow department member who is called their **Critical Incident Partner (CIP)**. The CIP will serve as a liaison for the involved officer and other department personnel throughout the investigative process.

The CIP may be put on paid Administrative Leave with the involved officer to whom they are assigned as support. The length of time that a CIP will be placed on paid administrative leave will be evaluated on a case-by-case basis and approved through chain of command. The CIP will act as a liaison between your family and the UW-Madison Police Department. Although there will be some contact with agency representatives and your involved police officer, much of the contact will be routed through the CIP. The CIP is available to you and your family as well and they are encouraged to make themselves available as much as possible.

Resources Available for Officer and Family Support:

UW-Madison Employee Assistance Program – (608) 263-2987

All immediate family members and domestic partners are encouraged to utilize the UW-Madison EAP Services. This is a free and confidential service which provides education, support, and resource referral. The EAP provides these services at all times for personal and work related stress. However, EAP can be especially valuable following a critical incident for you and your family.

Peer Support Program/Officer Assistance Program Provider -

Following a traumatic event and/or critical incident, CISM services are available for officers and their families. CISM services are delivered by professionals in the areas of trauma, resiliency and recovery. Such services can include education, debriefing, defusing, and other support as needed. The UW-Madison Police Department's CISM provider is the following;

Andrew Peterson, MS, LMFT, STS HealthyMinds, LLC
6510 Grand Teton Plaza, Suite 402
Madison, WI 53719
Toll Free: (855) 458-4966
On Call: (608) 239-8807
adpeterson@healthmindslc.com

Individual Health Insurance

Health insurance coverage can provide service for a variety of needs including medical treatment, mental health, counseling, alcohol and other drug abuse treatment, etc. Each insurance company is a little different in coverage limits and how you can access service for you or your family. Contact your insurance company directly or UWPD Human Resources for coordination of services.

Physicians Plus Insurance – (608) 233-3575 or (800) 683-2300

Dean Care Insurance – (800) 279-1301

Unity Insurance – (608) 233-3575

Group Health Cooperative Insurance – (608) 441-3290

UW- Madison Police Department – Peer Support Program

If you have questions regarding this process which the CIP cannot answer, or if you need any additional information, please do not hesitate to contact someone from the list below for assistance.

UW- Madison Police Department Peer Support Partners:

Maggie Augustin

Tracey Berman

Adam Boardman

William Brown

Amanda Buckley

Cherise Caradine

Megan Staab

Barrett Erwin

Jon Gonring

Patrick Lau

Marc Lovicott

Tricia Meinholz

Josh Nash

Mark Silbernagel

Theresa Waage

Nicole Zautner

CISM and PTSD Self-help Guidelines

COMMON SYMPTOMS AFTER A CRITICAL INCIDENT

After a traumatic event, it is common, and normal, to experience a wide range of emotional or physical reactions. They may appear immediately or sometime later. They may last a few hours, a few days or a few weeks.

Remember: These are **NORMAL** reactions to an **ABNORMAL** event.

EMOTIONAL BEHAVIORAL

- Fear - Social withdrawal
- Anxiety - Hyper alert
- Depression, sadness - Suspiciousness
- Feeling numb - Emotional outbursts
- Irritability - Changes from usual behavior
- Anger - Avoiding thoughts, feelings or
 - Guilt situations related to event
 - Denial - Shutting down
- Excessive worry - Loss of appetite
- Agitation - Poor sleep
- Feeling overwhelmed - Increased use of drugs/alcohol

THOUGHTS PHYSICAL

- Confusion - Nausea/Diarrhea
- Difficulty concentrating - Shallow breathing
 - Memory problems - Twitches/Tremors
- Shortened attention span - Dizziness/Faintness
- Difficulty making decisions - Chills/sweating
 - Overly critical - Easily startled
 - Flashbacks - Fatigue
 - Overly sensitive - Headaches
- Hyper vigilant - Feeling uncoordinated

THINGS TO REMEMBER ABOUT TRAUMA

- Everyone responds differently. Try not to judge yourself or others.
- Experiencing a critical incident may trigger memories of other painful experiences. This is normal and although painful, will pass in time.
- Take care of yourself. Rest, eat well, and exercise to relieve anxiety and stress. Put unrelated stressful decisions on hold.
- A trauma in the workplace may hit us unexpectedly. We may not realize how much a part of our lives our co-workers have become until something happens to one of them.
- While we may question the appropriateness of grieving at work, it is necessary to put closure to the event. People grieve in different ways.
- It can be helpful to consider the positive results that can come from a trauma or loss. The experience can lead us to reassess our lives, to decide what's really important. We may come to appreciate others more. For some people, surviving a crisis helps build self-confidence. Knowing they have the strength to manage a difficult situation can lead to believing that they can handle other challenges they may have to face.

WHAT YOU CAN DO FOR YOURSELF

- Eat well-balanced and regular meals.
- Get plenty of rest.
- Exercise regularly.
- Avoid caffeine, especially if you're having trouble sleeping.
- Avoid using drugs and alcohol.
- Don't make any major life changes or decisions.
- Give yourself permission to feel bad and to share your feelings with others.

- Do things you enjoy.
- Talk with people you trust. Don't be afraid to reach out.
- Don't be afraid to set limits with others when you don't feel like talking.
- Don't label yourself as "crazy". These are normal reactions.
- Write down your thoughts and feelings.
- Ask for help if you need it from your EAP
- See a counselor, clergy or other professional if needed.

WHAT YOU CAN DO FOR OTHERS

Take care of yourself first. Then you can help others.

Listening:

- Listen carefully.
- Acknowledge feelings as normal.
- Don't respond with "you're lucky it wasn't worse." Instead, say you are sorry such an event has occurred and you want to understand and help.
- Don't take responses like anger personally.
- Respect an individual's need for privacy. Let them talk when they are ready to.

Reaching Out at Work:

- Offer to listen to someone who hasn't asked for help but may need it.
- Give encouragement and support with on-the-job issues.
- Identify resources for additional help - EAP

Helping Family and Friends:

- Offer to spend time with person struggling from traumatic event.
- Offer help with everyday tasks like cleaning, cooking, or caring for the family.
- Respect their need for privacy and time alone.
- Keep communications open - be available and accessible

CHILDREN AND TRAUMA

After exposure to trauma such as violence, death, accidents or natural disasters, children are likely to show signs of stress. These reactions are normal and usually will not last long. Whether a child was involved directly or because a parent was involved, or was a second-hand witness via the media or friends or family, they may exhibit some of these symptoms:

Indicators of Emotional Overload in Children:

- Regression: Returning to earlier behaviors they had outgrown
- Nightmares and night terrors
- Clinging to parents, fear of strangers
- Outbursts and tantrums
- Fragile feelings, hurt easily
- Nervous behavior
- Withdrawal and isolation
- Physical complaints, headaches and stomachaches
- Bed-wetting or thumb sucking

Helping Your Child with Emotional Trauma:

- Provide reassurance that the child is safe and you will protect him or her.
- Hold, hug and touch the child often.
- Explore your child's perceptions of the event. Answer questions openly.
- Be honest and give accurate information in a way the child will understand it.
- Be more tolerant of unusual behavior.
- Spend extra time with your child at bedtime.
- Help your child to identify and label feelings. Let your child know these feelings are normal and that you'll help with them.
- Watch for, and correct, self-blame by your child. Make sure your child understands that what happened was not his or her fault.
- Allow your child to mourn or grieve over their loss.

(If symptoms do not decrease in severity over a few weeks, or if your child was exposed to actual or potential violence, loss, or serious injury, consider consulting with a mental health professional who is specially trained to work with children.

- Reviewed: 05/19
- Reviewed: 11/20