

# Peer Support Best Practices



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# Disclosure Slide

- I am President / CEO and Co-owner of Virtual Flight Surgeons, Inc. dba Aviation Medicine Advisory Service [AMAS] and am the ALPA Int'l Aeromedical Advisor
- No other financial relationships to disclose
- No discussion of off label use and /or investigational use in this presentation
- No Commercial Medical Products

# Stipulations

- Pilots have MH challenges – Normal Life Events
- Barriers Exist – Med. Cert, Finances, Personalities
- PSP's have well-documented benefits\*
- Mandates exist from CAA's, ICAO & organizations
- Successful aviation PSP's exist, more coming
- Regulatory, Legal, Contractual, Cultural variances
- Confidentiality → Results difficult to Quantify
- TRUST is Key to Success
- Safety Program First!

# Peer Support Programs Clarified

- Not PEER Support Program
  - Company provided Mental Health Provider – EAP
  - Outside MHP
  - Regulator or AME directed MHP
  - HIMS / AOD programs
- Pilot PSP's are run by PILOTS
  - Other professional resources may augment PPSP

# PSP Success Factors

- Self-contained structure
- Full involvement of all relevant stakeholders including crew representation bodies
- Autonomous & independent
- Not directly accessible by outside stakeholders (regulator / management / media) – but their support is a must !

Dr. Karsten Kempf , Germanwings Accident – Lessons Learned? AMDA, April 2016

# Best Practice Options

- Not one single answer industry wide
- Considerations
  - Who & What is included?
  - PSV Training & Qualifications
  - Confidentiality Limits – Medical & Operational
  - Professional Oversight
  - CAA, AME, Company & Union Involvement
  - Funding & Marketing
  - Outcome Measures – What is Success?

# Who Is Included?

- Pilots Only
  - Peer identification, medical certification req'ts
  - Funding options, single union
- Airline Flight Crewmembers – Flight Attendants
  - All Safety Critical, but significant “peer” differences
- Other Aviation Professionals – ground personnel
- Air Traffic Control Specialists – CIRP issues
- Business & General Aviation Pilots, Students

# What Is Included?

- Routine Mental Health Problems – Non-urgent
  - Elevation to MHP/AME by PSV or pilot if serious
- Critical Incident Response
  - More Pro-Active Interventional Approach
- Alcohol and Other Drugs
  - Success of combined PSV and interventional - HIMS
- Medical Conditions – PSV training vs. MH impact
- Professional Standards – defensive pilot stance



# PSV Training & Qualifications

- Universal Agreement
  - Listening Skills
  - Suicide Prevention
  - Scope Limitations
  - Confidentiality
  - Case Escalation Protocol
  - Resources
  - CAA Reporting Req'ts
  - Aviation Safety
  - PSV Burnout – Case Load
- Possible Inclusions
  - CIRP
  - Substance Abuse
  - Medical
  - PTSD
  - Professional Standards
  - Training Failures
  - Legal
  - Financial Options
  - Role - Playing

# Confidentiality Limits

- Inform Peer at First Contact, Repeat
- Medical Information
  - No medical records or notes?
  - De-identified in outside discussion
  - Seek pilot consent to connect outside resources
  - ? Committee might keep aggregate data
  - Imminent Harm to Self or Others invalidates
- Operational Risk – No medical details ideally
- Member State Legal Requirements

# Professional Oversight Options

- Aviation Savvy is Critical !!!
- Consultant to PSV Committee or Chairs
- Employed by Union
- Employed by Airline – MHP or Medical Director
- Outside Expert Team
- Vetted & Trained Consultants
- AME's specifically trained

# Non-PSV Involvement

- Union & Company Operations
  - De-Identified only (escalation exemption)
- Mental Health Professional
  - Pilot self report, collateral info helpful w/ consent
- Airline Medical Director
  - Encourage Pilot Self Report
  - Validation of Benefit Eligibility – Return to Flying
- AME & CAA
  - Ideally by pilot after professional encounter

# Funding

- Requirements
  - Communications Net
  - PSV Training
  - PPSP Committee mtg
  - Marketing
  - Possible Trip Drops
  - MHP Consultants
  - Ongoing Clinical Care
  - Disability
- Possible Sources
  - Union
  - Airline
  - Joint
  - Charitable
  - EAP
  - Insurance
  - CAA – just kidding!
  - Pilot Self Pay – really!

# Awareness

- Active Marketing is Essential
  - Pilot Publications
  - Crew Room Signage
  - Initial & Recurrent Training
  - Lanyards / Badges / Pins
- Hotline 24/7
- Volume grows slowly – reputation & trust

# What Is Success?

- Outcome Measures Difficult w/ Confidentiality
  - Hotline Utilization
  - Number of pilots assisted
  - Broad categories of problems addressed
  - Reduction in sick leave utilization
  - Reduction in medical claims
  - Reduction in Disability
  - Suicide rate reduction
  - Pilot Testimonials
- Safety Program – How is Safety measured?

TRUST