


NH DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE DIRECTIVE		CHAPTER <u>Medical & Forensics</u> STATEMENT NUMBER <u>552.00</u>
SUBJECT: RESIDENT PEER SUPPORTERS		EFFECTIVE DATE <u>06/04/2024</u>
PROPONENT: <u>Paula Mattis, Director</u> <i>Name/Title</i> <u>Medical & Forensics, 603-271-5563</u> <i>Office Phone #</i>		REVIEW DATE <u>06/01/2026</u> SUPERSEDES PPD# <u>NEW</u> DATED <u>12/04/2015</u>
ISSUING OFFICER:  <u>HELEN E. HANKS, COMMISSIONER</u>		DIRECTOR'S INITIALS _____ DATE _____ APPENDIX ATTACHED: YES _____ NO _____
REFERENCE NO: See reference section on last page of PPD.		

(a) **PURPOSE:**

The purpose of this directive is to provide procedures and guidelines for the use of trained Resident Peer Supporters through a program implemented by departmental mental health staff and managed together with departmental Security. This program is intended and has demonstrated that the use of trained peer supporters reduces the length of observation in most cases by providing pro-social suggestions using skills certified through psychological first aid during the actual observation of residents on suicide watch. In addition, trained peer supports report/alert staff to the levels of activity observed related to the resident's suicidality and/or other mental health observations to assist clinical staff and security to a safe outcome with the goal of transition off observation.

(b) **APPLICABILITY:**

This policy applies to:

- (1) All Department of Corrections staff, contracted employees, and volunteers.

(c) **POLICY:**

- (1) The New Hampshire Department of Corrections (DOC) shall maintain a Resident Peer Support program to provide supportive assistance with residents identified with suicide risks and to recognize the warning signs of suicidal behavior in residents who are placed under observation pursuant to PPD 542.00 Suicide Prevention and Intervention. In all instances, the intent of this program is to have a Resident Peer Supporter provide a service in support of the work of clinicians and security and is always under the direction of staff. Resident Peer Supporters are intended to augment the existing requirements of staff in these situations not replace or interfere.
- (2) The Resident Peer Support Program is maintained twenty-four (24) hours a day, seven (7) days a week, in each area designated for use to facilitate the safe, peer supported and direct

observation of those residents on suicide watch at the DOC facilities. This is only adjusted based on the number of certified peer supporters by facility.

- (3) It is founded in research that the training of laypersons to provide social support to those at high risk of suicide plays a critical role in suicide prevention [Evid Based Ment Health, 2022 Feb; 25(1): 29-35].

(d) PROCEDURES:

(1) Selection of a Resident peer supporter

- a. A Resident will be considered for the volunteer position of “Resident Peer Supporter” when they can satisfy the following:
 1. It can be reasonably determined the Resident’s sentence shall be at least one year or greater to be considered as a Resident Peer Supporter. This is to reduce the potential for an inordinate amount of vacancies, allow appropriate training time, and maximize the effectiveness of the Peer Support Program.
 2. An application is provided to the facility clinician assigned to track these volunteers. The application describes why the Resident wants to be a Resident peer supporter and the reasons they would be a good candidate.
 3. The Resident receives a recommendation from the clinician assigned by the Administrator of Forensic Services or designee based on their evaluation of the Resident’s ability to be alert, empathetic, and successful in the required training.
 4. The Resident obtains the required security clearance per Cor 409.02 for Security Sensitive Work Assignments.
 5. The Resident successfully completes the training and orientation as described in Section B below.
- b. Each facility shall have a mental health clinician, to screen, select, and assign Resident Peer Supporters. The assigned clinician will keep an active up-to-date list of Resident peer supporters for their facility in our electronic offender management system (CORIS) located by assigning the appropriate Alert under Suicide Prevention and selecting Peer Supporter. This list will be available through the Alerts Lookup report. Additionally, Resident Peer Supporters must receive the required training, successfully pass the prescribed examination, and be certified by a Psychological First Aid Instructor through NH Department of Health and Human Services or like program before being assigned.
 1. When screening prospective Residents for the position as a Resident Peer Supporter, the assignment clinician should look for qualities such as, but not limited to, alertness, empathy, compassion, conscientiousness, and high motivation. The clinician should also be reviewing the Resident’s own resiliency in doing this volunteer work.
 2. Each Resident Peer Supporter candidate must have clearance by security prior to receiving training or assignment as a Resident Peer Supporter. They must also meet the criterion for Security Sensitive Work Assignments and have a completed Volunteer Revie Form for Peer Supporters with recommendation (Attachment A).
- c. A prospective Resident peer supporter will not be disqualified by virtue of needing their own mental health services. Where a resident is determined as needing mental health services, the resident must be evaluated by mental health and be determined suitable on a case-by-case basis for the volunteer position of resident peer supporter.
- d. The medical staff or mental health staff shall give prompt notification to the Shift Commander, or designee, of any resident Peer Supporter who is unable to perform the prescribed duties because of medical reasons that could impair the Resident Peer Supporter's effectiveness or create a risk.
- e. The Resident Peer Supporter should immediately report to the Shift Commander or Medical Officer if they are unfit or unwilling to perform the duties of the position. This includes but

is not limited to: illness, medications, disciplinary infractions, or other reasons that may interfere with or prohibit fulfilling the responsibilities of the position.

- f. Upon receiving such notification, the Shift Commander, or designee, shall notify the Medical Officer who shall find a suitable replacement for the scheduled Resident Peer Supporter.
- g. It will be the responsibility of Security to monitor and take action to temporarily remove any Resident Peer Supporter from their position if there are infractions or reasons that the Resident should not or cannot perform the duties as a Resident Peer Supporter. These include but are not limited to disciplinary reports, keep-a-ways, medical alerts, and any other concerns that may jeopardize security and/or the well-being of Residents under observation. Security shall refer any findings to the Administrator of Forensic Services for review and determination to remove the Resident Peer Supporter from the program.

(2) Training of Resident peer supporters

- a. Resident Peer Supporters are required to attend and successfully complete an orientation and educational program in suicide prevention, administered by the Department's Mental Health Bureau, a Psychological First Aid Instructor or other evidence-based program as sanctioned by the Director of Medical & Forensic Services. Failure of any Resident to participate as required may be grounds for removal from the program. No Resident shall be permitted to work as a Resident Peer Supporter who has not fulfilled the requirements of the departmental training program for Resident Peer Supporters. This curriculum will consist of a four (4) hour education series on:
 - 1. Suicidal behaviors,
 - 2. Recognizing and reporting mental health/medical concerns,
 - 3. Development of listening skills & communication,
 - 4. Common behaviors of diagnostic groups, and
 - 5. Confidentiality.
- b. Peer Supporters may use a variety of supportive tools, to include:
 - 1. Training exercises from inner health studio-relaxation worksheets, deep breathing exercise, education on tension and stress, meditation and changing negative thinking patterns.
 - 2. Handouts from approved workbooks.
 - 3. Clinical team may also provide worksheets as appropriate.
 - 4. Psychological First Aid training provided by Department of Health and Human Services or certified instructor, or other evidence-based programs.
- c. A completion certificate will be scanned into the resident electronic resident file for tracking.

(3) Deployment of peer supporters

- a. Resident Peer Supporters shall be assigned when a person under departmental control is put on an observation level pursuant to PPD 542.00. The only barrier to this provision will be if no peer supporter is available and this will be documented by nursing in the medical record. A peer supporter should be continually considered through a person's admission onto an observation level. A provider, if after assessment finds it contrary to the current psychiatric condition, will have to document in the medical record the contraindications for the use of a peer supporter. The treatment staff involved will review all Resident Peer Supporter log entries and determine continued need for support as the observation level continues pursuant to PPD 542.00. Resident Peer Supporters will not have physical contact with residents on observation and are only to act as peer supporters. If an emergent issue or concern is noticed, peer supporters are directed to alert security through the use of their whistle or other appropriate means. Peer supporters will provide listening and observation skills, worksheets, and other tools through closed and secured doors, providing a safe distance between residents at all times.

(4) Peer supporter roster

- a. The Mental Health and Medical team for each facility shall maintain an up-to-date roster in electronic client record (i.e., CORIS) of Resident Peer Supporters to provide support twenty-four (24) hours a day, seven (7) days a week or as needed. The Mental Health team and nursing shall ensure their respective facilities maintain the list of Resident Peer Supporters who are qualified and pre-approved to act as immediate backfill for loss of Resident Peer Supporters due to Resident discharges, transfers, change in classification status, or other unforeseen factors that result in an immediate decrease of available Resident Peer Supporters from the active list. The security staff managing the filling of a request for a peer supporter will have to review CORIS prior to assignment to a resident to ensure there are no keep-aways. The Shift Commander or designee shall notify the Housing Supervisor who shall call for a replacement if the scheduled Resident Peer Supporter is unable to perform task with a suitable replacement.
- b. A printout of the roster may be maintained in the Medical Control Room(s), nurses' station or other designated area in the event of a power failure or technical issue.

(5) Resident peer supporter duties

- a. Resident peer supporters shall:
 1. Conduct a dialogue with residents placed under observation due to suicidality. Assist with coping skills and decrease the feelings of segregation and isolation.
 2. Promptly report any unusual or suicidal behavior to the Corrections Officer on duty assigned to the area,
 3. Talk with Residents in an effort to identify their needs and communicate those needs to the Corrections Officer on duty.
 4. Provide appropriate assistance requested by the Corrections Officer or supervisory staff directs them to do following a suicide attempt or suicidal gesture.
 5. Make appropriate logbook entries as required in this directive.

(6) Equipment

- a. While on duty, each Resident Peer Supporter shall be assigned the following equipment, which must be in working order:
 1. A watch or access to a working clock
 2. A means to document and track their work as assigned
 3. Whistle or alert system
- b. The Officer assigned to the observation area must notify their supervisor if any of the above listed equipment is not operational or not available to ensure prompt replacement.
- c. The Officer shall be responsible for issuing the above listed equipment to each Resident Peer Supporter at the commencement of their scheduled duties and retrieving the equipment at the completion of the Residents assigned duties.

(7) Scheduling and benefits

- a. Resident Peer Supporters will be assigned to an observation level cell to provide peer support for a four-hour shift and may be allowed to return following a four-hour break.
- b. Resident Peer Supporters shall only be scheduled to work in shifts lasting no greater than four (4) hours at one time.
- c. Residents that participate in good standing in the Peer Support program for eight months will be considered a level two accomplishment and shall be issued a certificate acknowledging their meaningful participation was deemed valuable to the Resident's rehabilitation and will be eligible for consideration under PPD 457.00 Earned Time Credit Provisions.
- d. Residents providing Resident Peer Support services during mealtimes will be provided a cell feed delivered to the medical unit and may eat at assigned cell.

- e. Any Resident Peer Supporter who completes a level two accomplishment (16 months) will receive a synopsis of their services by a formal letter with an overview of the program, an explanation of their contribution and words reflecting appreciation for their service.
- (8) Dismissal of peer supporters
- a. Resident Peer Supporters may request to be removed from the program at any time. The reason for such request shall be noted in CORIS in the notes section by the clinician overseeing the facility program.
 - b. In all instances where a Resident Peer Supporter has been removed, it shall be the responsibility of the Shift Commander or designee to ensure that a suitable replacement is assigned from the active list of Resident Peer Supporters.
 - c. Residents may be removed from the program for:
 1. improper performance of duty;
 2. sleeping on duty;
 3. improper conduct;
 4. violation of Resident rules;
 5. encouraging a Resident to attempt suicide or to commit a suicidal gesture; or
 6. violating the confidentiality of those receiving any service in the Health Care Services unit.
 - d. Inappropriate job performance may result in disciplinary action. Pursuant to PPD 390.00, Processing Spot, Disciplinary, Incident & Intelligence Reports, section IV C, 3, (1.), The facility Chief of Security, may for cause, upgrade a minor "B" violation to an "A" level offense. Documentation justifying the upgrade must be available to the Warden and Commissioner during the appeals process. Staff facilitating these disciplinary actions in cases where a peer supporter is removed for inappropriate job performance, will take this option into account when documenting the recommended disciplinary action.
 - e. Failure to promptly report a suicide attempt or a suicidal gesture will result in disciplinary action and possible criminal charges if appropriate.
 - f. Improper performance of a less serious nature, such as failure to make entries in the Resident peer supporter logbook or a non-cooperative attitude, may also result in dismissal. In such cases, staff need not prepare an infraction report; however, the Corrections Officer dismissing the Resident Peer Supporter will note such in CORIS and shall notify the shift commander of such action. Notifications by security will be made to mental health and medical staff to remove the Resident from the Resident Peer Support list.
- (9) Resident peer support logbook
- a. In order to provide a system of accountability, the Department shall provide logbooks in each health services center, where Resident Peer Supporters are assigned. These logbooks shall only be used as per the provisions noted below:
 1. The logbook shall be labeled "Report of Activity - Resident Peer Supporter" (Attachment B)
 2. The logbook shall be kept at the nurses' station and requested by the Resident when needed.
 - b. The Resident Peer Supporter shall not be permitted to enter the nurses' station to obtain the logbook or to make log entries.
 1. All entries shall be printed legibly, in ink.
 2. Resident Peer Supporters must make daily entries into logs and include all incidents of suicidal or unusual behavior, or any behavior or action exhibited by a Resident and reported to security that may indicate the need for medical treatment and/or mental health evaluation in the log.
 - c. The sample log entry below is an example of what to include:
 1. *A Resident sitting on bed, appearing to be in a depressed state; talking to someone when in fact, no one is present; or is seeing objects or hearing voices that do not exist.*

- d. The Resident Peer Supporter shall make all appropriate entries at the end of each shift.
 - e. Security and nursing will initial each entry every four hours to ensure appropriate documentation and review of any general non-emergent concerns. Security and nursing will initial the log before their change of shift if the four hours a peer supporter is volunteering crosses over shifts.
- (10) Security post officer duties/responsibilities
- a. The Corrections Officer(s) assigned to the health services center security post or any other area within the DOC facilities where a suicide watch is being conducted shall ensure all obligations by security staff are followed as outlined in PPD 542.00 Suicide Prevention and Intervention as ordered by the psychiatric provider instructing the observation level (e.g. 15-minute checks). In addition, the officer shall ensure that the Resident Peer Supporter is prepared to perform duties within the health services area. The Corrections Officer(s) shall:
 - 1. Obtain the appropriate equipment from the Control Room or designated secured area for each Resident Peer Supporter assigned to the medical unit.
 - 2. Record the following information in the Resident Peer Supporter Logbook:
 - (i) Name and number of each Resident Peer Supporter on duty.
 - (ii) Name and number of any Resident Peer Supporter who is replaced or relieved during the Officer's tour of duty.
 - (iii) Name of Resident and ID number being supported by Resident Peer Supporter
 - (iv) Officer will sign their initials on the Logbook when the Peer Supporter is dismissed from their volunteer post each time.
 - 3. Notify the Shift Commander or designee of any Resident Peer Supporter who is replaced or relieved during his/her tour of duty.
 - 4. Ensure that the Resident Peer Supporter who is scheduled to work is on post and performing the prescribed duties.
 - 5. Notify the Shift Commander or designee of any Resident Peer Supporter who cannot perform the prescribed duties.
 - 6. Complete an incident report on any Resident who has attempted suicide, is displaying suicidal behavior, or is exhibiting behavior that may indicate the need for medical treatment and/or mental health evaluation by Resident Peer Supporters using the emergency alert system prior to the end of shift.
 - 7. Review for appropriate entries in the Resident Peer Supporter Logbook.
 - b. Wardens/Directors may publish guidance documents that comport with the intent and implementation of this policy taking into consideration different physical plant and operational differences as long as those guidance documents do not limit or restrict use of the policy as intended.

REFERENCES:

Standards for the Administration of Correctional Agencies

N/A

Standards for Adult Correctional Institutions

Fifth Edition Standards

5-ACI-6A-35 (M), 5-ACI-6B-12

Standards for Adult Community Residential Services

N/A

Standards for Adult Probation and Parole Field Services

N/A

Other

Attachment A: Volunteer Review Form

Attachment B: Report of Activity - Resident Peer Supporter Log

[Methods and efficacy of social support interventions in preventing suicide: a systematic review and meta-analysis - PMC \(nih.gov\)](#)

[Social support as a protective factor in suicide: Findings from two nationally representative samples - PMC \(nih.gov\)](#)