

Employment-Related Psychological Evaluations: Risk Management Concerns and Current Practices

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Pre-employment psychological evaluations and fitness for duty evaluations are an increasingly important part of police psychology services. While it is assumed that agencies display differences in how they handle these functions, there has been to date no systematic study of the specific methods and patterns of service delivery for pre-employment and work fitness evaluations. The current study presents results from a national survey of the fifty largest police and sheriff's agencies using department size to partition the data. Of particular interest are the methods of communication of confidential findings to the department in light of restrictions set forth by professional guidelines and by a recent California Appellate decision in the Pettus case. Implications for addressing conflicting elements of ADA requirements and reducing risk factors for professional liability are addressed in our discussion of these findings.

Psychological services to police departments has grown from the early pioneering efforts of Martin Rieser (1972a, 1972b) with the LAPD and James Reese (1995) with the FBI to include a number of important occupational and clinical functions. Services include pre-employment and fitness for duty evaluations, as well as counseling services, training, operational support, and research (Scrivner and Kurke, 1995). More recent attention has been given to professional issues such as handling confidentiality concerns and clarifying evaluative versus counseling roles (Archibald, 1995). Psychological evaluations for pre-employment selection (Hibler & Kurke, 1995) and evaluations for fitness for duty (Stone, 1995) represent two key areas where such legal and ethical issues have been addressed. Problems associated with police misconduct and violations of civil rights have prompted attorneys to seek access to these pre-employment records and to raise questions about negligent hiring and failures to properly assess officers for continued fitness for duty. Police psychologists have come under fire for their methods of selection and for their ability (or inability) to predict work fitness. This more litigious environment has prompted discussions over ethical and legal issues regarding ownership of employee records and confidentiality over reports to management. Expectations regarding confidentiality of medical

and psychological records may conflict with efforts by attorneys to subpoena all available materials on an officer in question. Increased scrutiny and greater demands for accountability have led police psychologists to examine their own practices and to make certain that they are operating within the competing demands of employment law and psychological ethics. Liabilities from such decision-making by the police psychologist have increased the need for sensitivity to risk management strategies in this complex legal minefield.

The demand for comprehensive and detailed pre-employment psychological evaluation stands in conflict with a growing emphasis on personal privacy and disability accommodation issues (as set forth the Americans with Disabilities Act, 42 U.S.C. 12101-12117). Adding to the debate is the mounting tension between clinical and evaluative domains of police psychology (e.g., Archibald, 1986, 1991) where the police psychologist must constantly clarify his or her role, provide for informed consent, and juggle the organization's needs with the needs of the officer in treatment or under evaluation. Agencies that provide both sets of services must struggle with the countervailing influences of the agency administration which may demand access to confidential material and take a more punitive stance in fitness evaluations contrasted with the efforts of the clinical and counseling departments wishing to appear more independent and capable of protecting the best interests of the officer. Thus, the modern police psychologist must be ready to handle the multiple, demanding clinical and evaluative tasks of their job while attending to the increasingly thorny ethical and legal expectations that these forces bring to bear.

The police psychologist must simultaneously remain alert to multiple issues imposed by the Equal Employment Opportunity Commission (1978, 1979) and the ADA. The timing and content of pre-employment psychological evaluations must also be carefully considered in order to meet the goals of providing a thorough assessment conducted in accordance with these legal guidelines. Liability for errors in this selection process (either in terms of employment discrimination or inadequate screening and negligent hiring) will still fall upon the government agency that hires the officers, even when pre-employment psychological evaluations are conducted by outside contract psychologists. Thus, it may be important to examine the extent to which major police agencies have adopted this consultant outsourcing model of pre-employment psychological screening, and consider the degree to which these agencies provide oversight functions for these contract psychologists. Since these evaluations have a significant impact on public safety and on the personal rights of the officer, the nature of these practices needs to be understood in order to balance these demands. In the case of fitness for duty evaluations, we must understand that the typical modern police department has a great deal of time and money invested in the officers they select, hire, and train. When officers face periodic episodes of personal crisis (e.g., divorce, marital and family problems, exposure to critical incidents, stress and depression, accidents affecting concentration or memory), there may be sufficient impairments in their ability to function in their police role such that they may pose a risk to themselves or to others. These impairments have led many agencies to restrict the officer's police powers (removal of weapons and badge) and most agencies will consider ordering more complete evaluation for appropriate treatment. Issues of officer safety and concern for appropriate delivery of police services demand

that impaired officers are quickly identified, removed from duty, and referred for treatment. Such fitness for duty examinations are legally permitted under the Federal Americans with Disabilities (ADA) Act and under several state statutes (e.g., California Fair Employment and Housing Act FEHA) but require agencies to use a formalized and fair procedure for conducting such evaluations.

A common problem in providing such evaluations is the question of the degree to which the evaluator is at liberty to make a fair and independent assessment. Of particular significance is the issue of confidentiality of these work fitness records. Stone (1995) points out that work fitness evaluations "lie somewhere at the intersection of risk management, mental health, labor law, and internal discipline (p.109)." Since most agencies rely on civil service status for the officers, and since the police union may play an active role in watching out for the officer's rights, there may be important considerations for due process and confidentiality of medical records when conducting such fitness evaluations. Unfortunately, many agencies may consider the fitness for duty evaluation an avenue for removing problem employees, seeking to circumvent various civil service protections and union demands. In this case, the evaluation is seen as an alternative to the formalized disciplinary procedures that must be used to address problem employees. Complicating the matter further is the fact that many problem employees demonstrate behavioral patterns which may violate police policy and lead to discipline, while at the same time reveal psychological or adjustment concerns which may be the root cause for these problems. In this case, the issue may bring about legal requirements for seeking appropriate accommodation for the officer under the ADA guidelines for disability.

Thus, while some agencies may consider a work fitness evaluation a convenient avenue to remove a unsuitable officer with psychological concerns, it may open the door to ADA requirements and actually further compound the agency's troubles by requiring that reasonable accommodations are provided for the officer. Therefore, it has been suggested that some of the complications in this area can be better addressed through improved management and organizational development techniques (e.g., Harris and Gilmartin, 2000) which help clarify progressive discipline methods in contrast with work fitness psychological evaluative methods.

Many police agencies employ a combination of in-house and contract services for conducting such fitness for duty evaluations, at the same time seeking to insulate the in-house police psychology counseling and employee services from the negative stigma attached to such evaluative functions. This has brought with it the added complication of confidentiality concerns over the fitness for duty evaluation records. When an employer sends someone for an evaluation, the question remains as to who is the client and who's records are these? Can the agency require an officer to make full and complete disclosure to the department? Is this type of disclosure an invasion of privacy, or could it be justified in terms of public safety requirements? Recent California litigation (*Pettus v. Cole* 49 Cal. App. 4th. 402; 57 Cal. Rptr. 2d 46 (1996) has highlighted these concerns, and much like the earlier Tarasoff decision regarding duty to warn (*Tarasoff v. Regents of the University of California* 13 Cal. 3d 177, 529 (1974); See also, 17 Cal.

3d 425; 131 Cal. Rptr. 14 (1976)), the Pettus decision may pave the way for other states to consider more formalized methods of reporting results from fitness for duty evaluations. The essential outcome of the Pettus decision is that the psychologist cannot give detailed case information to the employer unless the employee specifically grants that. Instead, they can only communicate information about fitness status and any relevant restrictions.

These issues in risk management prompted the current study of the fifty largest police departments. It was hoped that collecting data on the pre-employment practices and fitness for duty evaluation practices of these agencies would help assess the state of the art in the field and prompt further discussion and improvements in risk management strategies in both domains.

Methodology:

A 22 item survey instrument was developed which utilized a combination of multiple choice and yes-no answer formats. Three items called for narrative explanations. The survey was mailed to a national sample of the fifty largest local police departments. Two mailings and telephone follow-up requests were done to obtain optimal data from slow or non-responding agencies. A total of 37 (74%) out of 50 departments returned the completed survey documents. Results were tabulated according to three classifications of department sizes (less than 1,000 sworn personnel, between 1,000 and 2,500 sworn personnel, and more than 2,500 sworn personnel). Comparisons of service delivery patterns were made for the total sample and for the agencies by size.

Results:

Salient items from the survey sample are presented below with total population results presented first. Subgroup comparisons are noted in the section which follows. Of the 37 departments who responded, some 22 departments (59%) report having an in-house behavioral sciences services unit. Fifteen (41%) departments do not employ such an in-house psychological unit, but instead rely upon independent consultants, EAP organizations, and contract mental health services. Of the agencies that do have in-house psychological service units, most employ primarily doctoral level psychologists, and to a lesser extent, may have additional master's level practitioners or trainees (interns). The size of the psychology units range from one full time psychologist to as large as 25 full time psychologists (1.9 mode, 2 median). Removing the top two outlying scores (25 and 14 psychologists), the more common average number is 2 per agency.

A number of clinical services are provided by these units. While some units will conduct all services in one unit, the majority of agencies divide these duties two groups involving personnel selection and evaluation services and into a separate police psychology employee services unit. Most police psychology units offer clinical services, organizational development, peer counseling, critical incident stress debriefing, stress management, staff training, and

operational support services. Clinical and organizational services were the primary focus of most of these in-house police psychology services (Table One). In addition to their own form of in-house counseling and referral services, many (59%) also provide additional access to Employee Assistance Programs which operate independently from the agency.

Insert Table One About Here

While every police department utilizes mental health professionals to conduct pre-employment psychological evaluations on candidates, there is an even split between those who utilize independent contractors or outside service providers, and those who operate in-house psychological pre-employment services (18 in-house, 49%; 19 contract, 51%). Closer examination of these responses reveals that only 7 out of 37 agencies actually do their own complete in-house processing of pre-employments (18.9% of total sample, 38.8% of those with in-house) through their behavioral sciences or psychology sections. Two agencies use other psychologists operating through the personnel department (5.4% of total sample, 11.1% of those with in-house), and 7 agencies use a combination of outside contract evaluators overseen administratively through their personnel or human resource departments (18.9% of total sample, 38.8% of in-house group). For those who use an outside contract psychologist for the pre-employment psychological screening, only slightly more than half provide some form of administrative review or oversight function for these selection reports (n=20, 54%). Even then, these agencies continue to share the liabilities that come with improper selection decisions or methods which may not meet EEOC and ADA requirements, suggesting that those agencies who operate without such oversight are at grave risk for potential lawsuits against them. The majority of agencies (68%) require the applicant to sign a consent which authorizes the use of the pre-employment psychological screening results (interview, testing data, report) in subsequent counseling or disciplinary actions and reviews.

Examining these data by size of the department affords some interesting patterns of practice that may reflect differences in philosophies of management. Variations in service delivery models may also be a byproduct of differing amounts of resources available for police psychological services. Table Two outlines some of the staffing patterns which the small (less than 1,000 sworn officers), medium (between 1,000 and 2,500 sworn officers), and large

Insert Table Two About Here

(more than 2,500 sworn officers) departments display. Clearly the larger departments have a greater need and possess greater resources for staffing an in-house police psychology or behavioral science unit. The larger departments will employ as many as 25 Ph.D. level psychologists to perform these services, although some may only have as few as one or two psychologists working in house. The top three departments (New York, Los Angeles, and Houston) employ 25, 14, and 7 psychologists respectively, with the other larger departments having one or two psychologists on staff. Thus, the mean of 6.6 psychologist reflects this skewed

and small sample size of larger departments (N=11). The medium and smaller departments either do not have an in-house psychological service (46% and 50% respectively), or they employ somewhere between one and four staff members (1.9 mean, N=22).

Pre-employment psychological evaluations are part of the duties that the larger departments provide (63.6%) while smaller departments may be just as likely rely on outside psychological contract services for conducting their pre-employment evaluations. The medium size departments rely more heavily upon independent pre-employment evaluations (89.4%) but also are more likely to subject the evaluations to additional oversight and administrative review (78.5%). The small and larger departments take more of an independent stance with regard to oversight of the pre-employment psychological process, although as noted above, some of this may reflect the greater reliance on in-house evaluations for the larger agencies.

Few of the agencies utilize a signed consent for the use of pre-employment psychological screening results for subsequent additional purposes, with only half to one-third of the agencies taking this administrative stance. When used, the consent may allow for pre-employment records to be accessed later for research purposes, counseling, and/or disciplinary actions. The release form employed by these agencies must specify the potential types of disclosure and specify a time limit on the consent, or link the duration of the consent to the duration of the officer's employment with the agency. Several agencies have found it increasingly useful to obtain such initial consent forms at the time of the pre-employment psychological interview, thereby avoiding further complications if the officer should come under administrative review at a later point. Even then, the psychologist would be ethically bound to release only that information which is germane to the questions being considered, and to balance their disclosures in light of the privacy interests of the officer and the needs of the agency to obtain information.

Finally, many agencies have additional EAP services available which may offer counseling and referral that is independent of and supplemental to other police psychological services. The larger the agency, the greater the likelihood that such EAP services will be provided. These services may compliment the in-house psychological service providers, filling in the counseling and treatment gap in a more independent venue. Others merely offer the EAP program as an alternative counseling approach for the department personnel, giving the officers the option of being seen in the behavioral sciences and employee services department or in the more isolated and independent EAP network outside the agency.

Work Fitness Evaluation Procedures

Of primary concern was the question of whether or not these agencies were sensitive to potential liability concerns that emerge from work fitness evaluations, and from overly detailed disclosures to command staff or supervisory personnel without adequate authorized release from

the officer. Data was examined first from the total sample of respondents, and then broken

Insert Table Three About Here

down by department size. Results from the total sample suggest that when officers become psychologically impaired or when questions of their fitness for duty arise, the majority of agencies (33 agencies, 89.1%) will utilize an outside mental health consultant (M.D., Ph.D.), although some will also use an in-house behavioral science provider (6 agencies, 16.2%) or personnel psychologist who might also conduct the pre-employment evaluations (2 agencies, 5.4%). Work fitness evaluations may be instituted for a variety of reasons, with each of the following issues endorsed by the majority of agencies. These reasons include: (1) Known threat of violence to self or others; (2) Symptoms of severe psychological distress (e.g., phobia, depression, neuropsychological impairment); (3) Dramatic behavior or personality changes; (4) Incident or suspected incident of domestic violence; (5) Alcohol abuse/dependence or controlled substance abuse; (6) Sexual misconduct; (7) Abuse or misuse of power or force; (8) Self-reported job-interfering psychological distress; (9) Failure to recover from critical incident, PTSD concerns; (10) Pattern of performance problems unresponsive to corrective actions; and (11) Other observations which bring continued suitability and adjustment into question. These results are consistent with findings reported elsewhere by Stone (1995).

Referrals for the fitness for duty exam are generally made through command staff which issue orders for the officer to report for the evaluation. Most agencies (68%) utilize a specific signed release of information form that acknowledges the limited confidentiality of the evaluation. However, some 32% do not use such a form or do not acknowledge that the evaluation lacks customary psychological confidentiality expectations. This may be a serious liability risk factor in need of attention with some agencies. The majority of departments (78%) require that the officer agree to full and complete open exchange of information to the department, thereby giving a full release to the mental health professional to communicate freely with the command staff. Only 5 agencies (13.5%) provide the officer with the option of participating but authorizing only limited feedback to the department (similar to guidelines from the Pettus decision). If officers refuse to comply with the order to submit to a fitness evaluation, they face additional disciplinary action for insubordination or disobedience, and may face a board of rights hearing or termination. Some of these practices may no longer be tenable under pressures from police unions, civil liability attorneys, and recent case law. Continuing this approach may open the department to civil liability concerns.

Our survey also asked specifically about whether or not the agency was aware of the Pettus decision. Even though it pertains only to California so far, it has far-reaching implications much like the Tarasoff case. The majority of those reporting stated that they had no knowledge of the case (78.4%). Only 8 agencies reported being aware of this decision. Five were agencies from outside California. Greater sensitivity to these privacy constraints may need to be encouraged, either through professional commentary or through litigation.

Our results demonstrate that there are several common procedures for conducting these evaluations. While these may vary according to the specific referral question and nature of the issues in the case, the process generally begins with a review of pertinent records (e.g., performance ratings; internal investigations; citizen's complaints; specific memo outlining concerns/reason for referral; pre-employment psychological screening materials; other memoranda, incident reports, and other agency reports; medical/psychological records; and additional collateral information). Most evaluators also administer various objective psychological personality tests (e.g., MMPI/MMPI-2; MCMI-III; 16PF; CPI; PAI; NEO-PI; Inwald; STAXI) and in some cases also administer other intellectual and cognitive tests, neuropsychological measures, or the Rorschach and various other projective tests. All require and depend heavily on a standard clinical interview, and many will utilize other collateral contacts to supplement the data pool. Standard practice also calls for a written report, the nature of which may focus on work related limitations, or on more complete disclosure of the full evaluation data. The majority (67.6%) give a full report to the department, while 64.9% will specifically list functional limitations or corrective actions for addressing the problems. Only 21.6% will restrict their report in a fashion similar to the Pettus guideline which allow for only a function-focused report. This may represent risky business for an agency who may become exposed to lawsuits from angry officers put off-duty and allegedly harmed by the evaluation process.

Feedback to the officer may involve meeting with the evaluator to review the testing results (78.4%), while 5.4% provide a full written report to the officer, or give them a copy of the summary report or memo which was given to department (16.2%). If the officer is found unfit for duty, 80% of the agencies will provide for light duty or non-safety sensitive assignments, although many limit the duration of time that the employee may remain in such a position. While the majority (58.6%) do not limit the light-duty time period, about one-third (31%) use a 12 month cut-off prior to requiring mandatory retirement or discharge. There is a very small minority (10%) that only allow 6 months of time-off or light duty prior to consideration for discharge or mandatory retirement. All of the agencies sampled agreed with the final step in the process. Officers who remain unfit for full duty after the period of compensatory assignment expires are generally given mandatory retirement (medical disability, pension off) and/or discharged.

The larger departments will be more likely than the medium or smaller departments to conduct some of the work fitness evaluations in-house (18.2% compared to 13.6% and zero respectively). This may be an artifact of the availability of professional resources to conduct this work, but may also reflect specific policy decisions and management models that these larger agencies employ. The small and medium size departments are the most likely to routinely utilize outside contract evaluators (100% and 95.5% respectively) for conducting their work fitness evaluations, with a substantial majority (63.6%) of larger departments taking this same stance.

The small departments routinely have the officer acknowledge the limited confidentiality of these evaluations by administering a signed release document. Large departments are likely to

do so as well, with only the medium departments giving this issue less attention. The medium size departments are more willing to allow the officer the option of participating in the process but limiting the amount of disclosure in keeping with the Pettus guidelines (81.8%) which would only address fitness for duty and work restrictions. The small and large departments are less accepting of this constraint, and more routinely collect the full and complete report on the officer. This is an important point since the majority of the entire sample of agencies is unaware of the limitations in employer feedback imposed by the California Pettus v. Cole decision. While the California Appellate decision may not have reached other states or fall under specific local legislative guidelines, there is the ever-increasing risk that expectations from the California model will become more routine.

Finally, we asked the departments to report whether they provided some form of light duty reassignment for officers who were found unfit for duty. The larger departments (90%) and medium departments (72.7%) were more likely to do so, with the smaller departments splitting down the middle on this issue. When light-duty is available, the majority of departments for each size will not set a specific time-limit on this option, although 50% of the larger departments and 37.5% of the medium departments limit it to 12 months. A small number of medium and larger departments are more restrictive (12.5% each) and grant only 6 months of light-duty assignment prior to review or processing for discharge or mandatory retirement.

Discussion:

The survey results demonstrate remarkable commonalities of service delivery while highlighting that the major metropolitan law enforcement agencies do not share a uniform standard for pre-employment and work-fitness evaluations. Instead they have developed multiple models of service delivery which no doubt seek to meet their individual needs. Some agencies employ in-house police psychologists and occupational psychologists who conduct these evaluations, while other agencies rely on contract services from independent psychologists. Those agencies that have in-house counseling and treatment programs generally seek to separate the evaluative functions from the clinical functions partially out of sensitivity to concerns over confidentiality and a desire to separate clinical services from administrative services. Agencies that have relied on outside contract services sometimes justify their procedures on the claim that (1) such contract services reduce the risk for liabilities for the government agency and (2) the contract services may be seen as more independent and fair-minded. However, neither of these assertions is completely accurate since the use of contract psychologists does not reduce the liability and responsibility of the agency to make proper selection decisions and to employ proper evaluative methods consistent with ADA requirements. And, the perception of independence and fair-mindedness may be mistaken in those agencies where undue pressures are placed upon the contract psychologist to give recommendations that are in keeping with upper management positions in order to maintain their continued contract status. Thus, some of the larger agencies have taken the approach of employing in-house psychologists for these evaluative functions, but insulating them from the disciplinary arm of administration and from the counseling component

of police psychological services. Maintaining this more independent stance and removing the financial pressures for "rubber stamp" decisions has been seen as the best model to ensure fair and professional evaluations.

The issue of confidentiality of records is but one of the liability and procedural concerns which must receive more attention in work-fitness and pre-employment evaluations. Some agencies have begun the practice of obtaining informed consent release documents at the time of the psychological pre-employment interview that allow for subsequent limited disclosure for administrative or disciplinary needs. An example of this consent is available from the author. More significant issues arise in the context of work fitness evaluations where the ADA requirements for possible accommodation take center stage against the backdrop of the agency's need for access to sufficient details about the officer's psychological adjustment and the wishes of the officer to maintain some degree of privacy. The recent decision in Pettus suggests that at least in California, there is a powerful protection for the confidentiality of medical records, with employers only entitled to that information which is specific to determining fitness and accommodation decisions. While other states may face similar legal challenges in the future, it may be most useful to prevent the risk of such litigation by offering two levels of reporting to the agency following a typical fitness for duty examination. In this model, the officer may elect to consent to full disclosure within the customary bounds that the reporting psychologist will offer information that is germane to the administrative issues under review. The alternative is to allow the officer to elect to instruct the psychologist to provide only a limited fitness for duty report to the agency, in keeping with the California Pettus requirements. A model consent form for this two-step process is also available from the author.

In either event, the psychologist must still adhere to their professional duties that involve violence risk assessments and duty to protect under the typical Tarasoff guidelines. Other ethical and legal requirements will also remain in effect, as set forth through the ADA guidelines and the APA ethical guidelines. In cases where the officer pursues administrative hearings or lawsuits against the agency and/or the evaluating psychologist, the customary exceptions to full confidentiality will of course take precedence, and the psychologist may be able to disclose pertinent information for such litigation or hearings. The particular issues will vary from case to case, and recommendations for all possibilities goes beyond the scope of this paper. However, the police psychologist or occupational psychologist conducting such evaluations will reduce their risks by discussing these issues in their initial contacts with the officer, and in their dealings with upper management. Clarification of roles and setting forth clear parameters for reporting and record-keeping while acknowledging the limits of confidentiality that may arise are the necessary preventative steps which most forensic psychologists will be familiar with already. Employing these steps in the realm of police psychology is increasingly more important.

Beyond these liability and procedural concerns, it may be worthwhile to note that the work-fitness evaluation brings with it additional responsibilities for consideration of ADA issues and reasonable accommodation suggestions. Some of these recommendations may not be readily

met within the typical police agency due to limited resources or placement options. In this case, it is necessary for the agency to clearly document the job-relevant limitations that are apparent in the officer, and to document the lack of suitable accommodation within the agency. Issues of mandatory retirement and disability pensions will demand attention in some cases where work fitness problems continue beyond a brief period of recovery. Special issues of this sort arise within the work fitness evaluation requirements demanded by law enforcement agencies. While the current survey did not address possible solutions to these problems, the results indicate that a majority of agencies are becoming more sensitive to complications imposed by the ADA guidelines.

Agencies are aware that the management referral for a fitness evaluation may be deemed a job requirement where the officer must participate or be considered insubordinate and subject to further discipline. The fitness evaluator must still obtain informed consent and acknowledge the process of making the evaluation and communicating to management the findings with regard to functional limitations or fitness. Feedback to management cannot go beyond that which is required to address these concerns or find suitable accommodation in light of the restrictions imposed by the Pettus decision. The evaluator will utilize psychological testing, clinical interviews, collateral interviews, and records review to formulate their professional opinion, communicating only the finding or recommendation to the agency management. Even then, Stone (1995) points out that any evaluator must still consider the potential for the entire assessment process to come under the scrutiny of the court. If treatment is recommended to try to ameliorate the officer's condition, then clearly a mental disorder subject to the ADA may be present. However, the agency may only have to go so far in seeking to accommodate the officer, according to Stone (1995). If the officer is unable to uphold his portion of the accommodation, then the agency need not repeatedly offer other accommodations. And, if no reasonable accommodation may be made within the organization, or if the accommodation would affect the organization adversely, then the requirements of the ADA may be discharged as well.

Finally, in keeping with the findings from this survey, Stone (1995) cautions the evaluator to consider other ethical problems which might arise. For example, the monitoring of a police officer in treatment may be a complicated topic since the evaluator must avoid dual relationship concerns. It would certainly be inappropriate for the same psychologist to provide treatment and perform the evaluative function since these would be dual roles and considered an ethical violation. He recommends that treatment be provided by an agency outside the realm of the evaluator, and that confidential communications about treatment be channelled through the evaluator so as to maintain appropriate respect for the officer's privacy. Special issues arise for the employer when dealing with an employee who has a substance abuse problem, due to the risk for relapse and the impact that such alcohol or substance abuse may have on the exercise of judgment. There are also special protections in place for persons who have documented chemical dependency histories and have shown adequate recovery, with special considerations for these issues under ADA. For more information on these issues, the reader is directed to sources such as the Department of Justice's APA Information line (800-514-0301 or on-line sources such as

www.hrnext.com).

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TABLES FOLLOW BELOW

Table 1: Rank Ordered Police Psychology Behavioral Science Services

N=22 agencies

number reporting	percentage	service type
22	100%	Police pre-employment selection
22	100%	Individual counseling (brief therapy, ave. number sessions 6, no maximum session allotment)
22	100%	Stress management
22	100%	Critical incident stress debriefing/counseling
19	86.4%	Marital and/or family counseling
18	81.2%	Training programs for recruits, line staff, command staff
15	68.2%	Organizational development, consulting
12	54.5%	Peer counseling program
12	54.5%	Operational support --
		12 100% Hostage negotiations
		10 83.3% Psychological profiling
		5 41.7% Psychological autopsy
10	45.5%	Research (including program evaluation)
10	45.5%	Clinical training & supervision (internship, pre-doctoral; fellowship, post-doctoral)
9	40.9%	Employee assistance program
8	36.4%	Fitness for duty, work fitness evaluation
6	27.3%	Group counseling
5	22.7%	Health & Wellness program
1	4.5%	Promotional psychological screening

Table 2 : Comparison of Staffing Patterns by Size of Department

1. Does your department have an in-house behavioral sciences/police psychological services unit?

50 %	Yes	small
54.5%	Yes	medium
81.8%	Yes	large

2. If yes -- how many professional psychologists do you employ?

1 Ph.D	small	
1 to 4 Ph.D.	medium	1.9 mean
1 to 25 Ph.D	large	6.6 mean

4. Is pre-employment psychological screening done within your department?

50 %	Yes	small
54.5%	Yes	medium
63.6%	Yes	large

6. If no, is the pre-employment psychological screening done by outside contract psychologists

50 % Yes small
89.4% Yes medium
45.5% Yes large

Is there oversight or administrative review within your department of the outside psychologist's work/decisions/ recommendations/reports?

50 % Yes small
78.5% Yes medium
40 % Yes large

7. Do applicants sign a consent for use of the pre-employment psychological screening results (interview, testing data, report) in subsequent counseling or disciplinary actions and reviews?

50 % Yes small
30 % Yes medium
33 % Yes large

8. If your agency does not have a behavioral science/counseling unit, do you contract out for such services (EAP, independent counseling)

25 % Yes small
72 % Yes medium
71.4 % Yes large

Table Three: Work Fitness Practices by Size of Department

9. When officers become psychologically impaired or when questions of their fitness for duty arise, who conducts the work fitness evaluation? Evaluation done by:

In-house professional service person, part of police agency or the behavioral sciences/counseling unit?

13.6% medium
18.2% large

Another psychological unit (e.g., personnel occupational psychologists who also conduct pre-employment screenings)?

4.5% medium

An outside contract mental health consultant?

100% small
95.5% medium
63.6% large

12. When the officer is referred for an evaluation, is there a specific release form signed that acknowledges the limited confidentiality of the evaluation?

100% Yes small
54.5% Yes medium
72.7% Yes large

13a. Must the officer agree to full and complete open exchange of information to the department, giving a full release?

75 % Yes small
54.5% Yes medium
63.6% Yes large

13b. Does the officer have the option of participating but authorizing only limited feedback to the department (according to guidelines from the Pettus/Cole decision)?

25 % Yes small
81.8% Yes medium
60 % Yes large

16. Are the person(s) who conduct the fitness for duty evaluations familiar with the guidelines of the Pettus decision (*Pettus v. Cole*; *Pettus v. DuPont*, 96 Daily Journal D.A.R. 11263)?

100% No, Don't Know small
81.8% medium
63.6% large