
Critical Incident Stress Debriefing

1022.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a Critical Incident Stress Debriefing (CISD) program. The Blue Ridge Fire District recognizes that during the course of performing job duties, members may become involved in or be exposed to incidents that have the potential to cause various forms of short- or long-term emotional trauma.

1022.1.1 DEFINITIONS

Definitions related to this policy include:

Crisis response services - Consultation, risk assessment, referral and onsite crisis intervention services provided by a critical incident stress management team to a designated member (ARS § 38-1111).

Critical incident stress - A strong emotional, cognitive or physical reaction that has the potential to interfere with daily life, including physical and emotional illness, loss of interest in the job, personality changes, marital discord and loss of ability to function.

Critical Incident Stress Debriefing (CISD) - A standardized approach using a group format to provide education, an atmosphere and opportunity for emotional release through discussion, and support for members who are involved in emergency incidents under conditions of extreme stress. CISD is not a diagnostic or treatment process like that provided in counseling sessions by a mental health professional. Instead, it is a service that provides education and support.

Critical incident stress management team member - An individual who has completed training through a recognized organization that delivers critical incident stress management training and who is part of a law enforcement, probation, firefighter or emergency medical provider crisis response team (ARS § 38-1111).

1022.2 POLICY

It is the policy of the Blue Ridge Fire District to implement a CISD program to provide support and professional intervention to members of this district following exposure to situations that are likely to create unusually strong emotional reactions.

1022.3 CISD PROGRAM

The District should establish a committee responsible for implementing and managing the CISD program. The Fire Chief or the authorized designee is responsible for appointing members to the committee who are representative of all levels of district personnel. The district's Chaplain serves as the committee chairperson.

State, local and peer organizations provide CISD programs and critical incident stress management teams. These resources can prove beneficial and reduce costs.

Functions of the committee include, but are not limited to:

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- Providing input and assistance to the development and implementation of the CISD program.
- Recommending the type and content of critical incident-related programs, workshops or seminars.
- Distributing CISD-related information to members.
- Providing the administrative and technical support needed to implement CISD and individual crisis response services.
- Assisting in the recruitment and training of peer support personnel and critical incident stress management team members.
- Coordinating and following up on requests for CISD or individual crisis response services.

1022.4 CISD COMPONENTS

The CISD program should include pre-incident, on-scene and post-incident activities, including education, diffusion of emotional reactions and debriefing. The purpose of the program is to minimize the impact of stress on members following major incidents.

Ideally, CISD should incorporate the services of both peer support personnel and trained professionals, such as physicians, psychologists or counselors.

The program is intended to be consistent with the recommendations of the National Fire Protection Association (NFPA) and the Fire Service Joint Labor Management Wellness-Fitness Initiative, developed by the International Association of Fire Fighters (IAFF) and the International Association of Fire Chiefs (IAFC).

1022.4.1 ACTIVATION

The following are examples of incidents that may initiate CISD or individual crisis response services:

- Major disaster or mass casualty incidents
- Serious injury, death or suicide of a firefighter, police officer or other emergency service provider
- Serious injury or death of a civilian resulting from emergency service operations
- Death of a child or similar incident involving a profound emotional response
- Any incident that attracts unusually heavy media attention
- Loss of life following an unusual or extremely prolonged expenditure of emotional and physical energy by emergency services personnel
- Any unusual incident that produces an extreme, immediate or delayed emotional response
- Cumulative trauma from multiple incidents

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Any time it has been determined that a critical incident has occurred and intervention may be needed, a CISD should be requested. The request may be made either directly to peer support personnel or through the CISD committee. Depending on the type and magnitude of the incident and services that may be needed, the CISD may be activated either during or after a critical incident.

All members are responsible for recognizing incidents that may need a CISD. Once an incident has been identified as a critical incident, a CISD should be initiated as soon as practicable.

Debriefing may be conducted anywhere there is ample space, privacy and freedom from distractions. Consideration should be given to including responders from other agencies who were involved in the incident including, but not limited to, communications personnel, law enforcement officers and paramedics or ambulance personnel.

Any member may request peer support, professional help or crisis response services as needed, on an individual basis.

1022.4.2 CISD PROVIDERS

CISD providers should include mental health professionals and peer support members.

- (a) The duties and responsibilities of mental health professionals include the following:
 - 1. Supervise and advise on all clinical aspects of the program.
 - 2. Ensure the quality of CISD services.
 - 3. Offer clinical support and program guidance to the CISD committee and peer support personnel.
 - 4. Assist in the selection of new peer support personnel.
 - 5. Provide guidance to peer support personnel.
 - 6. Assist in training peer support personnel and with continuing education.
 - 7. Advise on the development of policy and written operational CISD protocols.
- (b) Mental health professionals involved in the CISD program should have the following qualifications:
 - 1. Be a licensed mental health professional.
 - 2. Be trained and experienced in a recognized CISD model.
 - 3. Demonstrate experience in counseling emergency services personnel.
- (c) The duties and responsibilities of peer support members include the following:
 - 1. Assist and support the CISD mental health professionals as necessary.
 - 2. Provide referrals to mental health professionals, where appropriate.
 - 3. Provide support and basic education to members and their families.

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4. Serve as a CISD provider with mental health professionals.
 5. Complete training and supervision necessary for the role.
- (d) Members involved in the CISD program as peer support personnel should have the following qualities:
1. Good negotiating skills
 2. Ability to communicate effectively
 3. The respect and trust of peers
 4. Ability to maintain confidentiality
 5. Ability to adhere to established limits and criteria
 6. Ability to learn about the psycho-social process
 7. Good listening skills
 8. Good rapport with fellow emergency workers
 9. Sensitivity to the problems of others
 10. Be an emergency service provider or a member of a related service
 11. Possess experience and knowledge about the types of incidents and situations to which members may be exposed

Peer support personnel should participate in both initial and continuing education and training regarding CISD principles and procedures.

1022.5 DEBRIEFING

The form of CISD utilized should depend upon how early the intervention is activated and the nature of the incident. The use of one format does not preclude the use of others for the same critical incident.

Common formats for CISD include:

- (a) On-scene debriefing: Peer support personnel or mental health professionals respond to the scene as observers and advisers to watch for the development of acute reactions. They may offer encouragement and support, check on the well-being of personnel and allow for individual discussion of feelings and reactions.
- (b) Initial defusing: This usually takes place within a few hours of the incident and is generally facilitated by peer support personnel. It is an informal process encouraging open and free expression of feelings without a critique of the incident. The purpose is to stabilize involved members so they can go home or return to service.
- (c) Formal debriefing: Debriefing led by a CISD program mental health professional and peer support personnel that usually takes place 24 to 48 hours after the conclusion

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of the incident. Members involved in the critical incident are given the opportunity for free expression of feelings. This expression should be met with acceptance, support and understanding.

- (d) Follow-up debriefing: If deemed necessary, follow-up may be facilitated by the CISD mental health professional and peer support personnel several weeks or months after a critical incident. The main purpose is to resolve any issues or problems that were not initially resolved. The follow-up debriefing may include the entire group or a portion of those originally involved.

Regardless of the type of debriefing, CISD is not a critique of district operations at the incident. The CISD provides a setting in which members can discuss their feelings and reactions as a means to reduce the stress resulting from exposure to critical incidents. Performance issues should not be discussed during the debriefing.

No one has rank during a debriefing process. Everyone is equal.

Following any intervention, should members feel a need for additional assistance, contact may be made with peer support personnel or a CISD committee member to obtain information regarding a referral.

1022.6 ATTENDANCE

Only those involved in the incident and CISD team members should be present. Members directly exposed to the traumatic aspects of an incident are strongly encouraged to participate in CISD.

Under special circumstances, the supervising officer may make attendance mandatory. Even if attendance is mandatory, members should not be obligated to speak or express their feelings during the CISD.

During debriefings, members involved should be out of service with radios, pagers or other distractions turned off.

1022.7 ROTATION OF PERSONNEL

Incident Commanders should minimize members' exposure at critical incidents by rotating or removing initial responding personnel from the immediate scene and reassigning them to less stressful operations as soon as possible. Members directly involved in critical incidents should be considered a high priority for immediate reassignment or removal from the scene. Relief from duty may also be considered.

Trained peer support personnel may make a request to their Captain or Captain for relief or reassignment during a shift to participate in CISD activities. The peer support personnel should provide a number of on-scene services, including on-site evaluation, encouragement and consultation. They should also be considered an available resource for assignment to rehab, medical or other areas as needed.

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Circumstances of a critical incident may result in a recommendation that individuals or companies be taken out of service. The Captain is responsible for making the appropriate arrangements.

Under no circumstances is being taken out of service to be construed as critical or negative. Personnel taken out of service are to be viewed as deserving of the same consideration as an injured firefighter.

1022.8 CONFIDENTIALITY

The District considers all CISD interventions and individual crisis response services, regardless of type, as strictly confidential. Notes, other than those specifically identified in this policy, are prohibited. No audio or video recording may be made without the express consent of all participants.

The only exceptions to confidentiality should be when (ARS § 38-1111):

- (a) There is reasonable evidence to assume a risk of harm to the member or to others. If the risk is to another person, that person is identifiable and there are means to contact the person.
- (b) Participants divulge information that falls under any applicable state mandatory reporting duties.
- (c) The member has given express consent to divulge the applicable information.
- (d) The member has voluntarily testified to the information, which may compel the CISD member to testify to his/her knowledge of the same.
- (e) The information relates to a violation of law or policy that is normally enforced by a law enforcement agency.

1022.9 RECORD-KEEPING

Following a CISD intervention, the committee chairperson (Chaplain) should prepare a summary report for statistical record-keeping. The report should be limited to the following information:

- (a) Incident date and time
- (b) Brief description of incident facts
- (c) Intervention date and location
- (d) Names of CISD members conducting the intervention
- (e) Numbers of participants from each agency involved

Names of participants shall not be recorded.