PHOENIX FIRE DEPARTMENT

VOLUME 1 – Operations Manual

CRITICAL INCIDENT DEBRIEFING

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BACKGROUND

Case studies of major incidents where numerous injuries or fatalities occurred have revealed that significant numbers of emergency personnel experienced some form of stress-related symptoms following the incident. Many of these symptoms were transitory and most personnel had no long-term detrimental effects. These studies, however, have also revealed that a small percentage of personnel do experience some form of long-term detrimental effects resulting from exposure to such incident. Some of these effects have been delayed, surfacing later after a period of no apparent symptoms. Without professional intervention, these personnel have experienced declining work performance and deterioration of family relationships, as well as increased health problems. The objective of this procedure is to provide professional intervention (immediately) after major incidents to minimize stress-related injury to Fire Department personnel.

INCIDENTS

Fire Department response to incidents that expose personnel to unusually strong emotional involvement may qualify for "Incident Debriefing". The following are examples of incidents that may be selected for debriefing:

- 1. Serious injury or death of a Fire Department member or other emergency personnel.
- 2. Mass Casualty Incidents.
- 3. Suicide of a Fire Department member.
- 4. Serious injury or death of a civilian resulting from Fire Department operations (i.e., auto accident, etc.).

- 5. Death of a child, or violence to a child,
- 6. Loss of life of a patient following extraordinary and prolonged expenditure of physical and emotional energy during rescue efforts by Fire Department personnel.
- 7. Incidents that attract extremely unusual or critical news media coverage.
- 8. An incident in which the circumstances were so unusual or the sights and sounds so distressing as to produce a high level of immediate or delayed emotional reaction.

ON-SITE MANAGEMENT

Minimizing personnel exposure to these stressful incidents results in fewer stress-related problems. Command should reduce this exposure by rotating personnel and by removing initial personnel from the scene as soon as possible.

Any personnel directly involved in high-stress incidents should be considered as high priority for immediate removal from the scene. Relief from duty for these personnel may also be a consideration. Examples 1 through 4 should always be evaluated by behavioral health professionals to determine a need for early intervention and debriefing.

On-site evaluation and counseling should also be considered for some critical incidents when time and circumstances permit.

ACTIVATION OF THE DEBRIEFING PROCESS

Any Command Officer may initiate the debriefing process. For serious events, this can be done from the scene by contacting the Alarm Room. Company officers whose erew may have experienced a traumatic event may also initiate the debriefing process by contacting their supervising chief officer

EAP and Command Officers will determine the level of debriefing required.

The Personnel Services Division and/or the Operations Division will be responsible for coordinating the debriefing process, follow-up care, and other support functions.

DEBRIEFING ATTENDANCE

Attendance to a debriefing is MANDATORY for all personnel who were directly exposed to the traumatic aspects of an incident or otherwise identified as a person suffering symptoms. Exceptions may be granted following assessment by EAP personnel.

DEBRIEFING

Incident debriefing is <u>not a critique</u> of Fire Department operations at the incident. Performance issues will not be discussed during the debriefing. The debriefing process provides formats in which personnel can discuss their feelings and reactions and, thus, reduce the stress resulting from exposure to critical incidents. All debriefings will be <u>strictly</u> confidential.

Several types of debriefings may be conducted depending upon the circumstances of a particular incident. They may be conducted on an individual one-on-one basis or, more typically, in small groups of not more than 25 members. The following five types of debriefings, singularly or in combination, are most commonly utilized:

- On-Scene or Near-Scene Debriefing (see "On-Site Management")
- <u>Initial Defusing:</u> Conducted shortly after the incident. Primarily informational. An update and status report on the incident and related injuries. A brief review of stress related symptoms will be provided by a professional counselor.
- <u>Formal Debriefing Meetings</u>: Conducted within 72 hours of incident, Confidential **non-**evaluative discussion of involvement, thoughts, and feelings resulting from the incident. Also, discussion of possible stress-related symptoms.
- <u>Follow-Up Debriefing</u>: Conducted weeks or months after incident, concerned with delayed or prolonged stress symptoms, may be done informally.
- <u>Individual Consults</u>: Available at any time, as needed, One-to-one counseling for any concerns related to the incident.

RELIEVING PERSONNEL FROM DUTY

Circumstances of a critical incident may result in a recommendation that individuals or companies be taken out of service. Such decisions may include returning personnel to their station(s) in an out-of-service status and allowing crew(s) to determine for themselves when they are mentally and physically prepared to return to service. In other circumstances, the crew member(s) may decide that they cannot return to duty, or the professional counselor may recommend relief from duty for the balance of the shift. If this is the case, appropriate steps should be taken to notify the member's spouse, roommates, or family of his/her status, and to provide direction on how they can best assist the member through this difficult time. Any time crews or individuals are relieved from duty, the South Shift Command needs to be notified.