

**LINCOLN COUNTY FIRE AND RESCUE ASSOICATION AND
LINCOLN COUNTY CRISIS RESPONSE TEAM GUIDELINES
VOLUME 1 OF 2 VOLUMES**



This Manual Covers Critical Incident and Crisis Response

June 2014

Volume 1 Covers: Critical Incident and Crisis Response

Volume 2 Covers: Serious Injuries/LODD/Funerals and Memorials



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Chapter 1: Introduction to Crisis Response Team for Lincoln County Emergency Services

The mission of Lincoln County Emergency Services Crisis Response Team is to provide emotional and spiritual care to individuals, families, students, emergency service workers and the community at large to assist them in beginning to work through their loss and grief. Crisis Response team members will also work closely with emergency service workers, pastors, chaplains, other crisis response teams and public agencies to ensure quality, innovative programs within a safe environment. We help individuals by providing emotional and spiritual care for the disaster victims, first responders and relief workers through a range of emotional and spiritual care interventions, during and after the trauma and disaster.

The Purpose

Our purpose as a Crisis Response Team will be comforters, pastors, teachers, and peer support team member to offer voluntary and confidential support for employees for personal and job related problems. **“To cure sometimes, to help often, to comfort always.”** As Crisis Response Team members we will be creative and understanding as we demonstrate grace and love in ministering to people, serving with law enforcement, fire department, Rescue/EMS agencies and other emergency services agencies. Not only will we minister to the employees and their families of the different agencies, we will also minister to the people in the community served by the agencies. To provide guidelines that will be uniformly applied following incidents that has resulted in death or serious bodily injury or threat of to any emergency service worker, in order to assist personnel in coping with extremely stressful incidents.

The Vision

Crisis Response is an extension of the local church or faith organization reaching into our diverse and multi-cultural society providing physical, emotional and spiritual care to people. Crisis Response Team members perform the roles of pastor, teacher, peer support, and administrator as they represent the local church or faith organization from "inside" the using agency and community at large. Our goal is to provide the best qualified Crisis Response Team members as emotional and spiritual care and peer support providers during and following crises.

The Goals

1. Define the role and function of the **Lincoln County Emergency Services Crisis Response Team** within the Incident Command System (ICS) and disaster relief operations.
2. Identify the physical, psychological, emotional, behavioral, interpersonal and spiritual impact of traumatic incidents upon individual and groups. This includes all individuals involved: citizens, the responding emergency services personnel, the dispatchers and chaplains.
3. Establish criteria for providing physical, psychological, emotional, behavioral, interpersonal and spiritual needs of individuals affected by the traumatic loss and grief.
4. Provide emotional and spiritual care to all first responders and relief workers through a range of emotional and spiritual care interventions (i.e. CISD) following the traumatic event.
5. Establish a personal self-care plan for maintaining one's own emotional, physical and spiritual health during and after deployment to a traumatic event.
6. Do an open and honest assessment of our own suitability to provide care within the trauma and disaster context.
7. **Crisis Intervention goals are: Stabilization, reduce the symptoms, return the person to adaptive functioning, and if need then facilitate access to continued care.**

The Policy

- A. It is the policy of the Crisis Response Program to assist fellow employees and others in dealing with stress, emotional difficulties or other personal problems. These problems may have an impact on the employee, and in some cases may present a danger to the welfare and safety of the employee, his or her family, the public and fellow employees.
- B. Department Heads and Supervisors are prohibited from soliciting information obtained from any employee during a Crisis Response Peer Support encounter except as outlined in this directive as exceptions to privileged communication.
- C. Participation in Crisis Response Program or the Use of the Crisis Response Support Program will not adversely impact any employee's performance appraisal or request for transfer/promotion.
- D. The Crisis Response Support Program will be administered jointly by a Senior Team Leader (Level 6) and a Licensed Mental Health Worker, both appointed by the **Lincoln County Crisis Response Team Executive Board.**

Definitions and Terms

- A. **Privileged communication:** any communication made by the employee or immediate family member to the chaplaincy peer support team member while receiving **counseling** that does not fall within the exceptions noted in this directive.
- B. **Peer Support Team Member:** is a Crisis Intervention Counselor, ESC-Provider, chaplain, pastor, or medical/psychological individual who has been trained to provide emotional, spiritual and moral support.
- C. **Critical Incident Stress:** An intense but normal reaction to any event that is sufficiently powerful enough to overwhelm usual coping mechanisms. Reactions to traumatic stress can continue for an extended period. These reactions may or may not seriously interfere with the ability to function in one's normal duties.
 - 1. Examples of critical incidents include:
 - a. shooting incidents,
 - b. death or serious injury to a fellow emergency service worker,
 - c. the sudden, unexpected or violent death of person well-known to the emergency service community,
 - d. multiple fatalities, death of a child,
 - e. prolonged incidents such as a search, drowning or hostage situations, particularly when a death or injury has occurred.
- D. **Critical Incident Stress Debriefing:** A structured debriefing following a critical incident designed to provide stress reduction and education in stress management. A debriefing is not an operational critique or investigation procedure.
- E. **Post-Traumatic Stress Disorder:** A psychological disorder that can result from exposure to short-term severe stress or the cumulative effects of prolonged milder stress.

Crisis Response Team (Emergency Service Agencies – Fire, EMS, Law Enforcement)

As each department fills a Crisis Response Team member (chaplain) on their roster here are the Standard Operating Guideline's for that position.

This position is first responsible to the Emergency Service Agency to which they belong, then the Senior Crisis Response Team Leader and to the Lincoln County Emergency Services Director and must keep the agency and the Senior Crisis Response Team Leader informed of the various activities relevant to the below duties and responsibilities.

Minimum Qualifications:

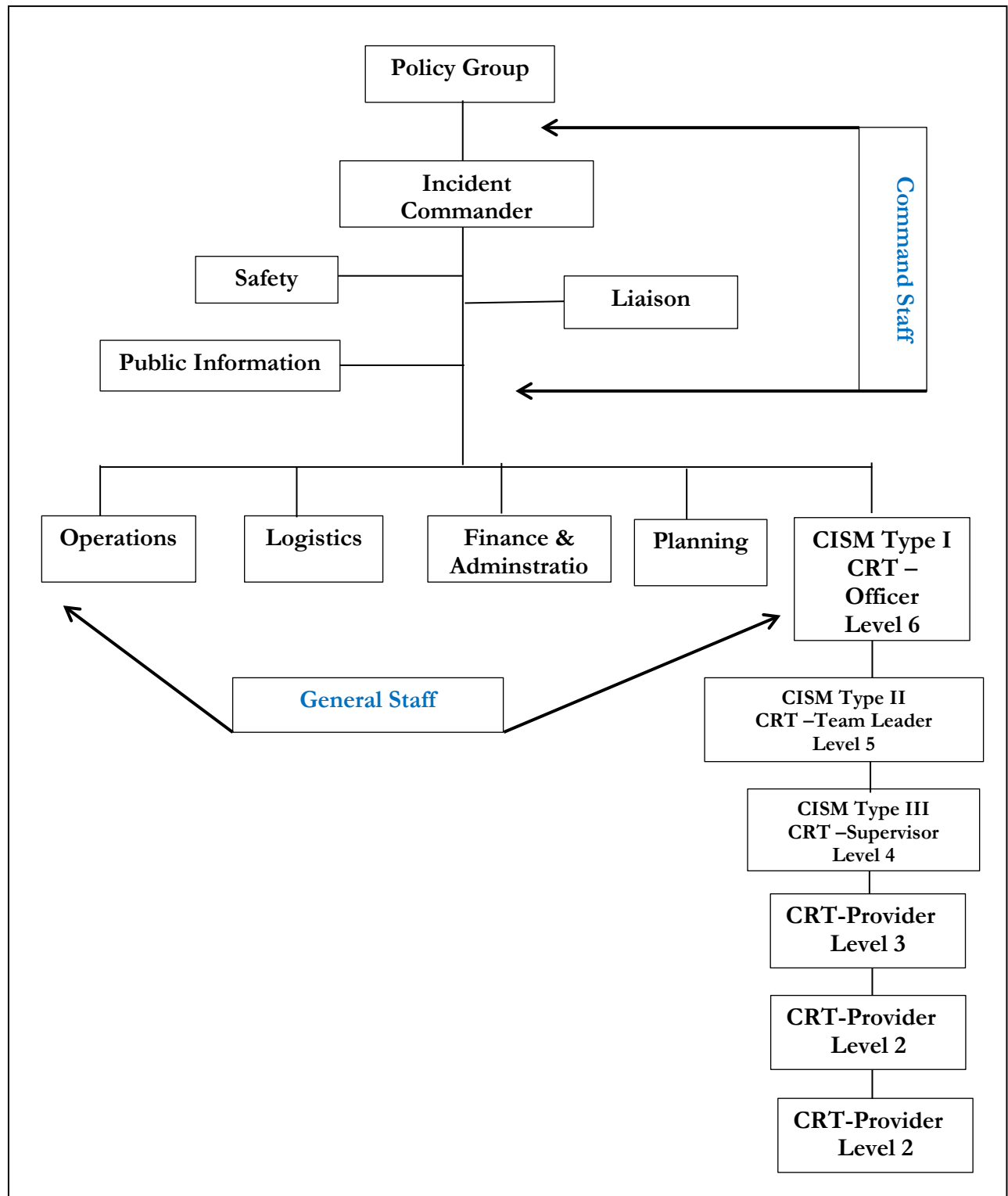
- Member of local faith organization, and have a North Carolina driver's license.
- Letter from their religious leader stating the person is qualified and a member in good standing.
- Willing to learn about and to serve in and with the different emergency service agencies.
- Prepared to serve in a crisis zone.
- Willing to provide ministry to personnel and the public of all faiths and denominations.
- Willing to commit the time necessary to make the ministry effective.
- Committed to learn the skills necessary to effectively relate to and minister to emergency service workers, their families and to the public.
- Pass a criminal background check, and driver's license check.
- Committed to learn the skills necessary to effectively relate to and minister to emergency service workers.
- Complete classes listed in each level of chaplaincy certification in the time allotted after appointment to that level of certification.
- The following CISM Classes are the minimum required classes for entry level team member: Individual Crisis Intervention & Peer Support, Group Crisis Intervention, Advance Group Crisis Intervention, Pastoral Crisis Intervention, and Suicide Prevention, Intervention & Postvention.
- Maintain 36 hours of training a year which consist of a combination of CISM Classes and meetings, emergency services training and meetings. Must have a minimum of 12 hours in the chaplain side and 12 hours in the emergency services side and the rest (12 hours) can be combination from both to equal a total of 36 hours. Must attend 6 Crisis Response Team Meetings and 6 Emergency Services (agency they belong to) Meetings a year and 50% of all call outs you are requested on.

Duties and Responsibilities

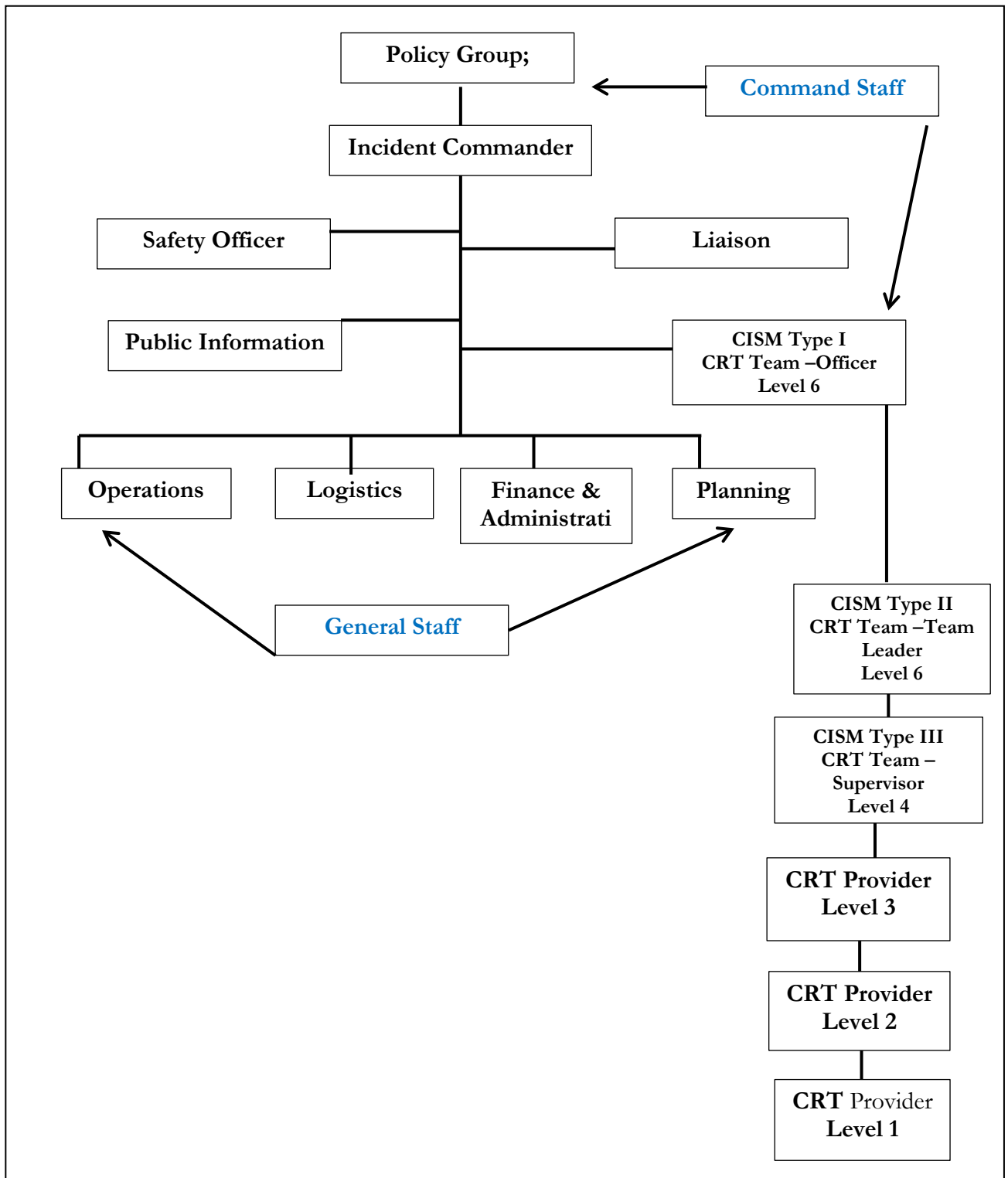
Duties and Responsibilities:

- Responsible for responding to different areas and sites in time of emergencies.
- Responsible for learning and adhering to Lincoln County Emergency Services Crisis Response Team SOG's.
- Responsible for learning and adhering to Lincoln County Services Incident Command System and National Incident Management System 100, 200, 300, 400, 700 and 800.
- Responsible for providing emotional and spiritual assistance as necessary. Able to detect stress in individuals as related to response to incidents and emergencies. Able to train others how to manage stress.
- Responsible for attending meetings and responding after hours if necessary.
- Responsible for assisting or conducting the different types of incidents or special events as listed in the Lincoln County Emergency Services Crisis Response Team Manual.

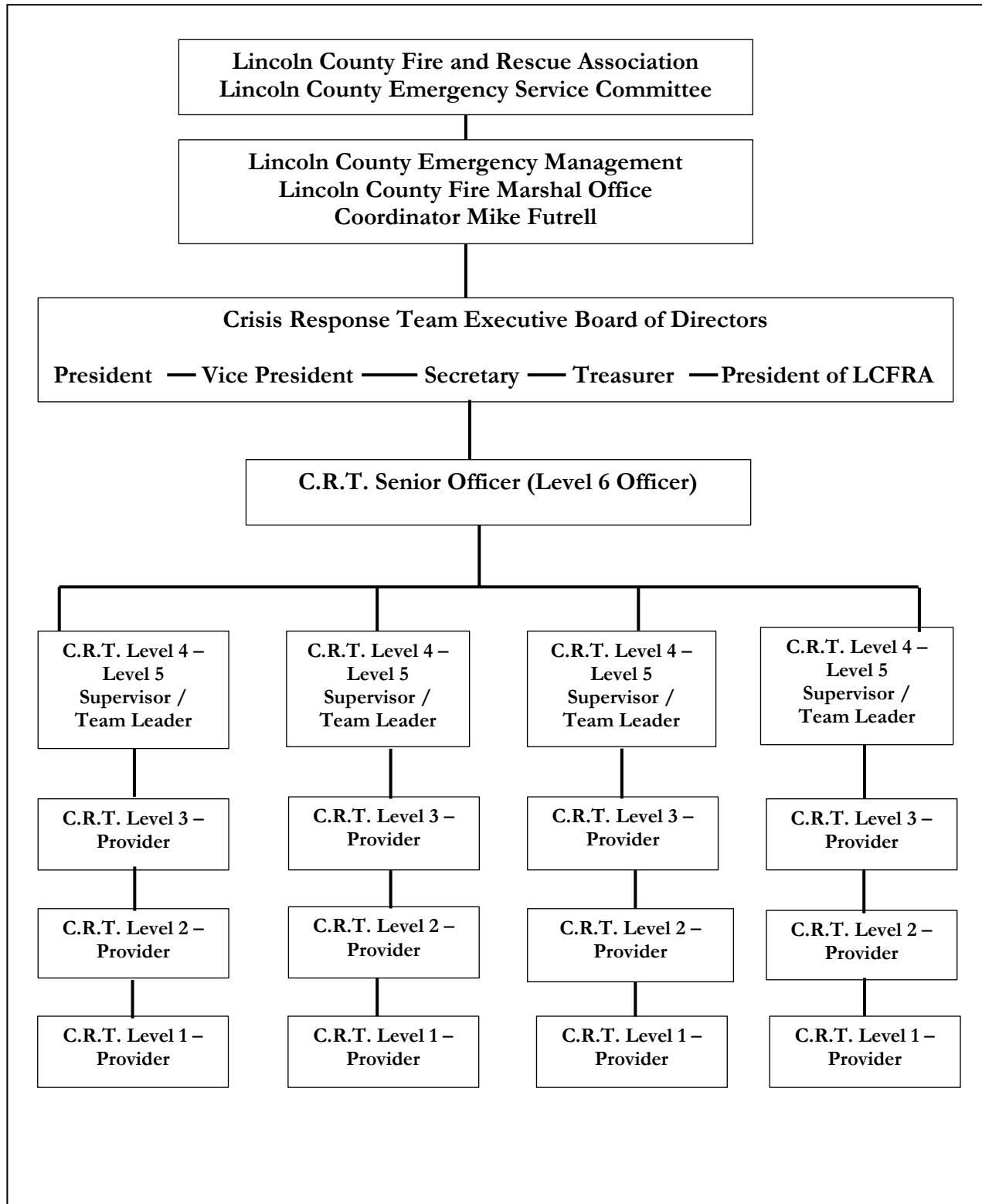
Example of Incident Command System Organization Chart # 1



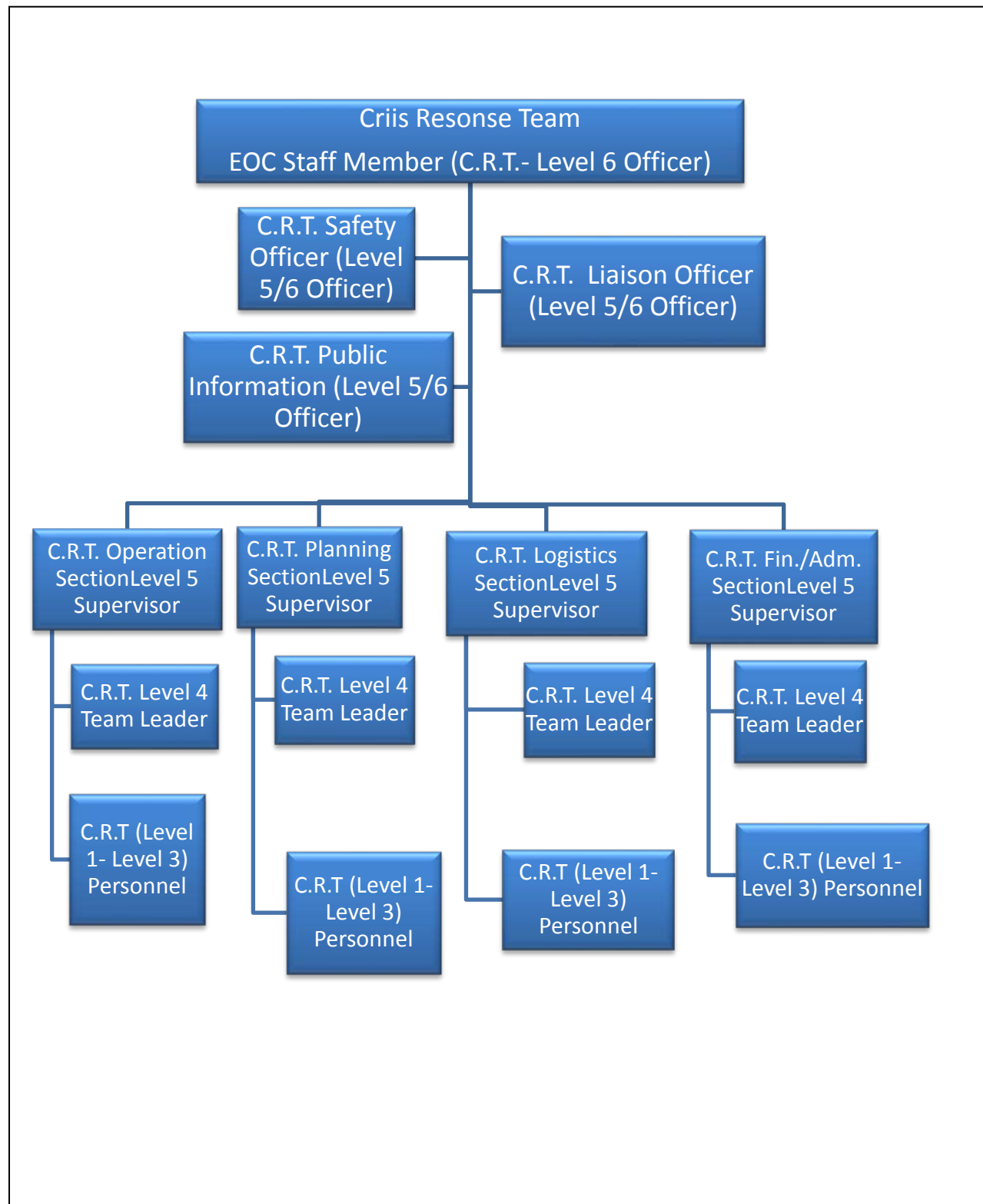
Example of Incident Command System Organization Chart # 2



Example of Incident Command System Organization Chart # 3



Example of Incident Command System Organization Chart # 4



Crisis Response within the Incident Command System

The Crisis Response Team individual should have completed the NISM class or classes for their level of certification. This section will serve as a brief refresher and overview of the different positions and related duties.

Command Staff Descriptions

Incident Commander

The incident commander is responsible for coordinating all emergency disaster services and support operations during an emergency or disaster. All effective disaster operations must have an incident commander and there can only be one incident commander for an emergency or disaster at a time.

Information Officer

The information officer, often referred to as the public information officer (PIO), is the point of contact for anyone seeking information about the incident and response activities.

Liaison Officer

The liaison officer is the organizational representative and point-of-contact for other disaster relief groups and agencies.

Safety Officer

The safety officer addresses all issues related to safety and security within the disaster operation. Any accidents, security issues or potential hazards should be reported to the safety officer.

General Staff Descriptions

Operations Officer

The operations chief is responsible for managing all direct services on a disaster relief operation including food service, hydration, shelter, emergency aid, and the bulk distribution of goods.

Logistics Officer

The logistics officer is responsible for obtaining and managing all resources and equipment necessary to support the disaster operation, such as vehicles, supplies, in-kind donations and facilities.

Finance and Administration Officer

The finance and administration officer is responsible for managing many of the “paper-work” functions necessary to support a disaster relief operation such as records and reports, personnel and volunteer recruitment and accounting.

Planning Chief Officer

The planning officer is responsible for assessing community and operational-related needs in the wake of an emergency or disaster. This position recommends appropriate short and long term assistance programs and staffing to meet the assessed needs.

Descriptions of the CISM Team Members under the Leadership of the CISM Team

Crisis Response Team Officer (CRTO)

The Emotional and Spiritual Care Officer (CRTO) is responsible for managing emotional and spiritual support services on an emergency or disaster operation. This support includes external care for disaster victims, rescue workers and their families, and the general public as well as internal care for staff and volunteers.

CISM Type I Crisis Response Team Officer – Level 6

The Crisis Response Team Officer (CRTO) is responsible for managing emotional and spiritual support services on an emergency or disaster operation. This support includes external care for disaster victims, rescue workers and their families, and the general public as well as internal care for staff and volunteers.

It is the primary responsibility of the Crisis Response Team Officer Level 6 to provide management of all components of the emotional and spiritual care and ensure that critical incident support exists throughout the entire emergency / disaster operation. The result may be that the CRTO may or may not provide personal provision of direct services. There are a number of core responsibilities of the CRTO that are critical to providing effect oversight of the chaplain program within an emergency or disaster operation as defined below. The CRTO may assign different Crisis Response Team members to assist in each of these key areas and responsibilities below.

(1) Assessment, (2) Development of an ESC plan, (3) Team formation, (4) Training, (5) Coordination, (6) Liaison, (7) Supervision and team care (8) Administration

This person in this position has experience as supervisor of CISM Team in large scale disaster situations in their home state and others or has **6** years of experience working with/helping set up and run daily operations of a local team.

Plus they have completed training for Level 6 – Officer Type I requirements. Has extensive experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST program. **The person in this position usually will be located in the Command Post, Emergency Operations Center and will oversee the daily operations of the Crisis Response Teams. The Team Leaders will work under the Team Officer and coordinate all information and duties given from Team Officer back to their team members.**

CISM Type II Crisis Response Team Leader– Level 5

The Crisis Response Team Leader provides direct coordination of the CRT team under his or her direction. CRTs are often assigned by geographic location and provide direct services as well. Team leader duties may include: monitoring the well-being of the team, ensuring transportation and basic needs are met, compiling and report statistical data to the CRTO.

This person in this position has extensive experience as supervisor of CISM Team in medium to large scale disaster situations in their home state or has **5** years of experience working with/helping set up and run daily operations of a local team. **Plus they have completed training for Level 5 – Team Leader Type 2 requirements.** Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST. **The person in this position has had experience in leading and overseeing the daily operations of CRT (Critical Response Teams) 5 to 7 teams with supervisor of each team answering back to Team Leader for that group of teams.**

CISM Type III Crisis Response Team – Supervisor – Level 4

The Crisis Response Team - Supervisor is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors.

CRTs may be assigned to specific tasks, such as: Psychological first aid, Field Assessment, Small and large group debriefings, Chaplaincy functions for specific venues, Worship and memorial services, Daily devotions, Outreach, Training, Hospital / funeral visitation, CISM intervention services, Companionship, Information giving, and Greeter / crowd monitoring.

The person in this position can also be asked to supervise CRT Team members working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

This person in this position has extensive experience as supervisor of CISM Team in small scale disaster situations in their home state or has **4** years of experience working with/helping set up and run daily operations of a local team.

Plus they have completed training for Level 4 – Supervisor Type 3 requirements. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST. **The person in this position has had experience in leading and overseeing the daily operations of a 5 to 7 person team.**

CISM Crisis Response Team Member – Level 3

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors. **The person in this position has had experience in leading and overseeing the daily operations of a 2 to 4 person team.** Plus has **3** years of experience working with/helping set up and run daily operations of a local team. **Plus they have completed training for Level 3 – Provider requirements.**

The person in this position as a CRT Team member will be working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

CISM Crisis Response Team Member – Level 2

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors. **At no time are they to operate in any role without supervision from at least a Level 3 or higher Crisis Response Certificate of Completion team member.** Plus has **2** years of experience working with a local team. **Plus they have completed training for Level 2 – Provider requirements.**

The person in this position as a CRT Team member will be working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

CISM Crisis Response Team Member – Level 1

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors. **At no time are they to operate in any role without supervision from at least a Level 3 or higher Crisis Response Certificate of Completion team member.** Plus has **1** years of experience working with a local team. **Plus they have completed training for Level 1 – Provider requirements.** The person in this position as a CRT Team member will be working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

CISM Crisis Response Team Member – Basic Entry Level

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role in assisting other team members in daily operations. At no time are they to operate in any role without supervision from at least a Level 3 or higher Crisis Response Certificate of Completion team member. Has less than 6 months of experience working with a local team. Plus they have completed training for Basic Entry requirements.

The person in this position as a CRT Team member will be working with other team members who are Level 3 or higher in service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Morgue staff support and Stress reduction centers.

Information taken from NIMS Web page on CISM Team Leader Descriptions

Type I (1-2 Teams) Coordinators – The person in this position has experience as supervisor of CISM Team in large scale disaster situations in home and other States. Has extensive experience in CISM team administration and knowledge of ICISF standards. Completed certification from ICISF. Participated in training approved by ICISF. Has 6 years of experience working with/helping set up and run daily operations of a local team. Plus they have completed training for Level 6 – Officer Type 1 requirements.

Type II (1 Team Coordinator) - The person in this position has experience as supervisor of CISM Team in medium to large scale disaster situations in their home state. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST. Has 5 years of experience working with/helping set up and run daily operations of a local team. Plus they have completed training for Level 5 – Team Leader Type 2 requirements.

Type III (1 Team Coordinator) - The person in this position has experience as supervisor of CISM Team in small scale disaster situations in their home state. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST. Has 4 years of experience working with/helping set up and run daily operations of a local team. Plus they have completed training for Level 4 – Supervisor Type 3 requirements.

Sample of the Confidentiality and Exceptions Signature Form

Confidentiality and Exceptions Signature Form

Employees' communications with Crisis Response Team members will remain confidential with the exception of those matters outlined in this directive. Employees who receive assistance through the Crisis Response Team Program will be informed of those exceptions prior to peer critical intervention counseling.

North Carolina G.S. 8-53.10 provides that communications between Chaplaincy Peer Support/ Critical Intervention Team members and employees are privileged except as follows.

1. When information revealed must be disclosed by law, such as in cases of child abuse, elder abuse, spousal abuse or when the employee reveals that he or she has committed a crime that presented a clear and immediate danger to self or others.
2. When due to mental, emotional or substance abuse problems, the employee presents a clear and immediate danger to self or others.
3. When information revealed gives reason to believe the employee has violated or conspired to violate a person's civil rights. Federal law (42 U.S.C. 1986) requires anyone with knowledge of such violations to report them or be subject to liability for the civil rights violations.
4. When the critical intervention counselor team member is directed by court order to disclose the information or is compelled to disclose the information by rules of civil or criminal discovery.
5. When the peer support/ critical intervention counselor team member is directly involved in an incident as a participant, witness, or investigator.

Confidentiality requirements extend to peer support/ critical intervention counselor team services that occur off-duty.

I the undersigned have read and been fully informed of the exceptions to confidentiality privilege. Three copies are being made of this form, one for myself, one for the counselor, and one for Emergency Services records. I have been informed that these copies are being made and I understand the exceptions to the confidentiality privilege laws.

Signed by _____ Date _____

Crisis Response Team Member _____

Date _____

Crisis Response Team Members

CRISIS RESPONSE TEAM MEMEBERS

- A. Crisis Response Team Members are volunteers.
- B. Crisis Response Team Members are selected through an established application process. Personnel interested in becoming a member of the Crisis Response Team should submit a letter of interest and an application to the Crisis Response Team Coordinator advising why they feel they are qualified. The selection process will include a one on one meeting with the Mental Health Coordinator for Peer Support, with the Senior Crisis Response Team Leader and the Executive Board of Lincoln County Emergency Crisis Response Team making final determination for selection.
- C. Prior to engaging in Crisis Response or Crisis Intervention, the new member will receive specialized training in crisis intervention, physical needs, emotional, spiritual care, and moral support at the direction of the Crisis Response Program. This initial training is the Basic Course of instruction in CISM which is Individual Crisis Intervention and Group Crisis Intervention as taught by certified instructors of the International Crisis Incident Stress Foundation. All CISM Classes used are approved classes from ICISF and all instructors are approved and certified to teach the classes through ICISF.
- D. Crisis Response Team Members are accessible to all agencies and others who need their services. A list of Crisis Response Team Members will be made available to all agencies. The list is available through the Lincoln County Emergency Management / Fire Marshal's Office.
- E. Individuals may seek the assistance of Crisis Response Team Members for any personal, emotional, family or job related problems.
- F. Meetings with Crisis Response Team Members may occur on or off-duty. Crisis Response Team Members and individuals receiving peer support services while **on-duty** will notify their immediate supervisor if they are to be absent from their duty assignment. Supervisors will respect the confidentiality of any such request.
- G. Crisis Response Team Members may make written notes to assist them during the peer support sessions, however all written notes are to be given to the person being talked with at the end of the sessions and no permanent record of said notes is ever to be made or kept.

- H. Crisis Response Team Members will be contacted by Communications whenever an incident occurs of the following nature:
1. Officer involved shooting.
 2. Incident involving the serious injury to an emergency service worker or to a citizen while involved with the emergency service.
 3. Major traffic accidents as requested by a supervisor on scene.
 4. Major natural disasters as requested by a supervisor on scene.
 5. Major man-made disaster such as air crashes, and fires and explosions with loss of life or serious injuries and requested by a supervisor on scene.
- I. Crisis Response Team Members' role in the above incidents is one of providing assistance and support to the emergency service workers involved. Specific responsibilities will depend on the situation, however in no instance will Crisis Response Team Members interfere with an investigation.
- J. The Crisis Response Team Members will work closely with the entire Emergency Service Agencies to coordinate our efforts to members of each Department.
- K. A brief Critical Incident Defusing for all effected personnel is recommended as soon as is practical following a critical incident and will be coordinated by the Senior Crisis Response Team Leader. If possible, this should be done before affected personnel are off-duty. If the affected personnel are clearly experiencing significant stress, the peer support personnel or Department psychologist may recommend a Critical Incident Stress Debriefing (CISD). The affected personnel's supervisor is responsible for arranging the debriefing. The debriefing should take place as soon as possible but should take place within 72 hours following the incident. Generally, defusing and debriefings should be mandatory, although supervisory staff should be given discretion if attendance would constitute an unreasonable hardship for any individual to attend. It is recommended that all personnel direct should be mandatory, although supervisory staff should be given discretion if attendance would constantly involve in the incident, including communications personnel, and crime scene personnel attend the debriefing.

Each Crisis Response Team Member:

1. **Hold all information, discussions, calls, etc. in confidentiality**
2. Be willing to attend training sessions and programs conducted by the emergency service agencies or any respected agency dealing with areas as they relate to the work of the crisis response team
3. Wear ID badge (that will be provided) at all times when on a scene or while working as Crisis Response Team for [Lincoln County Emergency Service Agencies](#)
4. Properly identify oneself as Crisis Response Team Member for [Lincoln County Emergency Services](#) when arriving on all scenes, be courteous and conduct oneself in accordance with the regulations of the [Lincoln County Emergency Service Agencies](#), Crisis Response Program and the office which they hold as Crisis Response Team Member.
5. Be willing to be on call if the need arises to have a on call person and be able to respond within 45 minutes from time of page.
6. Have a basic knowledge of emergency services or be willing to attend training to acquire that knowledge.

Crisis Response Team Member may be asked to assist with

The Crisis Response Team may be requested to assist with the following types of incidents and special events, as requested by the different emergency service agencies

1. Assist at accident and emergency situations involving serious injury or death at homes, construction sites, motor vehicle accidents, fires, drownings, searches, natural and man-made disasters when requested.
2. Delivery of death notices
3. Assist with Line of duty deaths as requested
4. Assist with memorial services when requested
5. Assist with weddings for members and their families as requested
6. Attend and participate in funerals of active, retired members and the families of emergency service agencies: Fire, Rescue, EMS and Law Enforcement.
7. Child abuse situations when requested
8. Sexual assaults when requested
9. Provide assistance to victims of crisis situations
10. Lost child
11. Hostage situations when requested
12. Attempted or actual suicides when requested
13. Family disturbances when requested
14. Hospital calls to Emergency Service Agencies and family members as needed or requested
15. Liaison with hospitals and clinics

16. Participate in and/or leads Critical Incident Stress Management Team and Debriefings
17. Provides short-term, confidential peer support of Emergency Service personnel and family members and their children
18. Provide educational instruction in the areas of death, stress management, ethics, family life, victim response and introduce new members of the different agencies to the chaplaincy program
19. Enhance public relations
20. Attend department graduations, award ceremonies, dinners, social events, department dedications and offer invocations and benedictions
21. Serve as a liaison with other clergy in the community
22. Provide a listening ear
23. Serve as a ready resource for any emergency service agency

The Crisis Response Team member of the emergency service is one of the most vital positions in the emergency services. The Crisis Response Team member is next to the pulse of the emergency service. It is a job that is demanding, confidential, trusting, and needed for the lives of the emergency service workers and their families.

To the Crisis Response Team Member reviewing these guidelines, accept the calling with pride but serve in it with humility, constantly calling on God for strength and wisdom.

Just a reminder that Ordained Clergy are required to report situations that the Laity peer support team member may not have to however, if unsure seek advice from the Senior Crisis Response Team Leader.

Each Emergency Service Agency can have their own Chaplain without them being a member of the Crisis Response Team but they will not be allowed to do any crisis response or critical incident response or debriefings unless they are a member of the Crisis Response Team and has completed the necessary training.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 2: Defining the Roles and Responsibilities of a Crisis Responder

Defining the Roles and Responsibilities of a Crisis Responder

The crisis response individual may be clergy or a lay person, male or female, part of a special agency (Billy Graham Rapid Response Team., Red Cross, etc.) or part of a local/state/national response team. The crisis response individual is one who takes on the role of providing spiritual, emotional, physical and other support to those in the emergency services and those in the community affected by emergency crisis. Although there are many different levels of service, the crisis response individual is normally one who is appointed to the office by his or her emergency agency or they are part of a crisis response team and have been endorsed by his or her own denominational authority, church, synagogue, or other religious organization. The crisis response individual ministers to the needs of people from all religious backgrounds without proselytizing for his or her own affiliation. Many crisis response individuals are volunteers, some receive reimbursement for their expenses, and others may be paid part-time or full-time by the agency or by an outside agency. Some rise their own funding relying on local churches and groups to provide money.

One of the purposes as a Crisis Response Individual or Team may be to offer comforter and peer support and confidential support for employees (paid or volunteer) for personnel dealing job or personal related problems. **“To cure sometimes, to help often, to comfort always.”** As Crisis Response Individual or Team members we will be creative and understanding as we demonstrate grace and love in ministering to people, serving with law enforcement, fire department, Rescue/EMS agencies and other emergency services agencies. Not only will we response to help the employees and their families of the different agencies, we will also response to help the people in the community served by the agencies. To provide guidelines that will be uniformly applied following incidents that has resulted in death or serious bodily injury or threat of to any emergency service worker, in order to assist personnel in coping with extremely stressful incidents such as manmade incidents and natural events.

(Floods, tornadoes, terrorist acts, sudden death, traumatic events that occur or anything that causes trauma in a person’s life to cause them not to function in the norm for them).

When emergency service personnel respond to a burning building their main focus is on saving life and protecting property, the crisis response individual responds alongside but is focusing on ministering to the needs of the emergency service agency and the needs of the crisis victims. Victims of an emergency crisis may be the family who has just been burned out of their home, or the scared and confused spouse of a heart attack patient. They could be the mother of a teenager who just committed suicide or the frightened children whose parents are being transported to the hospital after a traffic accident.

Emergency service personnel are trained and able to deal with the varied emergency crises of our modern world. Crisis response individual are equipped and called to deal with the people being affected by those same events.

In times of crisis, the crisis response individual's gift to others is hope. While the crisis response individual may seldom use the word hope, his or her presence will communicate the thought more effectively than any spoken phrase. The crisis response individual's presence says somebody cares, somebody loves. This caring and service is enhanced by a variety of specialized skills and techniques that the crisis response individual strives to master through training, classes and working with others. Many of these skills and techniques are taught through specialized classes taught through different agencies such as ICISF, Billy Graham, Red Cross, Salvation Army, The Academy-NICRT and others. **As each department fills a Crisis Response Team member or (chaplain) on their roster here are the Standard Operating Guideline's for that position.**

This position is first responsible to the Emergency Service Agency to which they belong, then the Senior Crisis Response Team Leader and to the Lincoln County Emergency Services Director and must keep the agency and the Senior Crisis Response Team Leader informed of the various activities relevant to the below duties and responsibilities.

Procession

Minimum Qualifications:

Minimum Qualifications:

- Member of local faith organization, and have a North Carolina driver's license.
- Letter from their religious leader stating the person is qualified and a member in good standing.
- Willing to learn about and to serve in and with the different emergency service agencies.
- Prepared to serve in a crisis zone.
- Willing to provide ministry to personnel and the public of all faiths and denominations.
- Willing to commit the time necessary to make the ministry effective.
- Committed to learn the skills necessary to effectively relate to and minister to emergency service workers, their families and to the public.
- Pass a criminal background check, and driver's license check.
- Committed to learn the skills necessary to effectively relate to and minister to emergency service workers.
- Complete classes listed in each level of chaplaincy certification in the time allotted after appointment to that level of certification.
- The following CISM Classes are the minimum required classes for entry level team member: Individual Crisis Intervention & Peer Support, Group Crisis Intervention, Advance Group Crisis Intervention, Pastoral Crisis Intervention, and Suicide Prevention, Intervention & Postvention.
- Maintain 36 hours of training a year which consist of a combination of CISM Classes and meetings, emergency services training and meetings. Must have a minimum of 12 hours in the chaplain side and 12 hours in the emergency services side and the rest (12 hours) can be combination from both to equal a total of 36 hours. Must attend 6 Crisis Response Team Meetings and 6 Emergency Services (agency they belong to) Meetings a year and 50% of all call outs you are requested on.

Duties and Responsibilities

Duties and Responsibilities:

- Responsible for responding to different areas and sites in time of emergencies.
- Responsible for learning and adhering to Lincoln County Emergency Services Crisis Response Team SOG's.
- Responsible for learning and adhering to Lincoln County Services Incident Command System and National Incident Management System 100, 200, 300, 400, 700 and 800.
- Responsible for providing emotional and spiritual assistance as necessary. Able to detect stress in individuals as related to response to incidents and emergencies. Able to train others how to manage stress.
- Responsible for attending meetings and responding after hours if necessary.
- Responsible for assisting or conducting the different types of incidents or special events as listed in the Lincoln County Emergency Services Crisis Response Team Manual.

Crisis Response Team Members

CRISIS RESPONSE TEAM MEMEBERS

- A. Crisis Response Team Members are volunteers.
- B. Crisis Response Team Members are selected through an established application process. Personnel interested in becoming a member of the Crisis Response Team should submit a letter of interest and an application to the Crisis Response Team Coordinator advising why they feel they are qualified. The selection process will include a one on one meeting with the Mental Health Coordinator for Peer Support, with the Senior Crisis Response Team Leader and the **Executive Board of Lincoln County Emergency Crisis Response Team** making final determination for selection.
- C. Prior to engaging in Crisis Response or Crisis Intervention, the new member will receive specialized training in crisis intervention, physical needs, emotional, spiritual care, and moral support at the direction of the Crisis Response Program. This initial training is the Basic Course of instruction in CISM which is Individual Crisis Intervention and Group Crisis Intervention as taught by certified instructors of the International Crisis Incident Stress Foundation. All CISM Classes used are approved classes from ICISF and all instructors are approved and certified to teach the classes through ICISF.
- D. Crisis Response Team Members are accessible to all agencies and others who need their services. A list of Crisis Response Team Members will be made available to all agencies. The list is available through the **Lincoln County Emergency Management / Fire Marshal's Office**.

- E. Individuals may seek the assistance of Crisis Response Team Members for any personal, emotional, family or job related problems.
- F. Meetings with Crisis Response Team Members may occur on or off-duty. Crisis Response Team Members and individuals receiving peer support services while **on-duty** will notify their immediate supervisor if they are to be absent from their duty assignment. Supervisors will respect the confidentiality of any such request.
- G. Crisis Response Team Members may make written notes to assist them during the peer support sessions, however all written notes are to be given to the person being talked with at the end of the sessions and no permanent record of said notes is ever to be made or kept.
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- I. Crisis Response Team Members' role in the above incidents is one of providing assistance and support to the emergency service workers involved. Specific responsibilities will depend on the situation, however in no instance Crisis Response Team Members will interfere with an investigation.
- J. The Crisis Response Team Members will work closely with the entire Emergency Service Agencies to coordinate our efforts to members of each Department.
- K. A brief Critical Incident Defusing for all effected personnel is recommended as soon as is practical following a critical incident and will be coordinated by the Senior Crisis Response Team Leader. If possible, this should be done before affected personnel are off-duty.
- L. If the affected personnel are clearly experiencing significant stress, the peer support personnel or Department psychologist may recommend a Critical Incident Stress Debriefing (CISD). The affected personnel's supervisor is responsible for arranging the debriefing. The debriefing should take place as soon as possible but should take place within 72 hours following the incident. Generally, defusing and debriefings should be mandatory, although supervisory staff should be given discretion if attendance would constitute an unreasonable hardship for any individual to attend. It is recommended that all personnel direct should be mandatory, although supervisory staff should be given discretion if attendance would constantly involve d in the incident, including communications personnel, and crime scene personnel attend the debriefing.

Each Crisis Response Team Member:

1. **Hold all information, discussions, calls, etc. in confidentiality.**
2. Be willing to attend training sessions and programs conducted by the emergency service agencies or any respected agency dealing with areas as they relate to the work of the crisis response team.
3. Wear ID badge (that will be provided) at all times when on a scene or while working as Crisis Response Team for [Lincoln County EmergencyService Agencies.](#)
4. Properly identify oneself as Crisis Response Team Member for [Lincoln County Emergency Services](#) when arriving on all scenes, be courteous and conduct oneself in accordance with the regulations of the [Lincoln County Emergency Service Agencies](#), Crisis Response Program and the office which they hold as Crisis Response Team Member.
5. Be willing to be on call if the need arises to have a on call person and be able to respond within 45 minutes from time of page.
6. Have a basic knowledge of emergency services or be willing to attend training to acquire that knowledge.

Crisis Response Team Members may be requested to assist with

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2. Delivery of death notices
3. Assist with Line of duty deaths as requested
4. Assist with memorial services when requested
5. Assist with weddings for members and their families as requested
6. Attend and participate in funerals of active, retired members and the families of emergency service agencies: Fire, Rescue, EMS and Law Enforcement.
7. Child abuse situations when requested
8. Sexual assaults when requested
9. Provide assistance to victims of crisis situations
10. Lost child
11. Hostage situations when requested
12. Attempted or actual suicides when requested
13. Family disturbances when requested
14. Hospital calls to Emergency Service Agencies and family members as needed or requested
15. Liaison with hospitals and clinics
16. Participate in and/or leads Critical Incident Stress Management Team and Debriefings
17. Provides short-term, confidential peer support of Emergency Service personnel and family members and their children
18. Provide educational instruction in the areas of death, stress management, ethics, family life, victim response and introduce new members of the different agencies to program
19. Enhance public relations
20. Attend department graduations, award ceremonies, dinners, social events, department dedications and offer invocations and benedictions
21. Serve as a liaison with other clergy in the community
22. Provide a listening ear
23. Serve as a ready resource for any emergency service agency



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 3: How to Request the Crisis Response Team

Lincoln County Emergency Services **Crisis Response Team Requests**

- I. For any emergency or when a Crisis Response Team member has been requested to respond to a scene the following are the guidelines to request a Crisis Response Team or its members:**
 - (1) Page the on call Team Leader first
 - (2) If unable to reach the on call Team Leader then the Senior Crisis Response Team Member

- II. For all debriefings (Post Action Staff Support) the following are the guidelines for setting up a debriefing (PASS):**
 - (1) Page or contact the Senior Crisis Response Team Leader first to request the debriefing (PASS)
 - (2) If unable to reach the Senior C.R.T. Leader then page or contact the Supervisory for the Crisis Response Team
 - (3) Finally the on call team leader can assist if unable to reach Senior or Supervisory for the Crisis Response Team



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 4: How to Apply to be a Member of the Lincoln County CRT

Items that must be turned in with your application

Items that must be turned in with application

- (1) Letter of Recommendation/Endorsement from an agency you will be working with.
- (2) Letter of Recommendation/Endorsement from individual who is on a crisis response team.
- (3) Letter of Recommendation/Endorsement from your church leader.
- (4) List of three references with contact address and phones for each and how long you have known that person.
- (5) Copy of all training certificates you may have already taken dealing with crisis response.
- (6) List of events/responses you have worked on or helped with.
- (7) Authorization and Release form for background checks filled out front and back, signed and notarized front and back.

Sample of Copy of the Application is on page 44

Application for **Lincoln County** Team C.R.T.
Crisis Response Team

Prefix: _____ Name _____
(Mr./Mrs./Rev./Dr.) Last First
Middle

Address: _____
Number Street City State
Zip

Home: (____) - _____ Work: (____) - _____ Cell: (____) - _____

Pager: (____) - _____ Fax: (____) - _____

E-mail: _____ Spouse's name: _____

Denomination: _____ Number of years in ministry: _____

Education: College: _____ Degree received: _____

Graduate: _____ Degree received: _____

Seminary: _____ Degree received: _____

Have you taken any classes related to crisis response training? _____. If so please provide copies of classes with application.

Are you a certified chaplain? _____. If so provide a copy of your certification with application.

What experience do you have in counseling and critical stress incident response and debriefings? _____

Do you have any experience working with emergency service agencies or disaster response groups? _____.
(Ex. Fire, EMS, Law Enforcement, Billy Graham Rapid Response Team, Red Cross and etc.)

If so please list what agencies you have worked with in the past and a contact person & number.

Are you willing to be on call to response to different types of emergencies at all hours of the day and night if needed by the officer in charge? _____

Signature _____ Date _____



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 5: Authorization and Release Criminal and Driving History Report

Criminal and Driving History Check is required

Part of joining the CRT tem and being a member of the team you agree to authorize the Lincoln County Team C.R.T. Board or any agent of the Lincoln County Team C.R.T. Board to obtain records related to me from criminal justice agencies (clerk of court, police/sheriff departments, etc.) and other agencies as needed to complete back ground check. You understand the information obtained may include, among other things, information regarding criminal and driving charges and convictions. You also understand that this information will be obtained for the purpose of determining my suitability to volunteer in the capacity designated below. You hereby release the Lincoln County Team C.R.T. Board, Emergency Service Agencies and their members and Lincoln County from any liability in obtaining and utilizing such information.

You also authorize any party or agency contacted by the Lincoln County Team C.R.T. Board to furnish the above-described information and I release from liability any party or agency who provides such information to the Lincoln County Team C.R.T. Board.

As part of the process of being on the CRT team you understand that failure to provide all or part (both pages of form) of the information requested below may result in my disqualification as a volunteer. The release shall be effective on the date of this execution and that this authorization is valid for one (1) year, at any time during my term as a volunteer. You can be asked to submit to future background checks that may be performed by the Lincoln County Team C.R.T. Board.

Position applying for: Volunteer Crisis Response Team Member for Lincoln County Team C.R.T.

By signing this document you are certifying that you are at least 18 years old.

As part of the process of being a member on the CRT team you hereby acknowledge that this authorization is valid for one (1) year. At any time during my term as a volunteer you can be asked to submit to future background checks.

A copy of this document is considered valid, just as the original.

A sample copy of the criminal and driving history check is on page 49 and 50.

The application may be printed front and back or come page 1 and page 2. Make sure when you are filling this form out that you fill out either front and back and two pages. In order for the process to move forward both pages have to be filled out, notarized and turned back in.

**Authorization and Release
Criminal and Driving History Report**

I authorize the Lincoln County Team C.R.T. Board or any agent of the Lincoln County Team C.R.T. Board to obtain records related to me from criminal justice agencies (clerk of court, police/sheriff departments, etc.) and other agencies as needed to complete back ground check. I understand the information obtained may include, among other things, information regarding criminal and driving charges and convictions. I understand that this information will be obtained for the purpose of determining my suitability to volunteer in the capacity designated below. I hereby release the Lincoln County Team C.R.T. Board, Emergency Service Agencies and their members and Lincoln County from any liability in obtaining and utilizing such information.

I hereby authorize any party or agency contacted by the Lincoln County Team C.R.T. Board to furnish the above-described information and I release from liability any party or agency who provides such information to the Lincoln County Team C.R.T. Board.

I understand that failure to provide all or part of the information requested below may result in my disqualification as a volunteer. The release shall be effective on the date of this execution and that this authorization is valid for one (1) year, at any time during my term as a volunteer I can be asked to submit to future background checks that may be performed by the Lincoln County Team C.R.T. Board.

Position applying for: Volunteer Crisis Response Team Member for Lincoln County Team C.R.T.
I certify that I am at least 18 years old.

I hereby acknowledge that this authorization is valid for one (1) year. At any time during my term as a volunteer I can be asked to submit to future background checks.

A copy of this document is considered valid, just as the original.

Print Full Name: _____

_____ Signature of applicant

Notarized _____ Date: _____
Signature

My Commission expires: _____
Date

(Back side must be completed, signed and notarized as well)

I have read and fully understand the above statements on the front of this document. _____

Current Position: _____.

I certify that I am at least 18 years old.

Print Full Name: _____

Other names used (include maiden) _____

Date of Birth _____ and Place of Birth _____

Driver's License # _____ State _____ SSN: _____

Current Address: _____

Previous addresses (past 10 years) _____

Have you ever lived in any other state _____ or country _____ If so where _____

Phone # (home) _____ (work) _____

Cell Phone # _____ A high school graduate or North Carolina recognized GED _____

Have you ever been charged or have any felony criminal convictions in your background? _____

Have you ever been charged or convicted of any felony or misdemeanor sexual related crimes? ____
Are you a registered sex offender? _____

Are your driver's license currently suspended, canceled, revoked, or with modified driving privileges at the time of the report. _____

Use of marijuana within 36 months of the date of report _____

Use of other illegal or illicit drugs within five years of the date of report _____

Is there a current restraining or protection order against you in effect _____

Are there major traffic violation charges or any criminal charges pending at this time _____

A DUI conviction within the past 5 years of the date of report _____

Are you a US Citizen? _____ if not, please attach a copy of your work authorization card.

Member Signature: _____ Date: _____

Notarized _____ Date: _____
Signature

My Commission expires: _____
Date



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 6: Crisis Response Team Ground Rules

Crisis Response Team Ground Rules that must be followed at all times.

CRISIS RESPONSE TEAM GROUND RULES

1. Report for duty when contacted by the Crisis Response Team Coordinator.
2. All volunteers must wear their Lincoln County Team C.R.T. ID Badge while on the scene.
3. Review your Lincoln County Team C.R.T. Handbook periodically.
4. When you have been called or paged, report to the scene and sign in with command.
5. The officer in charge will be your contact person.
6. Work in designated areas only.
7. Adhere to confidentiality at all times.
8. Listen for announcements over the radio/pagers.
9. Report any problems or concerns to the officer in charge, senior team leader or a member of the Crisis Response Team Leadership.
10. Contact the Crisis Response Coordinator or Crisis Response Team Board if you have questions or suggestions.
11. Attend Crisis Debriefing Meetings when invited.
13. Be knowledgeable of age appropriate language, behavior and needs.
14. Be aware of spiritual needs as they arise.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 7: Guidelines for Appropriate Conduct

GUIDELINES FOR APPROPRIATE CONDUCT

When attempting to offer comfort to grieving individuals, it is important to keep in mind the overwhelming public concern regarding abuse and sexual conduct issues. Do not put yourself at risk. Remember that some public displays of affection are inappropriate and may cause discomfort and disruption.

Grieving individuals are extremely vulnerable. During that time of grief a person's impression of an individual's behavior may be different than what was intended. Some practices that maintain safety when working with individuals include:

Nine things to remember when helping during a critical incident

1. In general there **are only three safe places to touch an individual: on the hand, on the shoulder and on the upper back.**
2. Never touch an individual against her or his will.
3. Never touch an individual against her or his verbally or non-verbally expressed discomfort.
4. **Never touch a part of an individual's body that is typically covered by a bathing suit, unless for a clear medical necessity.**
5. Never put yourself in a position to be alone with an individual. Have someone with you or stay in clear sight of others.
6. Always remember there is no such thing as an innocent ***HUG*** in a trauma situation.
7. Do not visit someone of the opposite sex alone in their home.
8. Do not counsel someone of the opposite sex alone at your office (without the door ajar, a window in the door, or an assistant outside the door)..
9. Do not counsel a married person of the opposite sex more than once without the person's mate being present (or involved in the process).



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 8: What is a Critical Incident?

What is a Critical Incident?

What Is A Critical Incident?

A critical (**or traumatic**) incident is any event outside the usual realm human experience that is markedly distressing (**e.g. evokes reactions of intense fear, helplessness, horror, etc.**) Such critical incidents usually involve the perceived threat to one's physical integrity or the physical integrity of someone else. Most importantly, critical incidents are determined by how they undermine a person's sense of safety, security and competency in the world. This results in a form of psychiatric injury, also called traumatic impact or traumatic stress.

Examples of Critical Incident – Personal / Community

Critical Incidents are put into two categories Individual/Personal and Community/World. The items listed in the following sections will affect people differently. The ones in the individual/personal usually affects the person it is happening to and those closely associated with that individual. The ones listed in the community/world seem to affect more individuals at one time.

Individual/Personal

- ☐ Automobile accident, or any accident involving serious injury and/or property damage
- ☐ Industrial accidents involving serious injuries or fatalities
- ☐ Sudden or unexpected death of a relative, friend or colleague
- ☐ Sexual assault/abuse
- ☐ Robbery and violent crimes
- ☐ Domestic violence
- ☐ Child abuse and/or injury or death of a child
- ☐ Psychological/emotional abuse
- ☐ Suicide or attempted suicide
- ☐ Homicide(s)
- ☐ Line of duty death or injury among emergency/law enforcement personnel
- ☐ Any life threatening experience
- ☐ Adverse/negative publicity
- ☐ Observing or being aware of unethical acts
- ☐ Observing any of the individual or community critical incidents

Community/World

- ☐ Fires
- ☐ Floods
- ☐ Earthquakes
- ☐ Hurricanes
- ☐ Tornadoes
- ☐ Multiple injury/fatality accidents
- ☐ Large scale environmental pollution
- ☐ Terrorism
- ☐ Acts of war
- ☐ Child related traumatic events
- ☐ Homicides in the community
- ☐ High publicity crimes of violence or sex
- ☐ Community disasters
- ☐ Being an emergency worker/first responder in critical incidents and disasters (Police, Fire, EMS etc)

As you can see, you need not be directly involved to be adversely affected by a critical incident. Generally, the closer you are to the actual event and the people involved, the more severe the impact. However, television and news media coverage, especially excessive and/or graphic depictions, may serve to increase the likelihood of experiencing traumatic impact, especially anxiety and feelings of not being safe.

What to do After the Incident

Things to Do After A Critical Incident

- WITHIN THE FIRST 24 - 48 HOURS periods of appropriate physical exercises alternated with relaxation will alleviate some of the physical reactions.
- Structure your time - keep busy.
- You're normal and having normal reactions - don't label yourself crazy.
- Talk to people - talk is the most healing medicine.
- Be aware of numbing the pain with overuse of drugs or alcohol. You don't need to complicate this with a substance abuse problem.
- Reach out - people do care.
- Maintain as normal a schedule as possible.
- Spend time with others and talk about what happened to you.
- Help others who were affected as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feelings with others.
- Keep a journal. Write down your thoughts and feelings about the incident. Research has shown this is very effective for symptom reduction and resolution of the trauma.
- Do things that feel good to you.
- Realize those around you are under stress.
- Don't make any big life changes.
- Do make as many daily decisions as possible which will give you a feeling of control over your life, i.e., if someone asks you what you want to eat - answer them even if you're not sure.
- Get plenty of rest.
- Reoccurring thoughts, dreams or flashbacks are normal - don't try to fight them - they'll decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).

For Family and Friends

For Family and Friends

- Listen carefully.
- Spend time with the traumatized person.
- Offer your assistance and a listening ear if they have not asked for help.
- Reassure them that they are safe.
- Help them with everyday tasks like cleaning, cooking, caring for the family, minding children.
- Give them some private time.
- Don't take their anger or other feelings personally.
- Don't tell them that they are "lucky it wasn't worse" - traumatized people are not consoled by those statements. Instead, tell them that you are sorry such an event has occurred and you want to understand how they are feeling and how you can help them.

Acute Stress Disorder

Acute Stress Disorder

The following is a description of the symptoms used to determine if you or your family have suffered a traumatic impact:

You or your family has been exposed to a traumatic event when both of the following are present:

1. The person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others
2. The person's response involved intense fear, helplessness, or horror
Either while experiencing or after experiencing the distressing event, the individual has three (or more) of the following dissociative symptoms:
3. A subjective sense of numbing, detachment, or absence of emotional responsiveness
4. A reduction in awareness of his or her surroundings (e.g., "being in a daze")
5. Derealization - sense that world is unreal, strange, and unfamiliar.
6. Depersonalization - feelings of being an outside observer of one's self
7. Dissociative amnesia (i.e., inability to recall an important aspect of the trauma)

The traumatic event is persistently re-experienced in at least one of the following ways: recurrent images, thoughts, dreams, illusions, flashback episodes, or a sense of reliving the experience; or distress on exposure to reminders of the traumatic event.

Marked avoidance of stimuli that arouse recollections of the trauma (e.g., thoughts, feelings, conversations, activities, places, and people).

Marked symptoms of anxiety or increased arousal (e.g., difficulty sleeping, irritability, poor concentration, hyper vigilance, exaggerated startle response, restlessness).

The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning or impairs the individual's ability to pursue some necessary task, such as obtaining necessary assistance or mobilizing personal resources by telling family members about the traumatic experience.

The disturbance lasts for a minimum of 2 days and a maximum of 4 weeks and occurs within a month of the traumatic event.

The disturbance is not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition.

If symptoms persist for more than 4 weeks, **Post Traumatic Stress Disorder** may be indicated and require further help.

Post-Traumatic Stress Disorder (PTSD)

Post-Traumatic Stress Disorder (PTSD)

Not every traumatized person gets full-blown PTSD, or experiences PTSD at all. PTSD is diagnosed only if the Acute Stress symptoms last more than a month. In those who do have PTSD, symptoms usually begin within 3 months of the trauma, and the course of the illness varies. Some people recover within 6 months, others have symptoms that last much longer. In some cases, the condition may be chronic. Occasionally, the illness doesn't show up until years after the traumatic event.

Specific Symptoms of PTSD

The person has been exposed to a traumatic event in which the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others and the person's response involves intense fear, helplessness, or horror.

The traumatic event is persistently re-experienced in one (or more) of the following ways:

1. Recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions.
2. Recurrent distressing dreams of the event.
3. Acting or feeling as if the traumatic event were recurring (includes a sense of reliving the experience, illusions, hallucinations, and dissociative flashback episodes, including those that occur on awakening or when intoxicated).
4. Intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event
5. Physiological reactivity on exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event
6. The individual also has persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma), as indicated by three (or more) of the following:
7. Efforts to avoid thoughts, feelings, or conversations associated with the trauma
8. Efforts to avoid activities, places, or people that arouse recollections of the trauma
9. Inability to recall an important aspect of the trauma

10. Markedly diminished interest or participation in significant activities
11. Feeling of detachment or estrangement from others
12. Restricted range of affect (e.g., unable to have loving feelings)
13. Sense of a foreshortened future (e.g., does not expect to have a career, marriage, children, or a normal life span)
14. Persistent symptoms of increased arousal (not present before the trauma), as indicated by two (or more) of the following:
 15. Difficulty falling or staying asleep
 16. Irritability or outbursts of anger
 17. Difficulty concentrating
 18. Hyper vigilance
 19. Exaggerated startle response

The disturbance, which has lasted for at least a month, causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

The focus of PTSD is a single life-threatening event or threat to integrity. However, the symptoms of traumatic stress also arise from an accumulation of small incidents rather than one major incident.

Examples include:

1. Repeated exposure to horrific scenes at accidents or fires, such as those endured by members of the emergency services (e.g. bodies mutilated in car crashes, or horribly burnt or disfigured by fire, or dismembered or disemboweled in plane disasters, etc)
2. Repeated involvement in dealing with serious crime, e.g. where violence has been used and especially where children are hurt
3. Breaking news of bereavement caused by accident or violence, especially if children are involved
4. Repeated violations such as in verbal abuse, physical abuse and sexual abuse, psychological abuse, stalking, bullying etc.

Tips for Coping with Critical Incidents

Tips for Coping with Critical Incidents

At some point in time you, or someone you know, may be going through the process of recovering from a critical incident or some type of traumatic impact. Traumatic events are caused either by natural (storms, earthquakes and etc.) or they are man-made (crimes, acts of terrorism) or could be accidents and unexpected deaths. You or the individual may have experienced a flood, hurricane or earthquake. Or maybe you have been in a serious accident or the victim of crime. Traumatic experiences such as these tend to be sudden and overwhelming. In some cases, there are no outwardly visible signs of physical injury, but there is nonetheless a serious emotional toll.

It is common for people who have experienced traumatic situations to have very strong emotional reactions. Understanding normal responses to these abnormal events can aid you in coping effectively with your feelings, thoughts, and behaviors, and help you along the path to recovery.

What happens to people after traumatic event?

What happens to people after a disaster or other traumatic event?

1. Shock and denial are typical responses to disasters and other kinds of trauma, especially shortly after the event. Both shock and denial are normal protective reactions.
2. Shock is a sudden and often intense disturbance of your emotional state that may leave you feeling stunned or dazed.
3. Denial involves you're not acknowledging that something very stressful has happened, or not experiencing fully the intensity of the event. You may temporarily feel numb or disconnected from life.
4. As the initial shock subsides, reactions vary from one person to another. The following, however, are normal responses to a traumatic event:
5. Feelings become intense and sometimes are unpredictable. You may become more irritable than usual, and your mood may change back and forth dramatically. You might be especially anxious or nervous, or even become depressed.
6. Thoughts and behavior patterns are affected by the trauma. You might have repeated and vivid memories of the event. These flashbacks may occur for no apparent reason and may lead to physical reactions such as rapid heartbeat or sweating. You may find it difficult to concentrate or make decisions, or become more easily confused. Sleep and eating patterns also may be disrupted.
7. Recurring emotional reactions are common. Anniversaries of the event, such as at one month or one year, as well as reminders such as aftershocks from earthquakes or the sounds of sirens, can trigger upsetting memories of the traumatic experience. These 'triggers' may be accompanied by fears that the stressful event will be repeated.
8. Interpersonal relationships often become strained. Greater conflict, such as more frequent arguments with family members and coworkers, is common. On the other hand, you might become withdrawn and isolated and avoid your usual activities.
9. Physical symptoms may accompany the extreme stress. For example, headaches, nausea and chest pain may result and may require medical attention. Pre-existing medical conditions may worsen due to the stress.

Do people Respond Differently?

How do people respond differently over time?

1. It is important for you to realize that there is not one 'standard' pattern of reaction to the extreme stress of traumatic experiences. Some people respond immediately, while others have delayed reactions - sometimes months or even years later. Some have adverse effects for a long period of time, while others recover rather quickly.
2. And reactions can change over time. Some who have suffered from trauma are energized initially by the event to help them with the challenge of coping, only to later become discouraged or depressed.
3. A number of factors tend to affect the length of time required for recovery, including the degree of intensity and loss. Events that last longer and pose a greater threat, and where loss of life or substantial loss of property is involved, often take longer to resolve.
4. Also, a person's general ability to cope with emotionally challenging situations will affect the outcome. Individuals who have handled other difficult, stressful circumstances well may find it easier to cope with the trauma.

Other events proceeding the traumatic experience

What about other stressful events preceding the traumatic experience?

1. Individuals faced with other emotionally challenging situations, such as serious health problems, family-related difficulties, legal or financial stresses, or have another mental health condition may have more intense reactions to the new stressful event and need more time to recover. The more stress in a person's life, the fewer resources they have to cope with a critical incident.

Helping yourself and family

How should I help myself and my family?

1. There are a number of steps you can take to help restore emotional wellbeing and a sense of control following a disaster or other traumatic experience, including the following:
2. Give yourself time to heal. Anticipate that this will be a difficult time in your life. Allow yourself to mourn the losses you have experienced. Try to be patient with changes in your emotional state.
3. Ask for support from people who care about you and who will listen and empathize with your situation. But keep in mind that your typical support system may be weakened if those who are close to you also have experienced or witnessed the trauma.
4. Communicate your experience in whatever ways feel comfortable to you - such as by talking with family or close friends, or keeping a journal.
5. If your company or a professional in your community offers Critical Incident Stress Management services, it is **VERY IMPORTANT** to attend the group debriefings and/or utilize the Individual sessions. CISM can often prevent long term consequences of traumatic impact.
6. Find out about local support groups that often are available such as for those who have suffered from natural disasters, or for women who are victims of rape. These can be especially helpful for people with limited personal support systems.
7. Try to find groups led by appropriately trained and experienced professionals. Group discussion can help people realize that other individuals in the same circumstances often have similar reactions and emotions.
8. Engage in healthy behaviors to enhance your ability to cope with excessive stress. Eat well-balanced meals and get plenty of rest. If you experience ongoing difficulties with sleep, you may be able to find some relief through relaxation techniques. Avoid alcohol and drugs.
9. Establish or reestablish routines such as eating meals at regular times and following an exercise program. Take some time off from the demands of daily life by pursuing hobbies or other enjoyable activities.
10. Avoid major life decisions such as switching careers or jobs if possible because these activities tend to be highly stressful.
11. Become knowledgeable about what to expect as a result of trauma. Some of the additional resources on this web site may help you with this learning process.

Children's special needs

How do I take care of children's special needs?

1. The intense anxiety and fear that often follow a disaster or other traumatic event can be especially troubling for children. Some may regress and demonstrate younger behaviors such as thumb sucking or bed wetting. Children may be more prone to nightmares and fear of sleeping alone. Performance in school may suffer. Other changes in behavior patterns may include throwing tantrums more frequently, or withdrawing and becoming more solitary.
2. There are several things parents and others who care for children can do to help alleviate the emotional consequences of trauma, including the following:
3. Spend more time with children and let them be more dependent on you during the months following the trauma - for example, allowing your child to cling to you more often than usual. Physical affection is very comforting to children who have experienced trauma.
4. Provide play experiences to help relieve tension. Younger children in particular may find it easier to share their ideas and feelings about the event through non-verbal activities such as drawing.
5. Encourage older children to speak with you, and with one another, about their thoughts and feelings. This helps reduce their confusion and anxiety related to the trauma. Respond to questions in terms they can comprehend. Reassure them repeatedly that you care about them and that you understand their fears and concerns.
6. Keep regular schedules for activities such as eating, playing and going to bed to help restore a sense of security and normalcy.

Professional Help

When should I seek professional help?

1. Some people are able to cope effectively with the emotional and physical demands brought about by a natural disaster or other traumatic experience by using their own support systems. It is not unusual, however, to find that serious problems persist and continue to interfere with daily living. For example, some may feel overwhelming nervousness or lingering sadness that adversely affects job performance and interpersonal relationships.
2. Individuals with prolonged reactions that disrupt their daily functioning for more than one month should consult with an experienced mental health professional trained in Critical Incident Stress Management and Post Traumatic Stress. These professionals work with individuals affected by trauma to help them find constructive ways of dealing with the traumatic impact and Post traumatic Stress Disorder.
3. With children, continual and aggressive emotional outbursts, serious problems at school, preoccupation with the traumatic event, continued and extreme withdrawal, and other signs of intense anxiety or emotional difficulties all point to the need for professional assistance. A qualified mental health professional can help such children and their parents understand and deal with thoughts, feelings and behaviors that result from trauma.

Critical Incident Stress Information Sheet

CRITICAL INCIDENT STRESS INFORMATION SHEET

You have experienced a CRITICAL INCIDENT. You may be experiencing unusually strong emotional reactions which have the potential to interfere with your ability to function now or sometime in the future. Even though the event may be over you may experience strong emotional or physical reactions now or sometime in the future. It is very common, in fact quite normal, for people to experience emotional aftershocks when they have participated in a traumatic event. **THESE ARE NORMAL REACTIONS TO AN ABNORMAL EVENT!!** Sometimes these emotional aftershocks (Stress Reactions) appear immediately. In some cases they are delayed a few hours or days, and sometimes they are postponed for weeks or months.

The signs and symptoms of stress may last a few days, a few weeks, or a few months. Occasionally the symptoms remain for longer periods depending upon the severity of the traumatic event. With understanding and support from loved ones, friends, and/or colleagues these reactions usually pass more quickly. Sometimes the traumatic event is so painful that professional assistance from a trained counselor is necessary. This in no way implies weakness or mental illness. It simply indicates that this particular event was too powerful for the individual to manage by themselves.

Listed on the next page are some of the more common signs and symptoms of stress.

PHYSICAL	COGNITIVE	EMOTIONAL	BEHAVIORAL	SPIRITUAL
fatigue	blaming someone	anxiety	change activity	Anger at God
nausea	confusion	guilt	change in speech patterns	Feeling distant from God
muscle tremors	poor attention	grief	withdrawal	Withdraw from place of worship
twitches	poor decisions	denial	emotional outbursts	Uncharacteristic religious involvement
chest pain*	raised/lowered alertness	emotional shock	suspiciousness	Sudden turn toward God
difficulty breathing*	poor concentration	fear	change in usual communications	Familiar faith practices seem empty (prayer, scriptures, hymns)
elevated BP*	memory problems	uncertainty	restlessness	Religious rituals seem empty (worship, communion)
thirst	hyper vigilance	emotion control problems	alcohol use increase	Belief that God is powerless
headaches	difficulty ID-ing familiar objects	depression	loss/increase in appetite	loss of meaning and purpose
visual problems	more awareness of surroundings	inappropriate emotions	acting out (antisocial behavior)	Sense of isolation (from God, religious community)
vomiting	less awareness of surroundings	apprehension	nonspecific body complaints	Questioning of one's basic beliefs
grinding teeth / (bruxism)	poor problem solving ability	feeling overwhelmed	hyper alert to environment	Anger at clergy
weakness	poor abstract thinking	intense anger	intensified startle reflex	Believing God is not in control
dizziness	loss of orientation	irritability	pacing	Believing God doesn't care
profuse sweating	impaired thinking	agitation	erratic movements	Belief that we have failed God
chills and/or sweating, etc.	nightmares	severe panic (rare)	increase/decrease in sexual drive	
shock symptoms*	flashbacks / intrusive images			



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 9: Understanding What CISM Is and the Roles It Plays in Different Situations

Understanding What CISM Is and the Roles It Plays in Different Situations

What is CISM?

Critical Incident Stress Management, or CISM, is an intervention protocol developed specifically for dealing with traumatic events. It is a formal, highly structured and professionally recognized process for helping those involved in a critical incident to share their experiences, vent emotions, learn about stress reactions and symptoms and given referral for further help if required. It is not psychotherapy. It is a confidential, voluntary and educative process, sometimes called 'psychological first aid'.

First developed for use with military combat veterans and then civilian first responders (police, fire, ambulance, emergency workers and disaster rescuers), it has now been adapted and used virtually everywhere there is a need to address traumatic impact in people's lives.

What IS CISM Intervention?

There are several types of **CISM interventions** that can be used, depending on the situation. Variations of these interventions can be used for groups, individuals, families and in the workplace.

Debriefing is a proactive intervention involving a group meeting or discussion about a particularly distressing critical incident. Based on core principles of crisis intervention, the CISM is designed to mitigate the impact of a critical incident and to assist the persons in recovery from the stress associated with the event. The CISM is facilitated by a specially trained team which includes professional and peer support personnel. Also called Critical Incident Stress Debriefing (CISD). Ideally it is conducted between 24 and 72 hours after the incident, but may be held later under exceptional circumstances.

Defusing is an intervention that is a shorter, less formal version of a debriefing. It generally lasts from 30 to 60 minutes, but may go longer and is best conducted within one to four hours after a critical incident. It is not usually conducted more than 12 hours after the incident. Like a debriefing, it is a confidential and voluntary opportunity to learn about stress, share reactions to an incident and vent emotions. The main purpose is to stabilize people affected by the incident so that they can return to their normal routines without unusual stress. Where appropriate, a formal debriefing also be required.

Grief and Loss Session is a structured group or individual session following a death and assists people in understanding their own grief reactions as well as creating a healthy atmosphere of openness and dialogue around the circumstances of the death.

Crisis Management Briefing is a large, homogeneous group intervention used before, during and after crisis to present facts, facilitate a brief, controlled discussion, Q & A and info on stress survival skills and/or other available support services. May be repeated as situation changes.

Critical Incident Adjustment Support provides multi-faceted humanitarian assistance to individual, families or groups for coping with the aftermath of an incident and overcoming the ongoing impact of a death or injury.

Pre-Crisis Education provides a foundation for CISM services. It includes incident awareness, crisis response strategies and develops stress management coping skills that can prevent major problems should an incident occur. It takes the form of an employee handbook, e-book and/or workshops and training seminars.

CISM Benefits for Business

Critical Incident Response Programs are inevitable in any type of business or industry. When you have a Critical Incident Stress Management program in place your company will manage the associated risks more effectively and inexpensively.

C.I.S.M. Programs serve to:

1. Meet OSHA requirements for General Duty Clause 29 USC 1900 5(a) and for S.E.M.P. compliance (Structured Emergency Response Program)
2. Provide Risk Management for adversarial situations and help decrease litigious responses
3. Help prevent job stress and burnout problems and worker injuries/errors and associated costs
4. Decrease bottom line expenses for employers. Studies have shown realized savings of \$7 for every \$1 spent on CISM.

5. Promote employee wellness and decrease utilization of sick time and benefits, up to 60%, in noted cases.
6. Stabilize crisis situations quickly & effectively when they do occur

***Examples of work related Critical Incidents:**

1. Accidents/Injuries/Deaths occurring while at work
2. Death of an employee off the job
3. Death of employee family member
4. Workplace violence
5. Robberies/ Crime
6. Downsizing/layoffs
7. Mergers
8. Chronic job related stress
9. Inadequate stress management skills
10. Natural Disasters: fires, floods, hurricanes, tornadoes

The National Safe Workplace Institute projects the cost to business at greater than \$4.3 billion annually as the result of loss productivity, worker error, sick time and job related injury due to the traumatic impact from these types of events.

CISM for First Responders and Military /Veteran

CISM for First Responders & Military Veterans



Critical Incident Stress Management Coaching for First Responders and Military Veterans

The most requests for referrals and training are from those working in the field of first response, such as police, firefighters, EMS and ambulance, medical emergency, rescue personnel and military veterans. By definition, their jobs expose them to critical incidents, very often on a daily basis. Many first responder departments participate in CISM services, both as peer facilitators and participants after an incident. Some departments, sadly, do not. Regardless, very often there is a need for follow-up and/or individual attention that is very confidential and cost-effective. There are services available to help the emergency services personnel and their families after a critical incident or traumatic event.

- CISM Coaching: Convenient individual, confidential telephone coaching for trauma recognition & resolution, job stress management strategies and professional growth & development.
- There are services available to help the military personnel and their families after they return from Iraq and Afghanistan or any other deployments and the same services are available for our veterans.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 10: Don't Forget Your Dispatchers

Don't Forget Your Dispatchers

Many dispatchers feel like they are the forgotten emergency worker. Because they are behind the phone lines and are seldom seen in the public eye or by their fire/EMS/law enforcement co-workers, they are often left with the stress of not being able to debrief stressful calls.

Things to Do to Support Your Dispatchers

If you are a Crisis Response Team member, here are some of the things you can do to support your dispatchers:

- Send them regular emails of encouragement
- Make sure they know you are available for debriefings or to just talk. You can do this by leaving your business cards, or by sending small tokens of appreciation attached to your contact information.
- Make routine visits to the dispatch center
- If you hold services, devotions, or special events make sure they are invited.
- During memorial services, remember their fallen.
- During annual award ceremonies, remember to include them for recipient awards.
- Find resources that would pertain to their type of stress and make sure they have access to it.
- Remember them during their special events such as births, deaths, or hospitalizations.
- Send cards and make special visits during holiday seasons.
- Thank them.

Dispatchers are a vital part of the emergency services response equation. Dispatchers are human with human responses and the need to deal appropriately with the stressors of working in this career. You, as a chaplain, could be the one link that makes them feel appreciated.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 11 Death Notification and Viewing Guidelines

Death Notification from a Crisis Response Precept

In order for a crisis response individual to do a death notification properly they must be able to approach the person or persons with the information. They must have the ability to encompass physical and mental proficiency and have the competence to deliver the message with skillfulness, sensitivity and compassion. The crisis response individual must be able to carry the message through to completion. This means you don't just tell the individual and leave, you stay until the person or persons' questions and needs have been answered to the best of your ability.

You have to remember you are bringing a message to a person who has no idea why you are there. The message you are bringing involves pain. The way you act (your behavior) will be seen as either a caring or uncaring, competent or incompetent person. Prepare before going to the where the individual or individuals will be at. With any death notifications know your information and follow the steps in the death notification guidelines. Before you approach the individual or individuals prepare yourself for their reactions each person will react differently to the message you are bringing to them. The news you are bringing to them has taken away their normal life and many different types of griefs will be experienced depending on how you deliver the message to them.

Throughout the time you are with the individual or individuals control yourself and your emotions. You need to control the situation as much as possible, try your best not to let the situation get out of hand. Let the individual or individuals get some control back to their lives. Help but let them make decisions. You can ask leading questions in a way that they are making the decisions. Instead of doing all the talking, you can listen to them to help determine what they need and how to help them get some control back to their lives. You must understand that sometimes no matter what you say and how good it sounds to you it is meaningless to the individual. Sometimes all you can do is just be there. You don't always have to talk sometimes silence is all that is needed. Don't make this about you do what they need, help them get control back in their lives as much as it can under the circumstances. Be sensitive to their needs and their expectations.

Kind words can go a long way, remember appropriate and accepted hugs (different people have different acceptance levels for hugs). In general there **are only three safe places to touch an individual: on the hand, on the shoulder and on the upper back.** Never touch or hug an individual against her or his will. Never touch or hug an individual against her or his verbally or non-verbally expressed discomfort. **Never touch or hug a part of an individual's body that is typically covered by a bathing suit, unless for a clear medical necessity.** Never put yourself in a position to be alone with an individual. Have someone with you or stay in clear sight of others. Always remember there is no such thing as an innocent **'HUG'** in a trauma situation.

Before doing anything remember you must be invited by the grieving person. Don't just start saying scripture or praying each must be done by invitation of the grieving person. You can ask them "would you like me pray with you," this opens the door but don't be affined if they say **"NO"** and if they say no don't pray. Remember compassion is not just feeling sympathy, but you actually do something to help the individual during the times of grieving. People may need rides, phone calls made, baby sitters secured and other individuals notified for them.

Notification Officer Responsibilities

Prompt notification of the next of kin cannot be stressed enough in the case of a line-of-duty death. No one wants to hear of the death of a loved one over a television or radio broadcast. That notification, most certainly, should be made in person by the Notification Officer, who is normally the Chief / Emergency Service Agency Director or his designee, and who is accompanied by the Chaplain. Notification by some other form of communication other than in person, say by telephone, is acceptable only in exceptional cases. Extreme emotional trauma is not uncommon when one is notified of the death of a loved one, and care should be taken to ensure that the next of kin are not alone at this time. The official notification serves a three-fold purpose: assures the next of kin that the information is valid; provides a knowledgeable source of information concerning the death; and assures the next of kin that assistance is available at a time when they need it most. The Notification Officer and Chaplain should be prepared to stay with the next of kin until a family member or friend arrives. As soon as is appropriate, they should determine if the family has a particular person, preferably a close family friend and department member, to act as Family Liaison Officer.

Prior to visiting the survivors, the Notification Officer should be familiar with the circumstances of the death and the personal data concerning the individual. Be sure the Notification Officer has official fire department identification in his/her possession. Also be absolutely certain of the status of the firefighter, check and double check with the hospital, and insist on an official pronouncement of death before proceeding. Clear the release of information with the Incident Commander to be certain your information is correct.

If the next of kin arrives on the scene, it is a good idea to provide them with some type of identification, such as an armband or something similar. Tell them that this is to assist the department in locating them if they are needed. This also is to alert emergency personnel to be careful of making comments when the next of kin are nearby.

After notification of the next of kin, the Public Information Officer, Emergency Command Center, and religious affiliations will need to be notified. The Chief / Emergency Service Agency Director will give instructions to dispatch the death announcement. Usually, station flags are lowered to half-staff, and the front of the station is draped in black bunting for seven days after the funeral. A news conference should be arranged to ensure that the media obtain the most factual information.

Six Principles of Notification

These five principles of notification should be used no matter who you are notifying.

- **In Person Always** do the notification in person, never by phone. For family members living out of the local area, arrange for authorities in that area to make notifications for you in person. Immediately find the firefighter's emergency contact information to know who needs to be notified in person. Usually, the spouse (or unmarried partner) and parents of the firefighter should be the first priority.
- **In Time and with Certainty** Before making notification, have positive identification of the deceased firefighter. Obviously, errors in identity can cause extreme trauma.
- **Never discuss** a fatality over the radio. This may result in a family member receiving the news before you can notify them in person. Quickly gather as much information about the incident as possible before making the notification. Survivors will have questions. Get to the survivors quickly. Don't let the media notify them first.
- **In Pairs** Have two people present to make the notification. If possible have CISM team member (s) to go with you. Survivors may experience severe emotional or physical reactions when they learn of the injury or death. Use the employee's emergency contact information to identify a uniformed member of the fire service to accompany the department's representative. It is helpful to have the department chaplain or friend of the firefighter's family there too. Take two vehicles, if at all possible. This will allow one or more of you to take the survivor to the hospital, if necessary, while the other team members stays with other survivors. Before you arrive, decide who will speak and what the person will say.
- **In Plain Language** Clearly identify yourself and present identification, then ask to come in. Notification should take place in a private setting. If you don't know the family member, make sure you are talking to the right person. Begin with "I have very bad news," or "I'm sorry to have to tell you this." Use the words "died" and "dead" rather than terms such as "passed away" so the message is absolutely clear. Speak slowly. Get to the point. Calmly answer the survivor's questions. It is fine to say, "I don't know" if you don't know. Use his or her name when referring to the firefighter, rather than saying "the body."
- **With Compassion** Allow survivors to express emotions. Do not try to talk them out of their grief. Accept your own emotions. It's if you cry during notifications, but stay calm. Never leave immediately after making a notification. Offer to help the survivor call friends or family members. Do not leave before someone else arrives. Do not take the firefighter's personal items with you when you make the notification. Tell the family they will receive them later. Most survivors will need some time before they feel able to deal with these items. Provide the survivors the opportunity to see the deceased firefighter, even if the body is badly disfigured. Offer to transport the family to where the firefighter is, and help prepare them for what they will see. Before leaving, write down important information, including the names and phone numbers of the department personnel who will work with the family. Have one member of the department stay with the family, unless the family declines.

The Do's of Death Notification

The Do's of DEATH NOTIFICATION Guidelines or Steps

1. **ALWAYS** make absolutely sure that the deceased has been properly identified via coroner's procedures. Even when it is believed that the body has been recognized, proper procedures **MUST** be followed. **NEVER NOTIFY NEXT OF KIN AWAY FROM THE ORIGINAL SCENE WITHOUT DIRECT PERMISSION OF THE CORONER AND AGENCY IN CHARGED OF SCENE.**
2. Wear your Crisis Response Team's ID.
3. Meet with an officer or coroner who is handling the case.
4. Acquire all the facts – who, what, where, when, and how.
5. Confirm who you will be telling.
6. Follow the officer in a separate car to the next of kin's address, or meet at a designated spot before going to the address.
7. At the door, introduce the officer and yourself and tell them that you need to come in.
8. Ask if there is anyone else at home. If yes, have them go and get them (expect small children).
9. Verify who you are talking to and ask all concerned to sit down.
10. Stay as close as you can to next of kin.
11. Ask: "Do you have a (son) named (John)? Is his DOB _____?"
12. Relate the message straight out using direct language: "I am sorry, but John died several hours ago."
13. Be prepared for a variety of reactions but try and keep them seated. Determine if they or the deceased have affiliation with a congregation; if so, immediate contact should be made with clergy from that congregation. If possible have an officer or another chaplain to try and make contact with their clergy/church so you can continue your conversation with the family. This might also tend to put the officer (fire, EMS, Rescue or law enforcement) in a light of one whom is there to help also.
14. Plan to stay a while. After the initial shock has subsided, the officer may return to duty.

15. Be honest about the situation but use discretion with facts. Some next of kin do not wish to know any further details, some wish to know all the facts. Be aware of possible confidentiality issues.
16. Find out if there will be an autopsy.
17. Allow them to grieve and talk.
18. Assist them with necessary phone calls.
19. Stay until closure is reached.
20. Leave them in the care of a relative, neighbor, friend or pastor at the residence.

The Don'ts of Death Notification

The DON'TS of DEATH NOTIFICATION Guidelines or Steps

1. Whatever you do - Do not show your prejudices! (a different religious believe than yours, same gender relationships, mixed racial or religious unions, or people living anyway that you may disapprove of). In order to do this job you must know yourself well enough to understand what relationships and situations make you uncomfortable. Remember you may not always know about these in advance so you have to be prepared
2. You must never presume to know how someone feels.
3. You must not feel the need to defend God, the doctors, the hospital, the nurses, the staff, the fire department, the police department, the chief, the deceased, yourself. This is not the time for that there will be time to help them with this later.
4. You must never abandon the hurting person to make it easier for yourself. You need to stay with the person or person until someone else arrives to take your place (like their pastor) or closure is reached.
5. This is not the time and place to use theological or religious language that they may not understand or may to them to be inappropriate now. Remember your theology may not be useful to them at this time. Some things not to say "It is the will of God." "They are in better place now," "God needed a new flower for His flower garden," be careful you do not do more harm by what you say.
6. Most crisis responders think they are exempt from grief reactions during death notifications. You must watch out for your own weaknesses. Just because you have taken classes, had training and are part of crisis response team does not mean you are on top of a death. You need to remember grief and death affects each person differently including you. Just because it does not affect you this time does not mean it would the next time.

What is important is that the crisis response person realizes that everyone will not fit into any neat package of how they are going to react. Be prepared for anything.

Next of Kin Notification

Next of Kin Notification

This notification process is multifaceted and can be implemented in the event of a serious injury or death to a member of the department. Implementation of stand-alone sections of this manual without activating the plan completely is acceptable. As a general rule, this process should be used in the event that a member would require transportation to the hospital, or die in the line of duty. Severity of injuries will aid in the decision of whether to implement this plan partially or completely with the final decision and responsibility resting with the Fire Chief, or an appointed designee.

The importance of the NEXT OF KIN NOTIFICATION cannot be over-emphasized. This process will set the tone for many difficult days, weeks, months and years for the surviving family. Sensitivity and compassion are imperative.

Family notification should be made as quickly as possible to avoid the family receiving a notification from another outside party. The media will employ many efforts to seek out the name of the fallen firefighter. We must use all necessary measures to protect the next of kin from unwanted media exposure.

For this reason, the Notification Team will need to assemble rapidly. The team should be at least two to three individuals with separate vehicles.

Before the Team Arrives

Before the team arrives at the residence, verify latest information, and decide who will speak and what will be said.

A word of warning, the family may strike out and blame the department for their loss. For this reason, the initial notification and how it is handled is extremely important.

Steps to Be Taken at the Residence

Steps to be taken at the residence 1-16 can be used with all; 17-31 usually deals with emergency service workers

1. It may become necessary to have paramedics standby if the people receiving the news are medically vulnerable. If this is done, have the apparatus standby near the residence, but not in view.
2. At the door, identify yourself and ask to come in. (Notification should take place in a private setting.)
3. When inside, ensure you are notifying the right person.
4. Get people in a comfortable or relaxed setting; the most important function of the person making the notification is to put all of the known basic facts into one sentence and tell them.
5. Make sure your message is absolutely clear and direct.
6. Begin with, "I have very bad news" or "I'm very sorry to tell you".
7. Let them know how it happened, "Your husband died responding to a fire", or "Bob was killed in a building collapse".
8. Allow the family to express their emotions. Do not try to talk them out of their grief.
9. This is a very sad time. Do not mask your own grief.
10. Provide only the facts you know, never speculate. If you cannot answer a question, find out the correct answer.
11. Phrases or words to avoid:
 - a. "I know how you feel."
 - b. "It was God's will."
 - c. "Life will go on."
 - d. "He would have wanted to go this way."
 - e. "Be brave."
 - f. "Passed away."
12. Use the victim's first name when referring to the firefighter.
13. Ask if the department can assist by notifying immediate family members (parents, brothers and sisters).

14. With the permission of the next of kin, the department can help setup a support system of clergy, relatives and friends.
15. Never leave immediately after making a notification.
16. Do not leave people without a support system. Wait for others to arrive.
17. Do not take the victim's personal items with you. Personal items (especially lockers) may need to be looked over and censored prior to allowing the family access to them. A station officer can review personal belongings within the department before they are released.
18. Ask the survivor(s) if they wish to see the deceased firefighter, even if the body is badly disfigured. People often have a need to see, touch and hold the deceased; otherwise they may be in denial. This is often very helpful in the family's grief process and gives a sense of finality.
19. If family members wish to see the firefighter, arrangements need to be made rapidly for the viewing. Sensitivity to the family is very important. Provide the best possible environment and avoid delays that heighten the family's anxiety.
20. Offer to transport the family to the location of the firefighter, and help prepare them for what they will see. If the family arrives on the scene, it is advisable to provide them with some type of identification, such as an armband. This will assist the department in locating them on the scene as well as to alert emergency personnel to be sensitive of making comments or statements with the family nearby.
21. If the family wants to drive their own car, have a member of the department accompany them.
22. If you transport the family, turn off your radio and/or advise dispatch that you are transporting the relatives and, if possible, switch to an alternate channel, or communicate by cell phone.
23. If the Department's Family Liaison Officer is not present at the notification; the family should be given the name prior to the team departing. Write down his or her telephone and pager numbers. If possible, this person should already be known by the family.
24. Have one member of the Department stay with the family, unless the family declines.
25. Advise the family that the Family Liaison Officer will contact them to assist with the necessary arrangements.

26. Ask if the Department can pick up any children who may be away at this time.
27. Advise the family of possible media calls. Unwanted media exposure will only add to the difficulty of this tragedy. Suggest that a friend of the family screen their incoming calls.
28. Assure the family that their wishes are the Department's number one concern.
29. Advise the family that an autopsy may be required to qualify for certain line-of-duty death benefits.
30. Ensure that the family understands that they do not have to make any immediate decisions regarding services, mortuary, wills, etc.
31. Before leaving the residence, try to set a time for a Family Planning Meeting. There are decisions that will need to be made by the family that will shape the planning process.

This meeting should take place within the first 24 hours.

Next of Kin Notification (For Emergency Services)

The team should be comprised of as many of the following:

1. The Chief / Emergency Service Agency Director, if possible, or highest ranking available Officer.
2. Family Liaison Officer
3. Firefighter friend of the family
4. CISM Team Leader
5. Department Chaplain

If the fallen emergency service worker's family resides far enough out of the area as to make your department's participation in the notification impractical, the local Department in the area should be notified to make a timely notification.

Another distinct possibility is that your Department could experience a loss of more than one member. This would require multiple notification teams to be assembled and deployed.

Department (agency) Notification of Other Emergency Service Workers

Departmental (agency) Notification

Equally important is the notification of your departmental personnel. In the event of death or serious injury to a member of the department, it will be very important to quickly distribute as much information as possible.

Depending on the nature of the incident, a department liaison (possibly the PIO) will be assigned. If this is an additional person(s) to the PIO, they will be working closely together to insure an efficient and accurate report is circulated.

1. It will be the Chief / Emergency Service Agency Director, or his designee's, responsibility to notify the appropriate city officials.
2. The Command/Administrative Staff, other department officers, which are not assigned to the "Next of Kin Notification Team" will assemble to prepare for departmental notifications. If this is an ongoing incident, manpower for notification may be limited. Prevention and Investigative Staff as well as non-uniformed administrative staff can also be of assistance.
3. Once initial information is gathered, the team will split up to begin notifications. One staff member will go to each station (if possible), and serve as that station's liaison and Communications Officer. The on duty station lieutenant can also serve in this capacity. The Communications Officer (Comm. Officer) will inform the station of what has transpired and explain the remainder of the notification process.
4. On duty personnel should call their family, without delay, to insure them of their own safety. This is especially important with an ongoing incident. Be cautious of saying too much early on to allow for proper notification of next of kin.
5. It then becomes the responsibility of the on duty personnel, with the help of the Comm. Officer, to begin telephoning off duty personnel to inform them of the incident. This will take place by contacting the off duty personnel assigned to that particular station on their next duty day. For example, (with a 24/48 schedule) if A-shift was on duty, they would contact B-shift and C-shift personnel assigned to that station for their next duty day.

6. In addition to the assigned station personnel, it is important to make arrangements to notify personnel who may be off duty and not assigned to a station. This could include personnel on vacation, exchange of time, sick leave or alternate duty.
7. The only exception to the above process would be the station directly involved in the incident. (i.e. the station that the injured or deceased member(s) was assigned to at the time of the incident) Station notifications for on and off duty personnel at the affected station will be handled by the Comm. Officer with the help of additional personnel from the command and administrative staff.
8. It is vital to maintain continuous communication between the family liaison officer, hospital liaison, and department liaison with the department liaison keeping the Comm. Officers updated. This will help to keep information fresh and accurate.
9. Off duty personnel should contact the station they are assigned to for their next duty day to receive follow-up information and updates. This will help to disperse the incoming calls.
10. The importance of Departmental Notification cannot be overemphasized. A death or serious injury is a true test of a department's grit and cohesion and open lines of communication will aid in everyone's ability to deal with this tragedy.

The Followings Pages 98 thru 110 PowerPoint for Death Notification/Viewing



Death Notification

- Following a traumatic event, it is necessary to notify members of the death of a loved one. This class will serve as a guideline for this difficult experience and training to appropriately serve in this capacity.
- While there are many elements involved within the death notification, it may helpful to break it down into several components or process.

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Preparing to Make the Death Notification

- Gathering the facts
- Assembling the notification team
- Defining individual roles and responsibilities
- Personal preparation
- ALWAYS make absolutely sure that the deceased has been properly identified via coroner's procedures.
- The coroner or medical examiner is absolutely responsible for determining the identity of the deceased.
- Even when it is believed that the body has been recognized, proper procedures MUST be followed.

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Death Notification Procedures

- NEVER NOTIFY NEXT OF KIN AWAY FROM THE ORIGINAL SCENE WITHOUT DIRECT PERMISSION OF THE CORONER.

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Death Notification Procedures

- Meet with an officer or coroner who is handling the case.
- Acquire all the facts – who, what, where, when, and how.
- Confirm who you will be telling.
- Find out if there will be an autopsy incase they ask.
- NOTIFY IN PERSON. DO NOT CALL!!!!
- DO NOT TAKE any possessions of the victim to the notification.
- Take someone with you (who is experienced in dealing with shock and/or trained in CPR/medical emergency). Next of kin have been known to suffer heart attacks when notified.

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Death Notification Procedures

- If a large group is to be notified, take a team with you to notify the next of kin. This will give you several individuals to work with the family.
- Talk about your reactions to the death with your team member(s) before the notification to enable you to better focus on the family when you arrive.
- Follow the officer in a separate car to the next of kin's address, or meet at a designated spot before going to the address.
- Wear your chaplain's ID. Always dress appropriately.

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Making the notification

- Introduction and Identification
- On-site considerations
- Making the notification
- At the door, introduce the officer and yourself and tell them that you need to come in.

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Death Notification Procedures

- Ask if there is anyone else at home. If yes, have them go and get them (expect small children).
- Verify who you are talking to and ask all concerned to sit down.
- BE SURE YOU have the nearest next of kin!
- NEVER NOTIFY A CHILD!!!!!!
- NEVER use a child as a translator!
- Stay as close as you can to next of kin.

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Death Notification Procedures

- Use the victim's name! Ask: "Do you have a (son) named (John)? Is his DOB _____?"
- DO NOT use expressions like "expired," "passed away," or "we've lost _____."
- Inform simply and directly with warmth and compassion. Relate the message straight out using direct language: "I am sorry, but John died several hours ago."

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Death Notification Procedures

- Sample Script: “I’m afraid I have some very bad news for you.” Pause a moment to allow them to “prepare.” “Name of individual has been involved in _____ and (s) he has died.” Pause again. “I’m so sorry that _____ died and you are having to face this.”
- Adding your condolence is very important because it expresses feelings rather than facts, and invites them to express their own.

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On-Scene Support after the Notification

- Preparing for an allowing for the reactions
- Protection for self and others
- Importance of presence
- Assessing and gathering support system
- Answering the questions
- Practical assistance
- When to leave

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Death Notification Procedures

- Be prepared for a variety of reactions but try and keep them seated.
- Understand that shock and denial are prominent feelings.
- The victims will be angry / Do not take it personally.
- It is critical that the notification team to be prepared for any reaction including silence. A mistake commonly made is to fill the silence with empty words that are meaningless and irrelevant.

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Death Notification Procedures

- Continue to use the words “dead” or “died” through ongoing conversation. Continue to use the victim’s name, not “body” or “the deceased.”
- Do not blame the victim in any way for what happen, even though he/she may have been fully or partially at fault.
- Do not discount feelings, theirs or yours! Intense reactions are normal. Expect fight, freezing, or other forms of regression.
- Be prepared incase someone goes into shock!

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Death Notification Procedures

- Expect some families to have emotional outbursts/do not let them strike you or other team members.
- Protect young children from upsetting sights.
- Remain calm and controlled/be gentle in words and actions.
- Plan to stay a while. After the initial shock has subsided, the officer may return to duty.

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Death Notification Procedures

- Be honest about the situation but use discretion with facts. Some next of kin do not wish to know any further details, some wish to know all the facts. Be aware of possible confidentiality issues.
- Provide accurate information.
- Do not lie/cover information/exaggerate/under report.
- Keep instructions simple.
- Use eye contact effectively.

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Death Notification Procedures

- Never give more than what is needed to answer the specific question.
- Answer the question without any elaboration and without personal opinions – being express verbally or non-verbally.
- Answer any questions to the best of your ability.
- Only the facts that you know for sure should be given!
- Allow them to grieve and talk.
- Join the survivors in their grief without being over-whelmed by it.
- Helpful remarks are simple, direct, validate, normalize, assure, empower, and express concern.

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Death Notification Procedures

- Employ “Intentional Listening” skills to “hear” what the concerns and what comments the person is expressing. Avoid going external to what the person is wanting to talk about.
- Do not add your own thoughts or “faith comment”, help them get in touch with their own personal “spiritual center.”
- Assist them with necessary phone calls.

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Death Notification Procedures

- Arrange for child care, call relatives, and employer. Provide them a list of the calls you make as they will have difficulty remembering what you have told them.
- Determine if they or the deceased have affiliation with a congregation; if so, immediate contact should be made with clergy from that congregation.
- If possible have an officer or another chaplain to try and make contact with their clergy/church so you can continue your conversation with the family. This might also tend to put the officer (fire, EMS, Rescue or law enforcement) in a light of one whom is there to help also.

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Death Notification Procedures

- When a child is killed and one parent is at home, notify that parent, then offer to take them to notify the other parent.
- Stay until closure is reached.
- DO NOT LEAVE SURIVVORS ALONE!!!!!!
- Leave them in the care of a relative, neighbor, friend or pastor at the residence. WAIT UNTIL THEY ARRIVE BEFORE LEAVING!!!!
- When leaving let them know you will check back the next day to see how they are doing.

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Body Identification and Viewing Procedures

- ▶ Caregivers may have to assist family members through the process of making an official body identification or viewing their loved one for the first time following a death.
- ▶ Caregivers can do a lot to help survivors through this difficult task that is critical to facing the reality of the death.



Body Identification and Viewing Procedures

- Pre-observation of the body
- Gathering essential information
- Determining the needs of the observer
- Supportive presence of others
- Preparing the observer
- If identification of the body is necessary, transport next of kin to and from morgue.
- Help prepare them by giving a physical description of the setting of the body.
- Monitor their reactions, be a supportive presence but at the same time give them some privacy.

Follow up after Notification Identification or Viewing

- ▶ Call and visit again the next day. If you can not visit at least call them. They may have more questions than when they were first notified.
- ▶ Let the survivor(s) know you care. The most beloved professionals and other first responders are those who are willing to share the pain of the loss.

Follow up after Notification Identification or Viewing

- Attend the funeral if at all possible. This will mean a great deal to the family and reinforces a positive image of your profession.
- Know exactly how to access immediate medical or mental health care should family members experience a crisis reaction that is beyond your response capability.

Once You Leave

- Self-care
- Taking it home
- Debriefing
- Follow-up
- Debrief your own personnel and your personal reactions with caring and qualified disaster mental health personnel on a frequent and regular basis.
- Don't try and carry the emotional pain all by yourself.
- Don't let your emotions and the stress you naturally experience in empathizing with the bereaved build into a problem for you.

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GUIDELINES FOR APPROPRIATE CONDUCT DURING THE

- DEATH NOTIFICATION
- BODY IDENTIFICATION
- AND VIEWING

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APPROPRIATE CONDUCT GUIDELINES

- When attempting to offer comfort to grieving individuals, it is important to keep in mind the overwhelming public concern regarding abuse and sexual conduct issues.
- Do not put yourself at risk. Remember that some public displays of affection are inappropriate and may cause discomfort and disruption.

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APPROPRIATE CONDUCT GUIDELINES

1. In general there are only three safe places to touch an individual: on the hand, on the shoulder and on the upper back.
2. Never touch an individual against her or his will.
3. Never touch an individual against her or his verbally or non-verbally expressed discomfort.
4. Never touch a part of an individual's body that is typically covered by a bathing suit, unless for a clear medical necessity.
5. Never put yourself in a position to be alone with an individual. Have someone with you or stay in clear sight of others.
6. Always remember there is no such thing as an innocent 'HUG' in a trauma situation.

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FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 12: Working with the Media

Primary Responsibility of CISM Team Member

WORKING WITH THE MEDIA INFORMATION

The primary responsibility of the CISM Team Member is to protect the privacy of the victims, survivors and emergency personnel while respecting the need of the media to do its job.

Crisis Response Team members may participate with the media utilizing the following guidelines:

1. **NEVER DISCUSS ANYTHING FROM A CRIME SCENE.**
2. Provide only basic facts.
3. Under no circumstances solicit funds or materials on behalf of anyone while in the role of a Crisis Response Team Member unless cleared by the Senior Crisis Response Team Leader or Officer in Charge.
4. May assist in certain situations by being a liaison for families and the media, such as determining family's wishes regarding release of pictures to media. Crisis Response Team members may obtain pictures, distribute them and return them to family, etc.
5. The Senior Crisis Response Team leader should always be contacted A.S.A.P. about any course of action taken in any event involving the media. **The on scene Crisis Response Team will work with the officer in charge of that scene and clear everything with that OIC before releasing anything to the media or anyone else.** If the Crisis Response Team member on scene is unsure or has any questions about what should be done the Senior Crisis Response Team leader should be contacted before doing anything.

If you are assigned the Duties of the PIO see next page

Public Information Officer (PIO) Responsibilities

Control the flow of information to the media. Under no circumstances should a press release be issued until next of kin notification can be made and the proper authority has been given to issue a news release.

Immediate Actions:

1. Collect all facts of the incident as it occurred.
2. Coordinate with the Communications dispatch supervisor (note: use a telephone and not the radio for this communication).
 - a. Advise them on the current situation.
 - b. Instruct them not to issue any statements to the media or anyone else.
 - c. Advise them that they will be receiving a written news release as soon as the next of kin have been notified.
3. Prepare a written press release for review by the Chief / Emergency Service Agency Director or his/her representative.
4. Coordinate all information releases with appropriate Agency, city, county, state or federal officials.
5. Release information on the fallen member only after the family has been notified.
6. Information to include fallen member's name, rank, age, family status and Agency highlights.
7. Set up a media area to provide updates.
8. Schedule and coordinate pre-press conference meetings.
9. Prepare Agency officials and elected officials for interviews and press conferences.
10. Schedule and coordinate press conferences.
11. Work with Family Liaison to schedule and coordinate family interviews.
12. Determine if the family wants to make a statement.
13. Establish a rumor control section that reports directly to the designated PIO.
14. Consider using LAST Team PIO services.

Public Information Officer (PIO) Duties

The PIO is accountable for all of the “official” press releases from the department and should be the only spokesperson for the department. The PIO needs to obtain the following information about the deceased; full name, address, date of birth, date of death, limited details as to cause of death, next of kin with address/telephone number, children’s names with address/telephone numbers, department info (rank, date joined etc), other information needed for dissemination will be, funeral home name, location, directions, date and times of viewing and Funeral Service, Memorial Service info, department telephone number for inquiries including time to be manned and Memorial Fund info. In addition, time of arrival and meeting place for out of town departments should be published for both the Memorial and Funeral Services. If the news media is persistent with inquiries, it may be advantageous to schedule formal press briefings with a written statement and time for questions.

It is helpful if you have a photograph of the deceased available at the press briefing.

See PIO Info attachment for suggested Do’s and Don’ts as well as tips for conducting press conferences.

11 Things All PIO Need to Know

PIO INFO

1. What the Public Wants to Know:

- * Timely and accurate facts Magnitude Immediacy
- * Duration Who, What, Where, When, Why, How

2. How to deliver information:

- * Short, concise, focused (12 year-old level)
- * Relevant Empathy/caring (put yourself in the public’s shoes)
- * Visuals that enhance communication (maps, graphics)

3. Examples of opening statements:

- * I want to share with you information pertaining to this incident...
- * My goal is to keep you informed with the latest, confirmed information regarding this incident...
- * I know that you are interested in...and I pledge to do everything I can to keep you informed...
- * I am here to share with you the knowledge and confidence I have in the first responders’ abilities to protect the citizens of our community during this tragic time...

4. Guidelines for answering questions:

1. Be prepared (90-95% of all questions can be anticipated)
2. Determine who will answer questions about specific subject matters
3. Listen (recognize the underlying issue)
4. Keep answers short and focused
5. Practice self- management (control your emotions)
6. Speak and act with integrity (tell the truth, follow up, you are speaking for your organization)

5. Avoiding the Spokesperson Pitfalls:

1. **Jargon:** Do: Define all technical terms
2. Don't: Use language that may not be understood
3. **Temper Do:** Remain calm. Use a question or an allegation to springboard into something positive Don't: Let your feelings interfere with your ability to communicate positively
4. **Attacks:** Do: Attack the issue Don't: Attack a person or organization

6. Promises:

1. Do: Promise only what you can deliver.
2. Don't: Make promises you can't keep or fail to follow up on promises

7. Speculation:

1. Do: Provide information on what is being done
2. Don't: Speculate about worst case scenarios.

8. Off the Record:

1. Do: Assume everything you say and do is part of the public record
2. Don't: Make side comments or "confidential" remarks

9. Question and Answer Reminders

1. Volume Enunciation/pronunciation
2. Pace/rhythm/pitch Facial expressions and eye contact
3. Posture Gestures Dress and grooming
4. Distractions watch out for "Uh," "Umm," and "You know."

10. Answering the Question

1. Make your point first.
2. Be concise, say it in 30 seconds
3. Be as brief as possible
4. Don't be evasive or try to fake it.
5. If you don't know, tell them you will try to find out.
6. Never say "no comment." If you can't answer the question for a particular reason, say so.
7. If the question is not in your area of expertise, don't try to answer it.
8. Don't answer a hypothetical question. Avoid speculating by rephrasing the question on your own terms.
9. Breakdown multipart questions and answer each part slowly and separately.

11. Media Patterns During a Crisis - Most media follow a typical pattern by:

1. Searching for background information
2. Dispatching reporter/resources to the scene (may include both local and national coverage)
3. Obtaining access to the site or spokesperson
4. Dramatizing the situation. Looking for the best way to get the most dramatic video or photography possible
5. Expecting an instant briefing, complete with written information
6. Finding immediate victims and/or people who have been affected/inconvenienced by the situation
7. Expecting YOU to panic
8. Sharing information and sometimes rumors amongst themselves





FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 13: Helping Children Cope with Trauma

After a Critical Incident or Disaster

If children experience a critical incident or disaster, the impact can be very stressful. How can we help the children to overcome this trauma? First, by understanding what a “critical incident” or “disaster” is in a child’s life. A critical incident is a devastating, catastrophic event for a child. It can be life-threatening, cause physical injury, or create a sense of fear or worry. It can disrupt a child’s home life, regular routines, or create feelings of isolation. It can also create flashbacks to other catastrophes or past stressful experiences. Secondly, by knowing that the child can directly experience a disaster such as a fire, earthquake, or school bus accident, or the child can identify with a critical incident happening to others. In either event, the impact can create stress that is manifested in many different ways.

Signs of Problems in Children

1. Signs of problems in children:

- a. Unusual complaints of illness without physical indicators to support an illness.
- b. Isolation from their family or friends.
- c. Excessive anxiety, neediness, clinging, or craving for attention.
- d. Changes in behavior.
- e. Difficulty concentrating or moving on to the next task.
- f. Crying or regressed behavior (thumb sucking) that is inappropriate for the child’s age.
- g. Lethargy, apathy, or a lack of emotional expression in the child.
- h. Lower performance in usual activities such as school, sports, play or home.

NOTE: Looking for signs of problems, means noticing behavior that is unusual or excessive for your child. As parents and care givers YOU KNOW THE CHILD BETTER than those who are not around them on daily basics!!

2. How parents can help their children:

- a. Know your own symptoms of stress as a result of the critical incident or disaster.
- b. Talk to a family member or close friend about your fears and concerns.
- c. Help your children express their experiences or feelings.

After Disaster

After any disaster, children are most afraid that the event will recur, that they or someone they love will be hurt or killed, that they may be separated from those they love and be left alone. Here are ways that you can help children cope with trauma:

1. Children under the age of 6 should not be exposed to the TV videotape coverage of the attacks, and the viewing time allowed older children should be limited.
2. Allow children to express their feelings about what has happened and share your feelings with them. Regressive behavior (i.e., thumb-sucking, night waking, and bed wetting) may occur in response to the trauma. Do not punish or scold the child for the behavior, but instead try to help him or her put their feelings into words.
3. Reassure children that they are now safe and that they are loved.
4. Be honest with children about what has occurred and provide facts about what happened. Children usually know when something is being sugar-coated.
5. Try to return yourself, your children, and your family to as normal a routine as possible. This helps provide a sense of security and safety.
6. Spend extra time with your child, especially doing something fun or relaxing for both of you.
7. Remember the importance of touch. A hug can reassure children that they are loved.
8. Review family safety procedures so children will feel prepared the next time an emergency situation occurs.
9. Talk with teachers, baby-sitters, daycare providers and others who may be with children so they understand how the child has been affected.
10. Watch for signs of repetitive play in which children re-enact all or part of the disaster. Although excessive re-enactment of a traumatic experience may be a warning sign, this behavior is an appropriate form of expression of emotions. Encourage a child who is not able to articulate their express their feelings through coloring, drawing, or painting.
11. Praise and recognize responsible behavior and reassure children that their feelings are normal in response to an abnormal situation.

Remember, it is critical to have children talk

Remember, it is critical to have children talk about their feelings.

Below are some specific suggestions to aid children in expressing themselves, and thus work through the myriad of emotions they are experiencing. It's normal for children to feel remorse, fear, anxiety, guilt, anger, etc. You should not be critical of them for expressing/demonstrating their emotions.

a. Talking Method:

- (1) Open Forum. Ask questions, make comments, express concerns, and basically talk about the traumatic event to help your children broach the subject.
- (2) Judgment. Allow your children to express themselves without any judgment from you.
- (3) Expectations. Allow your children to talk about their feelings without any expectations from you.
- (4) Listen. Don't interrupt your children as they express their feelings or emotions.

b. Drawing Method:

- (1) Picture. Ask your children to draw pictures about the critical incident or disaster. Then, ask your children to tell you what is in the picture or what the picture means.
- (2) Diary. Open a diary together with all the drawings by you and your children. Discuss the traumatic event and what "reconstruction" will be like or look like.
- (3) Closure. Provide closure to all art activities by having the children draw a picture of what "normalcy" will look like, or how they are stronger/improved because of the disaster. Always end on a positive up-beat note.

Help Children Cop with Loss and Fear

Fortify the Family Bond

1. Cultivate stability with lots of love, consistent discipline, and patience. Whether it's the death of a loved one, divorce of parents, a tragedy like 9/11, or continued terrorist threats, a stable home environment and honest talks with your kids can make all the difference. In the face of high stress or trauma, keep your home life as "normal" as possible. Let your kids know you love them and that you are always there for them. Minimize change as much as you can. Continue with usual bonding activities like reading at bedtime. Consider adding some pleasant surprises like your child's favorite dinner or a meal out at a kid-fun restaurant. Don't be tempted to let house rules slide into chaos in troubled times. Practice being consistent in your discipline, being authoritative -- not authoritarian -- yet flexible and understanding.
2. Consider carefully the imagery your children are exposed to. Limiting TV images of tragedy, especially for young ones. Instead, turn to less-intrusive media like radio. When kids are upset, encourage them to dwell on positive images and engage in comforting and familiar rituals. You might even begin some new traditions.

Spiritual Parenting

1. Answer grief and trauma with a secure foundation at home. Children experience grief whenever they suffer a significant loss. It could be anything from losing a parent due to sickness, accident or divorce, to losing a friend who moves away. And just like adults, children go through the stages of denial, anger, guilt, and acceptance. Parents need to understand that providing a sense of security at home serves children well during times of trauma. The growth and development of children needs to take place in an ambience of security. Only security will, more likely than not, provide an internal sense of stability that children will carry within them the rest of their lives. Make time to be with your child. Instead of grabbing a cup of coffee in the morning, sit down to cereal together and enjoy a chat over breakfast. Ask about your child's upcoming day and encourage them to talk freely. Show real interest in your child's life and the way she is reacting to a stressful situation. Above all, let your child know how much you love him.
2. Talk as a family and listen to your kids. Communication is more important than ever in difficult times. Children need to be provided with an understanding that is appropriate for their level of development. The younger the child, the simpler the explanation. Be available to answer all questions your child asks, or gently draw out information when your child seems disturbed by something. Let your child express fears and worries. And really listen. When responding to their questions remember the importance of being unbiased and reassuring.

Your answers are an opportunity to model tolerance and courage and to show that you are always there for your child. Demonstrating integrity when your children turn to you for guidance will teach your kids good character. It will also help them feel secure that they can turn to you for wisdom.

Confront Emotions

1. Face the facts and experience the emotions. A way to cope with fear is to face facts. The best way to deal with grief, psychologists say, is to experience it. Fear and grief are natural responses and they need to be accepted and experienced as such rather than magnified or avoided. A year after 9/11 or any loss or crisis, many children will have moved on, but some will not. How children react to trauma depends on their temperament, their caregivers' attunement to their needs, and the child's stage of development. Children's responses are likely to be influenced by the attitude in the home -- including the mindset of the people they love most. "If the family lives in fear, with hatred, without compassion, the children will likely see things filtered through their family's perceptions, even what they learn from the news or at school. Model the kind of emotional and spiritual health you would like to see in your child. When children are with you in the car, breathe deeply instead of venting anger verbally. Respond to a rude store clerk with kindness. Instead of reacting with fear to the Muslim world, check out a library book to learn about Islam together with your children.
2. Acknowledge fear and respond with confidence and trust. It is important to acknowledge your child's fears, whether it's the dark, the monster in the closet, or the threat of another terrorist attack. Helping your child put her fears into words is beneficial. The more a child can successfully communicate his feelings, the less threatening those feelings will feel. Try to communicate your calm control over the situation. Assure your child that you understand the problem and won't allow any harm to come. But try not to sugarcoat the dire or bluff your way through the inexplicable. Life holds many mysteries, and children need to learn early that we do not have answers for many questions. They need to learn that we need to live with trust about the unknown because it has always existed and always will.
3. Keep connected. As much as possible during a troubled time, connecting with others is important. Kids long for connections and cling to the comforting rhythm of the ordinary. When all else seems to be in upheaval, just sitting down to the dinner table as a family or keeping to your normal schedule of going to temple or church can anchor distressed minds and hearts. Teach your children the discipline of focusing on the positive; connecting with good thoughts will give them mental and spiritual strength.

4. Remember beauty and be grateful for life. That can be hard when senseless acts of violence and hatred take innocent lives, when an accident cuts short a life, or a horrific disease slowly steals a loved one. From time to time, horrible events that cannot be stopped take place, but that is the rare thing. In the end, there are many more beautiful experiences. Instill in your children an appreciation of beauty by helping them notice it. Go for a walk together and take turns pointing out the wondrous details of nature. Take a drive in the country at sunset and enjoy the glories of the changing colors across the landscape. From small miracles like changing leaves, dew on grass, grains of sand, or a newborn calf, your children will learn a large appreciation for the gift of life."

Despite its horrors, life is extraordinary and very, very beautiful. Its beauty is in front of us at every step, if we are willing to let ourselves see it and appreciate it.

Easing Your Child's Fears at School and Other Places

At school some older children were talking about frightening news events and my young son overheard them. Now he's afraid that there will be a war and that our family is in danger. How can I assure him that he's safe?

Throughout his childhood, your child will undoubtedly hear things that have the potential to scare him. It wouldn't be truthful to assure him there will never be a war. But let him know that if we go to war, it will only be to protect him and everyone else in our country. Tell your child that his parents, teachers, and everyone in the government will do everything possible to make sure that he and all other children are safe.

Explain how unlikely it is that your home would be chosen as a target. How you explain this to your child will depend on his age. An older child may understand that it is unlikely that anyone will want to target your home and that, statistically speaking, the chances of anything happening to him are slim. A child under the age of 6, however, may need to be reassured that his home and school are safe places, and that there are grownups there who will protect him.

Infants

Even though your baby can't discuss war doesn't mean she's completely immune from the emotional fallout. "Infants get their feelings from the way their parents and care givers treat them. If they hear worried tones or arguing, that has an effect. Body language is especially telling at this stage. This is a primary way an infant knows if mommy/daddy or the care giver is worried – and they will react to that.

Because infants are sensitive to touch, you may want to monitor your behavior. Are you watching the news while feeding baby? Holding or playing with her while you discuss current events with another adult in the home? Keep in mind that during these times, while you might not be addressing your baby directly, she's aware of your reactions to the conversation. Try to ensure that bonding activities like feeding and playing aren't clouded by your own anxiety or concerns about war.

In addition, be aware of the amount of time you spend watching TV with your baby in the room. While infants certainly can't understand the content of a newscast, the sights and sounds will still have an effect. Infants will orient to the picture on the TV and that it can have an emotional impact even if the child can't make sense of it.

For Kids Under 5

Despite your best efforts, it's quite likely that your child will be exposed to news of crime, tragedy, terrorism, and even war via the media. Even were you to keep your children at your side every second, it would be difficult to completely seal them off from hearing or seeing footage of such events. So, what can you do when your child spots raw news footage you'd rather they not see?

1. You shouldn't feel guilty about what happened. It's inevitable that your child will eventually see pictures or videos of terrorist attacks or war. While you have some control over what she sees in your home, you cannot control everything that she will see. In the weeks and months ahead there are likely to be more disturbing events.
2. What is important is that you help your child make sense out of what she has seen. If she's upset, encourage her to express her feelings. Ask her open-ended questions that encourage her to share her feelings and confusion. Say, for example: 'Could you tell me a little about the pictures or videos you saw?' You might also encourage her to make a drawing of what she saw and then talk about the drawing together."

In addition, as parents and care givers we should consider reducing their own media consumption to maintain as much control as possible over what children see. Turn instead to radio, newspapers, and Internet sites for your news.

A critical incident is something which is outside the usual range of a person's experience, which may overwhelm them and impair their ability to cope.

This can include:

- ☐ Involvement in or witnessing a major disaster such as a train crash
- ☐ Dealing with sudden or expected death
- ☐ Witnessing a traumatic incident
- ☐ Experiencing personal danger
 - Being physically threatened
- ☐ Being subject to verbal abuse
- ☐ Racial or sexual harassment
- ☐ Destruction or theft of property
- ☐ Being subject to bullying

CHILDREN

Children's perceptions of a disaster or critical incident seem to be determined by their parents' reactions. Children of preschool age believe that their parents can protect them from all danger. They believe they cannot survive without them. Children of this age fear being injured, lost, or abandoned. This fear increases when they find themselves alone or among strangers.

Adults should be aware that the fertile imagination of preschool children makes them more fearful. Preschool children affected by disasters or critical incidents experience three levels of anxiety:

1. Contagious Anxiety - This type of anxiety is transmitted by adults. It can be dealt with easily in difficult circumstances in a child who is not normally anxious by placing the child in calming surroundings.
2. True or Objective Anxiety - This is related to the capacity of the child to understand the danger that threatens him or her, and the child's tendency to create fantasies based on concrete events. The child is really afraid, because he or she does not know the causes and dangers felt to be threatening. It is useless to try to convince a child that thunder and lightning present no danger if the child does not understand their causes.
3. Profound Anxiety - Different from fear, this involves separation anxiety. The child fears losing those close to him or her. Everything seems dangerous. Fear is omnipresent.

One can act on the objective fears of children this age by taking into account their degree of maturity and type of imagination. Adults should help them live through the event and conquer their fears in order to prevent the fears from persisting into adulthood.

In general, young children express themselves little verbally. It is their behavior that reveals their anxiety and fear.

AGES 6-12

In all cases, the attitude of the family and the environment will have a great influence on the degree of anxiety of the child and on the mechanisms the child will use in the short and long term to cope with stressful situations or events.

The reaction may be immediate or delayed, brief or prolonged, intense or minimal. The child reacts with his or her present personality, at a given level of biological and emotional development. The nature and intensity of the reaction will be determined by the child's temperament as well as past experiences. Faced with the same stressful situation, two children may react in entirely different ways.

The reactions indicate the work of adaptation the child is doing to assimilate, cope with, and "accept" the painful situation.

The reactions most often expressed will translate in various ways the child's anxiety and his or her defenses against it, and will vary with the age of the child: fear, fright, sleep disturbance, nightmares, loss of appetite, aggressiveness, anger, refusal to go to school, behavioral problems, lack of interest in school, inability to concentrate in school or at play. Sometimes the difficulties only occur at school, or they only occur at home, with the child functioning adequately in the school environment.

An anxious child needs security and love above all. The role of the adult consists of helping the child psychologically and trying to understand him or her. Children can be spared much anxiety if we try to imagine their reaction to the event. Seeing through the child's eyes helps the adult to prepare the child emotionally to face events calmly and confidently as they occur.

Reactions can be prevented or lessened by clarifying the situation through open communication about the traumatic event or situation by those close to the child.

AGES 12-17

At this age, the motor skills of young people are often equal to those of adults. It is important for adolescents not to exceed their abilities and to realize that other aspects of their personalities are not as advanced as their physical development. The mental maturity of adolescents has no direct relation to their physical growth. Adults should not let themselves be influenced by appearances and expect an adolescent to have an adult mentality.

Adolescents have a great need to appear competent to the world around them. They struggle to gain independence from their families and are divided between a desire for increased responsibilities and a wish to return to the dependent role of childhood.

At the end of the latency period, young people have generally been able to find a coherent self-definition. Beyond the family and the school, peer groups have a favored place in their concerns and provide them with various means for validating themselves, which they absolutely must do.

A disaster or critical incident can have many repercussions on adolescents, depending on its impact on family, friends, and the environment. They show physical, emotional, cognitive, and behavioral reactions.

Studies have shown that the difficulties experienced by adolescents after a disaster are boredom and loneliness resulting from isolation from their peers because of the disturbance of their activities and the rehousing of their families.

Finally, after a disaster or critical incident, an adolescent may suddenly have to assume an adult role and cope with the need to become the head of the family and provide financial and emotional support to the other members of the family. The adolescent's way of envisioning his or her responsibilities obviously depends on a variety of factors, such as cultural background, age, religious views, education, personal equilibrium, and conception of life.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 14 - Helping the Elderly Community

Helping the Elderly Community During Times of Critical Incidents, Traumatic Events, Grieving and Loss

Elderly People – Our Senior Citizens

Elderly People – Our Senior Citizens

Elderly people represent their families' memories, their special link with culture and religion. They are autonomous members of the community who are able to define their own needs and ask for the services needed to meet them.

Most elderly people show strength and courage in disasters and critical incidents. Their life experience has enabled them to acquire the ability to recover.

For elderly people, the reactions shown may be a way of expressing their worry about the future and the loss of their physical health, role in the family, social contacts, and financial security.

With age, we observe greater vulnerability in persons who are alone (unmarried, widows and widowers, divorced) as well as extreme sensitivity to emotional losses and socioeconomic and cultural changes.

Without sufficient validation and lacking emotional links with other generations in the community, elderly people become vulnerable to the whole range of physical, psychological and social tensions.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 15: How to Help!

Things to Do to Help Others during Critical Incidents

1. Listen! Choose your words very carefully. Do not preach.
2. Be nonjudgmental and compassionate.
3. Provide correct information about the crisis being mindful of age and appropriate language and activities.
4. Be careful not to traumatize anyone by giving information that is too graphic.
5. Remember alternatives to conversation such as drawing pictures especially with young children.
6. Do not keep young children separated from parents for too long.
7. Encourage individuals to share their concerns with others or with trusted individuals.
8. Only promise what you will and can deliver.
9. Offer practical suggestions that can be used immediately.
10. Do not assume that you understand.
11. Be careful no to abuse the vulnerability and the spiritual needs of someone.
12. Remember that this is not a therapy session.
13. Always respect and honor a person's beliefs and practices even if you disagree with them.
14. Refrain from imposing your own beliefs and practices.

15. Remember that you do not have to have answers to spiritual questions. It is okay to say, "I don't know."
16. Honor confidentiality.
17. Communicate any concerns you might have to the Senior Team Leader.

Things Not To Say

1. I know just how you feel.
2. It could have been worse.
3. You can always get another pet/car/house.
4. It's best if you just stay busy.
5. You need to get on with your life.
6. The Lord gives and the Lord takes away.
7. Be happy for what you have left.
8. You'll get through it.
9. Like must go on you'll feel better before you know it.
10. I'm sure it will never happen again.
11. You'll feel better if you will stop crying.
12. Thank God you have other children.
13. Don't let it rob you of your joy.
14. Stay away from personal stories and comparisons.

Things that are OK to Say

1. How are you holding up?
2. These are normal reactions to a disaster.
3. It is understandable that you feel this way.
4. Where were you when it happen?
5. What was it like?
6. I cannot imagine how difficult this is for you.
7. You are not going crazy.
8. It wasn't your fault, you did the best you could.
9. Are you aware of the resources available to you?
10. Do you have any family or someone in the area I can call for you?
11. Do you have a church family?
12. Knowing how important God is at a time like this, could you tell me of your faith?
13. Things may never be the same, but they will get better, and you will feel better
14. May I pray for you?

Active Listening

.ACTIVE LISTENING

Workers listen most effectively when they take in information through their ears, eyes, and "extrasensory radar" to better understand the survivor's situation and needs. Some tips for listening are:

Allow silence - Silence gives the survivor time to reflect and become aware of feelings. Silence can prompt the survivor to elaborate. Simply "being with" the survivor and their experience is supportive.

Attend nonverbally - Eye contact, head nodding, caring facial expressions, and occasional "uh-huhs" let the survivor know that the worker is in tune with them.

Paraphrase - When the worker repeats portions of what the survivor has said, understanding, interest, and empathy are conveyed. Paraphrasing also checks for accuracy, clarifies misunderstandings, and lets the survivor know that he or she is being heard. Good lead-ins are: "So you are saying that . . ." or "I have heard you say that . . ."

Reflect feelings - The worker may notice that the survivor's tone of voice or nonverbal gestures suggests anger, sadness, or fear. Possible responses are, "You sound angry, scared etc., does that fit for you?" This helps the survivor identify and articulate his or her emotions.

Allow expression of emotions - Expressing intense emotions through tears or angry venting is an important part of healing; it often helps the survivor work through feelings so that he or she can better engage in constructive problem-solving. Workers should stay relaxed, breathe, and let the survivor know that it is OK to feel.

1. Rephrasing their questions back to them, shows you listening but at same time it helps you to make sure you understood them.
2. Give them your attention. Turn your body toward them. Look at their face and eyes when they are talking to you and when you are talking to them.
3. Be patient and kind. Don't speak until they are done talking and you've had time to think about your response. Show that what you have said matters to you and them.
4. Don't have to argue or disagree. You are not there to win a debate or to argue. You are there to be a friend and to help them get the things they need at that time. (Physical, emotional or spiritual)
5. The point is to allow them to talk. They have suffered not you. Allowing them to talk is a form of caring for them and helping them get back to a sense of normalcy.
6. Listening builds trust. Trust is a needed component for there to be a conversation. Sometimes it takes time for that to happen.
7. By listening and asking the right questions you can talk about the things that matter to them and to you without fear of manipulating them. Be kind, gentle, and respectful.
8. Decided which questions work best as you talk with them open or closed questions. It may be a mixture of both in order to get the answers you need.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 16: Care Tips for Survivors of Traumatic Events

Care Tips for Survivors of a Traumatic Event: What to Expect in Your Personal, Family, Work, and Financial Life

Coping and Surviving Violent and Traumatic Events

In one violent or traumatic moment the world can become unpredictable, dangerous and frightening. Injuries and accidents leave a traumatic impression on those injured and the people closest to them. Friends loved ones and close relationships may be lost. The aftermath of such events can be felt throughout an entire town and across the country. When tragedies are covered by the media, people everywhere can feel less safe. The impacts can be lasting and powerful for many who are involved. Emergency services, health care professionals, volunteers, families and other caring individuals can be traumatized by simply caring and helping those who are most injured or traumatized. It is normal for children, and even adults, to be sad, fearful, moody, upset, or even afraid to be alone for months after a trauma. Entire families are affected. Accidents, violence and other tragic events can affect a person or a community's entire way of life.

People respond differently in, during and after a crisis or a dangerous situation. But everyone is changed in ways they may not yet realize. Some feel the brunt of the experience immediately. Others appear to be strong or even numb to their experience. Helping everyone express their thoughts and feelings in a safe and open manner is one of the most positive things you can do. People who are friends or co-workers of those directly affected can be affected as well by what is known as secondary trauma.

It is important for people who are affected to share what they think and feel. A critical window of opportunity exists. Debriefing and discussing the events within 72 hours of an incident can help insure that people recover and don't end up becoming permanent psychological casualties. Both children and adults need to be shown that their feelings are accepted and understood, and not just told that people understand.

Feelings should not be judged or punished, but it is important that children understand the impact of negative behavior such as hurting others or neglecting responsibility.

Many people have a tendency to rise to the occasion during a crisis. After a traumatic episode, many people who were involved will attempt to help others. They do this to feel better and to ease the suffering of people they have compassion for. This can be a tremendous help, but it can also serve to hide from personal trauma and pain. People who experience the greatest trauma, and are busy helping everyone else, may end up becoming the greatest casualty of all.

Whatever the case, it is important to reassure people that they are safe. Others may feel a sense of blame - as if they should have known and acted to prevent the tragedy. The impact of a traumatic experience doesn't end when people heal, nor does it simply end with the passage of time. There are steps and things you can do that will help

For Survivors and Their Family

For Survivors and Their Family

- Take time to talk about the events, especially when your thoughts and feelings arise.
- Talk with people who care about you.
- Contact friends when you need support.
- Be with someone, or if needed, have someone stay with you a few hours a day.
- Maintain a normal schedule and routine as much as possible.
- It is important to spend extra time with children at bedtime.
- Recognize that many people will feel guilty and that listening is more important than telling people to stop feeling that way.

For Friends

For Friends

- Listen carefully. Ask if they need your advice. Don't take their anger or other feelings personally.
- Show that you understand and you care.
- Offer your assistance and a listening ear.
- Reassure them they are O.K. and just be with them.
- Don't avoid regular activities, or spending time with people impacted by traumatic events, but respect their need to be alone sometimes.

The Emotional Consequences

None of us are fully prepared to deal with violent or traumatic events. We feel devastated whenever there is a loss, belongings or property are destroyed, or there is serious injury or a loss of life. We are overwhelmed when our children, friends, co-workers and loved-ones experience tragic, dangerous or life threatening events. Older children tend to have many of the same symptoms of adults, while very young children tend to talk more about stomach aches and other pains. Symptoms may come and go. Many children can function very well in a crisis, but will eventually experience some symptoms due to exhaustion and the effect of ongoing stress. Recognizing and discussing our emotional and physical reactions, as well as ways to effectively cope will help.

Common Stress Reactions Following a Traumatic Event

- Anxiety, fear, panic or anger
- Depression, or worsening fear, panic or depression
- Emotional numbing
- Difficulty sleeping
- Waking throughout the night
- Nightmares or daydreaming
- Exhaustion or mental fatigue
- Change in appetite
- Disbelief or denial of events
- Reliving images of traumatic events
- Dwelling on the event
- Easily angered or upset
- Accident proneness or problems concentrating
- Increasing frustration or impatience
- A tendency to isolate or withdraw
- Neglecting or avoiding responsibilities
- Fear or reluctance to be open or talk
- Headaches, stomach aches, indigestion
- Fear or reluctance to express emotions
- Children return to bed wetting or messing pants
- Episodes or outbursts of crying or sadness
- Children acting younger or less responsible

Symptoms of Fear and Panic

- Rapid heart beat
- Rapid or faster breathing
- Indigestion or stomach aches
- Increased energy
- Dizziness or feeling faint
- Frightening images Afraid to be alone, or clinging
- Restlessness
- Weakness
- Racing thoughts or poor memory
- Frustration
- Sweating or perspiring
- Dwelling on fearful possibilities
- Irritability
- Trembling or "shaking"
- Problems performing tasks
- Avoidance
- Muscle tension

Symptoms of Depression

- Too much or too little sleep
- Significant increase or decrease in appetite
- Loss of interest or pleasure in others or most activities
- Feeling discouraged or worthless "
- A significant drop in performance in school or at work
- Suicidal thoughts, feelings or self-harming behavior
- Fatigue or loss of energy most of the time
- Restlessness, fidgeting or pacing
- Uncontrolled outbursts of crying
- Feeling sad, helpless or hopeless most of the time
- Episodes of fear, tension or anxiety
- Frustration, irritability, emotional outbursts
- Repeated physical complaints without pain in arms or legs
- Abuse or increased use of alcohol or drugs

Steps to take if Symptoms are Significant

Steps You Need to take if Symptoms are Significant

- Symptoms are usually significant when they interfere with usual activities, change behavior in significant ways, or they persist for more than two weeks.
- Seek medical advice for any physical symptoms that are new, especially if you are having health problems and have not had a medical evaluation for these symptoms.
- If you are unable to escape feelings of panic, guilt, depression or stress, or these symptoms are extreme or prolonged, contact a mental health provider for advice.
- Seek help or advice from a qualified mental health professional if a child or an adult begins thinking or feeling guilty or suicidal.

Helpful Hints to Recovery

- **Set a Healthy Example:** Taking care of yourself is a very important part of helping others. It sets a good example, gives other people permission to take care of themselves and keeps you healthy and well.
- **Physical Activity:** Maintaining regular exercise greatly increases resistance to the stress reactions associated with traumatic events and relieves the immediate symptoms of stress.
- **Nutrition:** Health studies have shown that by moderating fats, sugar, caffeine, alcohol and smoking you can greatly improve your resistance to stress reactions and promote recovery.
- **Adequate Sleep:** Try not to nap when you would normally be awake. Go to bed when you are sleepy and when you would normally sleep. Wake up when you normally would and try to avoid sleeping in. It is important to keep a regular sleep schedule as much of as possible.
- **Time Management:** Try to schedule your time and meet as many of your usual commitments and activities as possible, don't withdraw for an extended period of time. Avoid over extending yourself in your work or new commitments for long periods. Repeatedly over extending yourself is not healthy if you are doing it to avoid dealing with the emotional impact of the flood.
- **Talk It Out:** Reaching out to friends or potential friends as a means of to establish supportive relationships can be a tremendous help. Talk about your feelings and stress reaction with someone who is a good listener, may have experience dealing with similar problems, and is most of all, supportive.

- **Remember Breathing:** People under stress or experiencing panic unconsciously change their pattern of breathing. When you feel stressed or panicked, take 4 to 5 slow deep breaths that let you inhale and exhale completely. Relax your muscles as you exhale.
- **Be Assertive:** Use healthy and effective communication skills that will let people know what you need or want. When you deliberately ask for what you need, you are less likely to resort to blaming, becoming frustrated or disappointed when people don't know what you need.
- **Take Time To Be Alone:** Try to spend some time or plan some time to be by yourself. Sometimes it helps to imagine quiet places or pleasurable activities like vacations, relaxing or enjoying a hobby.
- **Forgiveness:** During and following a crisis people can't remember or do everything they would like. Forgiving yourself and expressing forgiveness to others is a key to recovery.
- **Be Open To Change Or Obtaining Assistance:** If your behavior or emotional state are significantly changed by a traumatic event and does not improve after a significant time (usually two weeks), seek help from a qualified mental health professional.
- **Help Others:** Helping others can be a good way to feel better and recover. We all feel a need to be useful and to help others, but don't help others all the time to avoid dealing with your own feelings.
- **Play:** Spend time in a few simple activities that are fun or entertaining. Grieving takes time.

Things to Remember When Try to Understand Disaster Events

- No one who sees a disaster is untouched by it.
- It is normal to feel anxious about you and your family's safety.
- Profound sadness, grief, and anger are normal reactions to an abnormal event.
- Acknowledging our feelings helps us recover.
- Focusing on our strengths and abilities will help you to heal.
- Accepting help from community programs and resources is healthy.
- We each have different needs and different ways of coping.
- It is common to want to strike back at people who have caused great pain. However, nothing good is accomplished by hateful language or actions.

Signs that Adults Need Stress Management

- Difficulty communicating thoughts
- Difficulty sleeping
- Difficulty maintaining balance
- Easily frustrated
- Increased use of drugs/alcohol
- Limited attention span
- Poor work performance
- Headaches/stomach problems
- Tunnel vision/muffled hearing
- Colds or flu-like symptoms.
- Disorientation or confusion
- Difficulty concentrating
- Reluctance to leave home
- Depression, sadness
- Feelings of hopelessness
- Mood-swings
- Crying easily
- Overwhelming guilt and self-doubt
- Fear of crowds, strangers, or being alone

Ways to Ease the Stress

- Talk with someone about your feelings– anger, sorrow, and other emotions-- even though it may be difficult.
- Don't hold yourself responsible for the disastrous event or be frustrated because you feel that you cannot help directly in the rescue work.
- Take steps to promote your own physical and emotional healing by staying active in your daily life patterns or by adjusting them. This healthy outlook will help yourself and your family. (i.e. healthy eating, rest, exercise, relaxation, meditation.)
- Maintain a normal household and daily routine, limiting demanding responsibilities of yourself and your family.
- Spend time with family and friends.
- Participate in memorials, rituals, and use of symbols as a way to express feelings.
- Use existing supports groups of family, friends, and church.
- Establish a family emergency plan. Feeling that there is something that you can do can be very comforting.

When to Seek Help

*** When to Seek Help:** If self-help strategies are not helping or you find that you are using drugs/alcohol in order to cope, you may wish to seek outside or professional assistance with your stress symptoms.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 17: How to Deal with Grief

What is Grief?

Grief is the normal response of sorrow, emotion, and confusion that comes from losing someone or something important to you. It is a natural part of life. Grief is a typical reaction to death, divorce, job loss, a move away from family and friends, or loss of good health due to illness.

How does Grief Feel?

Just after a death or loss, you may feel empty and numb, as if you are in shock. You may notice physical changes such as trembling, nausea, trouble breathing, muscle weakness, dry mouth, or trouble sleeping and eating.

You may become angry - at a situation, a particular person, or just angry in general. Almost everyone in grief also experiences guilt. Guilt is often expressed as "I could have, I should have, and I wish I would have" statements.

People in grief may have strange dreams or nightmares, be absent-minded, withdraw socially, or lack the desire to return to work. While these feelings and behaviors are normal during grief, they will pass

How does grief differ from depression?

Depression is more than a feeling of grief after losing someone or something you love. Clinical depression is a whole body disorder. It can take over the way you think and feel. Symptoms of depression include:

- A sad, anxious, or "empty" mood that won't go away;
- Loss of interest in what you used to enjoy;
- Low energy, fatigue, feeling "slowed down;"
- Changes in sleep patterns;
- Loss of appetite, weight loss, or weight gain;
- Trouble concentrating, remembering, or making decisions;
- Feeling hopeless or gloomy;
- Feeling guilty, worthless, or helpless;
- Thoughts of death or suicide or a suicide attempt; and
- Recurring aches and pains that don't respond to treatment.

How long does grief last?

Grief lasts as long as it takes you to accept and learn to live with your loss. For some people, grief lasts a few months. For others, grieving may take years.

The length of time spent grieving is different for each person. There are many reasons for the differences, including personality, health, coping style, culture, family background, and life experiences. The time spent grieving also depends on your relationship with the person lost and how prepared you were for the loss.

How will I know when I'm done grieving?

Symptoms Of Grief and Loss

- | | |
|-------------|---------------|
| • Denial | • Humiliation |
| • Yearning | • Shock |
| • Disbelief | • Despair |
| • Anger | • Sadness |
| • Confusion | • Guilt |

Every person who experiences a death or other loss must complete a four-step grieving process:

- (1) Denial and isolation -
- (2) Anger - Work through and feel the physical and emotional pain of grief;
- (3) Bargaining -
- (4) Depression - Adjust to living in a world without the person or item lost; and
- (5) Acceptance - Move on with life.

The five steps of grieving

The grieving process is over only when a person completes the five steps.

These feelings are normal and are common reactions to loss. You may not be prepared for the intensity and duration of your emotions or how swiftly your moods may change. You may even begin to doubt the stability of your mental health. It is important to be reassured that these feelings are healthy and appropriate. These feelings and expressions of powerful emotions help you come to terms with your loss.

Remember, it takes time to fully absorb the impact of a major loss. You never stop missing a friend or loved one, but the pain eases after time and this allows you to go on with your life.

Mourning a love one

It is not easy to cope after a loved one dies. You will mourn and grieve. Mourning is the natural process you go through to accept a major loss.

It is very important to allow yourself to express your feelings. Often, death is a subject that is avoided, ignored or denied. At first it may seem helpful to separate yourself from the pain or ignore your feelings, but you cannot avoid grieving forever. Someday those buried feelings will need to be resolved or they may cause physical or emotional illness.

Many people report physical symptoms that accompany grief. Stomach pain, loss of appetite, intestinal upsets, sleep disturbances and loss of energy are all common symptoms of acute grief. Of all life's stresses, mourning can seriously test your natural defense systems. Existing illnesses may worsen or new conditions may develop.

Profound emotional reactions may occur. These reactions include anxiety attacks, chronic fatigue, depression and thoughts of suicide. An obsession with the deceased is also a common reaction to death.

Dealing with a major loss

The death of a loved one or close friend is always difficult. Your reactions are influenced by the circumstances of a death, particularly when it is sudden or accidental. Your reactions also are influenced by your relationship with the person who died.

- A child's death creates an overwhelming sense of injustice for lost potential, unfulfilled dreams and senseless suffering. Parents may feel responsible for the child's death, no matter how irrational that may seem. Parents may also feel that they have lost a vital part of their own identity. Their reason for living may seem shattered.
- A spouse's death is very traumatic. In addition to the severe emotional shock, the death may cause a potential financial crisis if the spouse was the family's main income source. The death may necessitate major social adjustments requiring the surviving spouse to parent alone, adjust to single life and maybe even return to work.
- Elderly people may be especially vulnerable when they lose a spouse because it means losing a lifetime of shared experiences. At this time, feelings of loneliness may be compounded by the death of close friends.
- A loss due to suicide or tragedy can be one of the most difficult losses to bear. It may leave the survivors with a tremendous burden of guilt, anger and shame. They may even feel responsible for the death. Often, survivors benefit from professional advice to cope with this devastating experience. Seeking counseling as a family unit during the first weeks after the death is particularly beneficial and advisable.

Living with grief

Coping with death is vital to your mental health. It is only natural to experience grief when a loved one dies. The best thing you can do is allow yourself to grieve. There are many ways to cope effectively with your pain.

- **Seek out caring people.** Find relatives and friends who can understand your feelings of loss. Join support groups with others who are experiencing similar losses.
- **Express your feelings.** Tell others how you are feeling; it will help you to work through the grieving process.
- **Take care of your health.** Maintain regular contact with your family physician and be sure to eat well and get plenty of rest. You should not sleep more than 10 hours a day without your doctors approval. Be aware of the danger of developing a dependence on medication or alcohol to deal with your grief.
- **Accept that life is for the living.** It takes effort to begin to live again in the present and not dwell on the past.
- **Postpone major life changes.** Try to hold off on making any major changes, such as moving, remarrying, changing jobs or having another child. You should give yourself time to adjust to your loss.
- **Be patient.** It can take months or even years to absorb a major loss and accept your changed life.
- **Seek outside help when necessary.** If your grief seems like it is too much to bear, seek professional assistance to help come to terms with your loss and work through your grief. It's a sign of strength, not weakness, to seek help.

Helping others grieve

If someone you care about has lost a loved one, you can help them through the grieving process.

- **Share the sorrow.** Allow them, even encourage, them to talk about their feelings of loss and share memories of the deceased. Listen. Don't pressure.
- **Don't offer false comfort.** It doesn't help the grieving person when you say "it was for the best" or "you'll get over it in time." Instead, offer a simple expression of sorrow and take time to listen.
- **Offer practical help.** Baby-sitting, cooking and running errands are all ways to help someone who is in the midst of grieving. Just having someone around who is generous but not intrusive can help.
- **Be patient.** Remember that it can take a long time to recover from a major loss. Make yourself available to talk.
- **Encourage professional help when necessary.** Don't hesitate to recommend professional help when you feel someone is experiencing too much pain to cope alone. You might make a list of professionals who specialize in grief, trauma or major life transitions.

Helping Children Grieve

Children who experience a major loss may grieve differently than adults. A parent's death can be particularly difficult for small children, affecting their sense of security or survival. Often, they are confused about the changes they see taking place around them, particularly if well-meaning adults try to protect them from the truth or from their surviving parent's display of grief.

Limited understanding and an inability to express feelings puts very young children at a special disadvantage. Young children may revert to earlier behaviors (such as bed-wetting), ask questions about the deceased that seem insensitive, invent games about dying or pretend that the death never happened. Coping with a child's grief puts added strain on a bereaved parent. However, angry outbursts or criticism by a parent will only deepen a child's anxiety and delay recovery. Instead, talk honestly with children and in terms they can understand. Take extra time to talk with them about death and the person who has died. Help them to discuss and talk about their feelings and remember that they are looking to adults for healthy behavior.

Looking to the Future

Remember, with support, patience and effort, you will survive grief. Someday the pain will lessen, leaving you with cherished memories of your loved one.

If you recently experienced a death or other loss, these feelings may be part of a normal grief reaction. But if these feelings persist with no lifting mood, ask for help.

Where can I Find Help?

The following list of organizations and web sites provides information and support for coping with grief:

Counseling Family Services	704-735-0908
Loy Chris MA LPA NCP	704-732-9354
Agape Center for Counseling & Consultation PC	704-489-1897
New Directions Counseling	704-735-0255
Piedmont Family Services	704-732-0035
Dr. Tina S. Brookes	828-438-7295

Although most adults' associate grief with the death of someone loved, this is not the only reason we grieve. It is important to note that grief follows closely behind any traumatic event; such as, a divorce, a life-threatening or debilitating illness or injury, an abusive relationship. The list of grief-generating experiences is endless.

The Five Stages of Grief are: denial and isolation, anger, bargaining, depression, and acceptance. Many people believe that these stages, if followed in succession, will resolve grief.

Unfortunately, for those of us who have experienced a loss or emotional trauma, this is not necessarily true. Grief is not just the emotions and feelings we have during or immediately following a loss. Grief has no set time pattern nor does it ever go away completely. It can, however, be an instrument of learning about love, life, and living. Grief can have a positive or negative impact on our lives. Grief is about choices. We can choose to journey through our grief and, at the end of our journey, emerge a better person for having experienced grief (positive) or we can stuff it within are very being, try to ignore it, and fail to receive its rewards (negative).

We must also keep in mind that everyone responds to grief differently. No two people will react to a shared grief experience in the same way. Although we may experience similar feelings and emotions with other family members, friends, and co-workers, many factors will determine the end result of our personal reactions to trauma and grief; namely, how the loss occurred, our emotional involvement with the person or event, our previous loss experiences, and what lessons we learned as children for coping with emotions and feelings. Please bear in mind that your individual responses to grief are both normal and natural and not a sign of weakness or the inability to carry out your daily responsibilities.

The grieving process is very necessary to heal the mind and spirit. Grief involves the *whole* person; the physical, mental, emotional as well as the spiritual self. It is not governed by a set of rules that, if followed consecutively, will erase the grief. In other words, you do not deal with one emotion or feeling and move on to the next. You do not deal with anger or sorrow for a few days and check it off your list. Rather, you flow back and forth between some of the same—or previously unacknowledged—emotions and feelings until, after many months or even years, you come to the end of your grief journey. The intensity and duration of your individual grieving process is comparative to the loss. This means that the more emotionally involved you are with the person or event, the deeper the emotional trauma and grief.

Hopefully you will learn that grief is very diversified. There are many facets of grief: the reasons that we grieve, our reactions to loss and trauma, the impact grief can have on you both personally and professionally as well as healing grief. During the grief process there are many things that can debilitate the human spirit and prevent us from enjoying life to the fullest. We need to help others to the realization that unpleasant events can, and often do, have a very negative effect on your emotional health and physical well-being.

No one should walk the road of grief alone. Yet every day, adults and children must cope with the pain of grief by themselves. Grief can be a very frightening and overwhelming experience filled with an array of emotions and feelings. This article will explore our reactions to grief as well as offer advice for coping with day-to-day struggles.

Grief affects us physically, mentally, emotionally, and spiritually. Grief is similar to a roller coaster ride in the dark. We never know from one moment to the next which reaction or combination of reactions will overpower us. Following are some (certainly not all) of the numerous grief reactions you may experience:

Physical reactions – sighing, shortness of breath, a change in eating habits, weight loss or gain, headaches, loss of energy, apathy, illness, gastrointestinal problems, sleeplessness

Mental or spiritual reactions - selfishness or egocentric focus, distracted thought patterns, short attention span, auditory/visual hallucinations (we think we hear or see the person who has died), regressed actions (may become childlike or more dependent on others), suicidal thoughts, loss of interest in socializing, overprotection of our children (especially when a child has died), turning away from one's faith or seeking comfort in spiritual healing

Emotional – depression, fear, resentment, powerlessness, numbness, withdrawal, blaming, frustration, anger, guilt

Each person will react to grief and loss differently. Your individual reactions are defined by previous experiences as well as your coping skills. You may feel, at times, as if you are functioning on automatic pilot or are dazed. Your senses may seem numb. You may cry uncontrollably, be short tempered, or be unable to cope with simple tasks. There may be occasions when you feel as if your insides have been ripped out. The pain you feel physically as well as emotionally seems never ending. You believe you will never be happy again.

Guilt and anger play major roles in grieving. They are normal, healthy reactions. You may feel guilty for unkind actions or words spoken in haste towards the person who has died. You may regret the opportunities you've missed to spend quality time with them before their death. You may be angry due to the circumstances surrounding their death (suicide, homicide, etc.). You may find that you are angry with them for dying and leaving you alone. Discontent within a family, either during or following the funeral, may cause undue emotional stress. Nonetheless, guilt and anger can be the driving forces behind getting out of bed in the morning and living another day.

It is not wrong to feel guilt or anger; however, you do not use them as an excuse to inflict pain on others or yourself.

Grieve in your own way and in your own time. I recommend keeping a journal or diary. Write down your thoughts and feelings on a regular basis. This will help you to see how you are progressing in your grief. Compose letters to your loved one or list simple accomplishments you've mastered; such as, doing chores around the house, participating in social activities with friends, or just enjoying the glories of nature. We become so burdened with grief that we forget to enjoy the simple things in life. Laughter is good for healing grief as well. I do not expect you to laugh and reinvest in life and living quickly. This will take time; whatever time YOU need. If you are willing to do your grief work, I promise that your pain will subside and you will once again be happy.

You will never be the same person you were before your grief began because you have had a life-altering experience. Yet, grief has the power to help you become a more warm, loving, and caring person.

Read articles and books on grief. A bereavement support group or speaking with a minister, priest, or rabbi can also be of help. Avoid indulging in alcohol or addictive drugs. They may temporarily dull your pain but they will do nothing to heal your grief. Exercise and eat healthy. If you are having trouble sleeping, drink a glass of warm milk or listen to soothing music.

If you have a special friend who is willing to walk with you through grief hold their hand tightly. They will guide you around the obstacles in your path. They will surround you with love and lift you up when your days are long and lonely. This special friend can reaffirm your simple achievements and acknowledge that you are making progress in healing.

It goes without saying that emergency response professionals must be focused and mentally alert at all times. However, when you have experienced a recent personal or professional trauma or are grieving, you may find that your ability to concentrate is influenced by your grief. This is not to say that you are unable to perform your duties in a professional manner, but rather, you are suffering the side effects of grief. For example, if a family member has recently died following a motor vehicle accident, a similar call while on duty may trigger thoughts and feelings associated with your grief. Take this in stride.

Yes, you may have to temporarily suppress your grief to perform your duties, but once your job is complete, deal with whatever you are feeling. Do not try to shut out grief. Grief is necessary to heal our suffering and pain.

The road to healing grief is filled with many obstacles and detours. Family and friends may find life just as challenging and painful as you. Keep in mind that no two people will deal with feelings and emotions in the same manner.

Do not be surprised to find that some of your acquaintances may tire of your seemingly long journey through grief. People expect you to be over “it” (grief) in a short period. Do not plan to have your grief healed by a certain date (i.e., six months, the anniversary of the death, etc.). Take whatever time you need. It is important for you to acknowledge ALL your feelings. Do not feel ashamed or weak as the result of your emotions or expressions of grief. Seek out someone who will walk with you and guide you through your journey. Take hold of their strong hand and lean on them. Let them help you survive your grief.

1. Guilt is a common by-product of tragedy.
2. Most guilt is not based on fact, but people have it anyway.
3. Most guilt is associated with people's fantasies of power and control.
4. It is very uncomfortable not to be in total control of one's world.
5. Mentally they are trying to "under" the terrible thing which happened.
6. Common statements are: "If only...", "I should have...", "I could have...", and "If it wasn't for me, this would have never happen."
7. Sometimes severe guilt can lead to suicidal thinking or action.
8. Do not attempt to argue the person out of guilt.
9. Do not tell people they really "should not feel that way."
10. Do not use platitudes like "You did the best you could."
11. Listen carefully/acknowledge the feeling/accept (not agree with) the feeling.
12. It is better to say something like, "I know you are feeling pretty bad about this situation. It hurts when something goes wrong. Let's talk a bit more about this."
13. Allow people to tell their whole story/allow them to repeat.
14. Repetition of the story is indicative of efforts to find reason/meaning or an alternate outcome.
15. Help the person formulate cognitive reframes ("I hear you saying that you believe this whole thing is your fault. Yet most of your buddies over there told me earlier that you actually prevented the situation from getting worse. How is it that you and they see the same actions so differently?")
16. If guilt is realistic ("I made a mistake and my friend got hurt."), then you need to acknowledge that a mistake did happen. Shift from the content (mistake) to intent (what the person wanted to happen). Typically, people conclude that there was no malice and therefore their actions are simply a mistake although very awful.
17. Once the content-intent shift has occurred, it is important to move onto what the person can learn from the tragedy.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 18: Stress Management

Stress Management Coping with Everyday Life

Stress is a natural part of life. Every day there are responsibilities, obligations and pressures that change and challenge you. In response to these daily strains your body automatically increases blood pressure, heart rate, respiration, metabolism, and blood flow to muscles. However, when this natural response is prolonged or triggered too often without sufficient adjustments to counter its effects, it can threaten your health and well-being. Therefore, it is essential that you learn to cope with these natural responses in order to avoid physical and/or emotional problems.

Am I Suffering from Stress and Tension?

Each person handles stress differently. Some people actually seek out situations, which may appear stressful to others. A major life decision, such as changing careers or buying a house, might be overwhelming for some people while others may welcome the change. Some find sitting in traffic too much to take, while others take it in stride. The key is determining your personal tolerance levels for stressful situations. Stress can cause physical, emotional, and behavioral changes which can compromise health, vitality, and peace-of-mind, all of which may affect personal and professional relationships. Too much stress can cause relatively minor illnesses like insomnia, backaches, or headaches as well as potentially life-threatening diseases like high blood pressure and heart disease.

Here are Questions to identify Negative Reactions

Here are questions to identify negative reactions to stress and tension:

1. Do minor problems and disappointments upset you excessively?
2. Do the small pleasures of life fail to satisfy you?
3. Are you unable to stop thinking of your worries?
4. Do you feel inadequate or suffer from self-doubt?
5. Are you constantly tired?
6. Do you experience flashes of anger over situations which used to not bother you?
7. Have you noticed a change in sleeping or eating patterns?
8. Do you suffer from chronic pain, headaches, or back aches?

If you answered yes to some of these questions, it is likely that you have identified negative reactions to stress and tension and need to make some changes.

Helpful Ways to Reduce and Control Stress and Tension

As you read the following suggestions, remember that success will not come from a halfhearted effort, nor will it come overnight. To manage stress successfully, you must take control of your situation and make the needed changes to both your responses to stress and your lifestyle. It will take determination, persistence and time. Some suggestions may help immediately, but if your stress is chronic it may require more attention and/or lifestyle changes. Determine your tolerance level for stress and try to live within these limits. Learn to accept or change stressful and tense situations whenever possible.

1. Be realistic -- If you feel overwhelmed by some activities (yours and/or your family's) learn to say no! Eliminate an activity that is not absolutely necessary or ask someone else to help. You may be taking on more responsibility than you can or should handle. If you meet resistance, give reasons why you are making the changes. Be willing to listen to other's suggestions and be ready to negotiate.
2. Shed the "superman/woman" urge -- No one is perfect, so don't expect perfection from yourself or others. Perfectionism is one of the leading causes of internally induced stress. Ask yourself: What really needs to be done? How much can I really do? Is the deadline realistic? What adjustments can I make? Don't hesitate to ask for help if you need it.
3. Relax -- Just 10 to 20 minutes of quiet reflection may bring relief from chronic stress as well as increase your tolerance to it. Use the time to listen to music, relax and try to think of pleasant things or nothing at all.

4. Visualize -- Use your imagination and picture how you can manage a stressful situation more successfully. Whether it's a business presentation or moving to a new place, many people feel visual rehearsals boost self-confidence and enable them to take a more positive approach to a difficult task.
5. Take one thing at a time -- For people under tension or stress, an ordinary workload can sometimes seem unbearable. The best way to cope with this feeling of being overwhelmed is to take one task at a time. Pick one urgent task and work on it. Once you accomplish that task, choose the next one. The positive feeling of "checking off" work is very satisfying. It will motivate you to keep going.
6. Exercise -- Regular exercise is a popular way to relieve stress. Twenty to 30 minutes of physical activity each day benefits both the body and the mind.
7. Hobbies -- Take a break from your worries by doing something you enjoy. Whether your interests include gardening, painting, fishing, etc schedule time to indulge yourself.
8. Healthy lifestyle -- Get regular checkups. Know the general condition of your vital signs (blood pressure, etc) even if you have no symptoms. Good nutrition also makes a difference. Limit intake of caffeine and alcohol (alcohol actually disturbs, not helps, regular sleep patterns), get adequate rest, exercise, and balance work and play.
9. Share your feelings -- A phone call to a friend lets you know that you are not the only one having a bad day, dealing with a sick child, or working in a busy office. Stay in touch with friends and family. Let them provide love, support, and guidance. Don't try to cope alone. Perhaps it's time to consider hiring a Stress Management Coach!
10. Give in occasionally -- Be flexible! If you find you are meeting constant opposition in either your personal or professional life, rethink your position or strategy. Arguing only intensifies stressful feelings. If you know you are right, stand your ground, but do so calmly and rationally. Make allowances for other's opinions and be prepared to compromise. If you are willing to give in, others may meet you halfway. Not only will you reduce your stress, you may find better solutions to your problems.
11. Go easy with criticism -- You may expect too much of yourself and others. Try not to feel frustrated, let down, disappointed, even "trapped" when another person does not measure up. The "other person" may be a wife, a husband, or child whom you are trying to change to suit yourself. Remember, everyone is unique, and has his or her own virtues, shortcomings, and right to develop as an individual.

12. Deal with problems promptly -- Don't let things build up until they become a crisis.
Whenever possible, resolve family, financial and legal issues before you go off to work.
Having too much on your mind will affect your ability to concentrate on your job and make you more accident /mistake prone.

5 Tips to Help Children Cope with Stress

Children do not think, act, or manage stress like adults; the younger the child the smaller the stressors. Arriving at school to find a rearranged classroom or a substitute teacher can be big stressors to kids.

Young children do not yet have the ability to identify or express their own feelings of stress. They struggle with their own emotions and they pick up on their parent's tension. The American Psychology Association noted that 39% of children feel sad and worried when their parents are stressed. Often a stressed out child can be detected when a teacher or parent observes changes in a child's behavior.

Frequent melt-downs, sleeping problems or nightmares, clingy behavior, refusal to go to school, acting younger than their age, bed-wetting, stomachaches and headaches are signals that your child may be experiencing too much stress. The main thing to look for is a change in behavior. Trust your instinct.

Tips to Reduce Stress:

1. Help children put words to their feelings. Ask them if they feel nervous, scared, or worried. Ask them what is making them feel that way.
2. Acknowledge your child's feelings and encourage the use of positive statements. Often children do not understand the outcome of an action or change. Instead of realizing their favorite teacher will be back tomorrow. They might think she is gone forever. Create positive statements for the situation. "I am safe. My substitute teacher is fun. My teacher will be back soon."
3. Introduce stress management techniques to children. Parents and teachers can easily teach and use techniques like breathing, positive statements, and visualizing on a regular basis. Lesson Plans are available.
4. Establish a bedtime routine that helps kids relax. Soothing music or relaxing stories. Indigo Dreams: Kids Relaxation Music promotes sleep and relaxation.
5. Spend reassuring quality time with children. Parents and teachers can laugh and play together. Singing songs like The More We Get Together, This Is the Way We Laugh and Play and If You're Happy and You Know It can be a liberating and fun stress reliever that you and your children can enjoy together.

A stress free kid today will be a happier, healthier adult tomorrow!



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 19: For Serious Injuries / Funerals / Memorials

See Volume 2 of this set

For information on how to help with serious injuries, funeral and memorials please see Volume 2 of this set. Volume 2 should answer any questions you may have but if you have any questions or need any assistance please call Lincoln County Fire Marshal Office or contact the Senior Team Leader for Lincoln County Crisis Response Team.

We tried to write Volume 2 so it would work with any Emergency Service Agency (Fire, EMS and Law Enforcement). Remember just like Volume 1 both books are just guidelines and can be modified to fit your agency (department) needs.

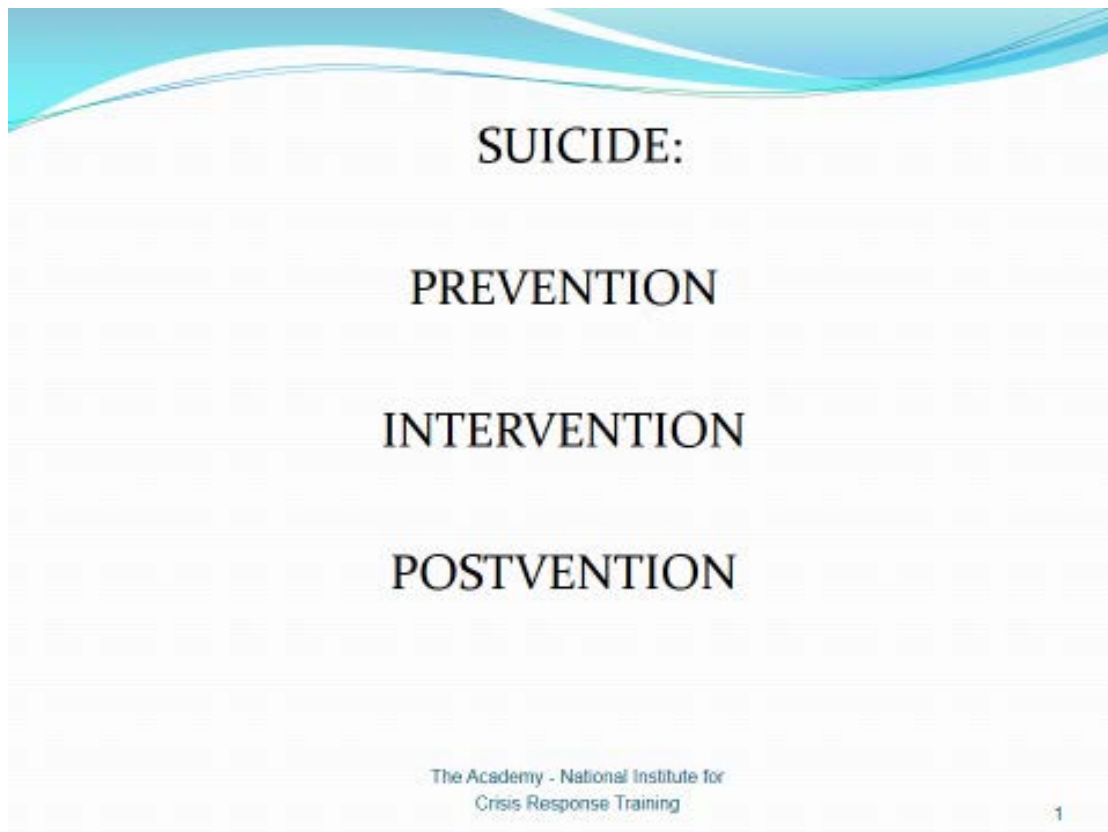


FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 20: Suicide in Emergency Services



PREVENTION

Suicide prevention programs must be comprehensive in providing not only education regarding risk factors, but providing skills training to individuals at risk, training “gatekeepers” to identify individuals at risk.

Creating services and increasing access to care so at risk individuals can receive help when faced with what appears to be insurmountable and unmanageable pain.

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Benefits of Dealing with Problems Early

- Prevent common stress reactions
- Address the issues while they are still manageable
- Prevent the “snowball effect”
- Eliminate consequences for seeking help
- Maintain quality of life and work productivity

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Risk Factors (**SAD PERSONS**)

- **S**ex (male)
- **A**ge (15-34) (also 65+)
- **D**epression
- **P**revious exposure to suicide
- **E**thanol/alcohol/drug abuse
- **R**ational thinking loss
- **S**ocial support system lacking
- **O**rganized plan
- **N**o spouse or significant other
- **S**ickness

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Warning Signs

- Separation from family
- Loss of significant others
- Rejected by peers
- Feels like people don't care
- Change in sleep
- Change in appetite
- Loss of interest in things/life
- Feeling helpless, hopeless, apathy
- Preoccupation with death
- Deterioration of personal appearance/job performance

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Life Events as Possible Triggers

- Suicide of loved one
- Death of loved one
- Serious illness
- Divorce/separation
- Loss of employment
- Loss of cherished possessions
- Retirement
- Financial problems
- Legal problems/arrest
- Victim of crime (sexual abuse/assault)
- Poor grades/College rejections

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Direct Verbal Clues

- I'm going to kill myself
- I wish I were dead
- You'd be better off without me
- I might as well be dead
- If....doesn't happen, I'm going to end it
- I'm going to commit suicide

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Direct Verbal Clues

- I'm going to kill myself
- I wish I were dead
- You'd be better off without me
- I might as well be dead
- If....doesn't happen, I'm going to end it
- I'm going to commit suicide

Indirect Verbal Clues

- I can't go on any longer
- I'm taking the plunge
- Nobody needs me any more
- I'm tired of life
- Life has lost meaning for me
- Eat my gun
- You are going to regret how you treated me
- Cash in my chips
- You be better off without me

Indirect Suicide Indicators

- Buying a gun
- Giving away possessions
- Making out a will
- Taking unusual risks all the time
- Changes in personality
- The “practice run”
- Talking about a long trip
- Sudden religious interest/disinterest

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Major Predicators of Suicide Behavior

- How:
 - Specificity of their plan
 - Availability of means
 - Lethality of method
- History:
 - A prior suicide attempt
 - A family history of suicide behaviors
- Help
 - Resources available

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Suicide is not limited to just one group

- Youth
- College students
- Elderly
- Military
- Law Enforcement
- Suicide after domestic violence
- Suicide after war trauma
- Suicide after serve trauma
- Suicide after natural disasters and terrorist acts

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AID LIFE

- **A**sk – Don't be afraid to ask, "are you thinking of hurting or killing yourself?"
- **I**ntervene immediately – Take action. Tell the person he or she is not alone.
- **D**on't keep it a secret.

- **L**ocate help – find someone to help them.
- **I**nforn someone of the situation.
- **F**ind someone to stay with the person.
- **E**xpedite – Get help immediately.

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INTERVENTION

- Asking the question – is sometimes a difficult part of the intervention process.
- The most effect question is a direct and non-leading question: “Have you been thinking of hurting or killing yourself?” This is a yes or no answer!
- If a yes answer – use the SAD PERSONS acronym to help determine the risk factors – the more factors which are true, the higher their risk level.

SAFER – Revised Model

- **S**tabilize the situation
- **A**cknowledge the crisis
- **F**acilitate understanding / normalize
- **E**ncourage effective coping techniques
- **R**ecovery or referral

SAFER Model

- **Stabilize** the situation
 - Mitigate affective escalation
 - Remove from provocative stressors
 - May use a diversion (i.e. walk, coffee, etc.)
- **Acknowledge** the crisis
 - What happen?
 - Establish rapport and a sense of safety
 - Provide for cathartic ventilation

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SAFER Model continued

- **Facilitate** understanding
 - Explain the symptoms
 - Normalize reactions
- **Encourage** effective coping techniques
 - Teach basic stress survival skills
 - Improve immediate and short term coping
 - Develop a plan for immediate use

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SAFER Model continued

- **Recovery or referral**

- Assess current adaptive functioning
- Assess need for further assistance
- If needed, identify appropriate referral

Important Questions to Ask!!!!

- Have you been thinking about hurting or killing yourself?
- When did you last think about suicide?
- How would you hurt or kill yourself?
- Do you have the means available?
- Have you ever attempted suicide?
- Has anyone in your family attempted/completed suicide?

Important Questions to Ask!!!!

- What are the odds that you will hurt or kill yourself?
- What has been keeping you alive so far?
- What do you think the future holds in store for you?

Characteristics of a Good Listener

- Good self image
- Listens intently
- Expresses self clearly
- Honest, empathic
- Focuses on the here and now
- Cares about people
- Copes with strong emotion

Do's of Intervention

- Remain calm
- Accept their feelings
- Rephrase thoughts
- Focus on central issue
- Stay close
- Emphasize temporary – nature of problem
- Explore resources
- But most important of all
 - **Listen – Listen – Listen – Listen**

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Don'ts of Intervention

- Don't overlook signs
- Don't offer empty promises
- Don't try to cheer him/her up
- Don't debate morality
- Don't assume things will improve
- Don't leave person alone
- Don't keep it a secret
- **DON'T REMAIN THE ONLY PERSON HELPING!!!!!!**

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MAJOR PREDICATORS OF SUICIDAL BEHAVIOR

- How:
 - Specificity of their plan
 - Availability of means
 - Lethality of method
- History:
 - A prior suicide attempt
 - A family history of suicide behavior
- Help:
 - Resources available

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POSTVENTION

- Postvention in contrast to prevention, describes the actions and services provided to survivors of suicide.
- These suicide survivors include spouses, significant others, parents, children, grandparents, aunts, uncles, cousins, lovers, friends, co-workers, classmates, etc.
- Suicide survivors struggle with a myriad of emotions, from grief and loss through anger and guilt.

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Survivor Reactions High Risk Groups

- Parents
- Spouses/Significant others
- Children/siblings
- Those who find the body
- Those who witness the suicide

Grief Reactions **Similar but different**

- Similar to loss due to sudden or violent death
- Often compromises usual morning rituals
- Expert 4 to 7 year recovery period
- Typically not pathological but often complicated
 - Death is usually sudden and unexpected
 - Leaves “unfinished business” no closure
 - Rejection, abandonment
 - Often leaves a violent death scene
 - Scene is a “crime scene”
 - Media involvement

Bereavement Issues

- Denial
- Anger
- Bargaining
- Depression
- Acceptance
- Guilt
- Embarrassment
- Rejection
- Shame
- Search for meaning

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Survivor Reactions

- Shock
- Numbness
- Denial of Death
- Denial of death as suicide
- Religious concerns
- Prolonged search for “WHY?”
- Fear of personal susceptibility
- Guilt
- Responsibility

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Survivor Reactions

- Blaming
- Scapegoating
- Abandonment
- ANGER
- Loneliness
- Social isolation
- Social stigma
- Difficulty trusting others
- Negative family reactions

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HELPING SURVIVORS

**SURVIVOR'S
DON'T GET OVER IT!!!!!!**

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HELPING SURVIVORS

- Let them talk
- Use the deceased's name
- Begin ASAP
- Repetition = part of healing
- Be active listener
- Listen without judgment
- Encourage positive and negative memories

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HELPING SURVIVORS CONTINUED

Helpful Phrases

- I'm sorry for your loss.
- How can I help?
- Is there anyone I can call for you?
- Since the suicide , what are the biggest challenges for you?
- When your friend/loved one died, what else died?
- What one small thing can you do differently that might help you?

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HELPING SURVIVORS CONTINUED

Phrases to Avoid!

- You know they went to hell.
- You are young enough to have another child.
- You have to snap out of it.
- Get over it.
- Didn't you see this coming?
- What did you do to make him/her do this?
- Crying won't bring him/her back to life.
- Try to think positive.
- I know how you feel.

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HELPING SURVIVORS

Recommendations for Parents

- Don't take on new work responsibilities.
- Talk with other bereaved parents.
- Talk with significant other.
- Accept that genders grief differently.
- Don't remind parents of their other "blessings."
- Watch other children.

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HELPING SURVIVORS

- Ask how they are doing.
- Read about grief, loss, suicide.
- Take one day at a time.
- Remind them of positive memories.
- Invite them for a visit.
- Communicate with compassion.
- “I’ll listen when you want to talk.”

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HELPING SURVIVORS

After time

- Support/self-help groups
- Memorials
- Facilitate a grieving ritual
- Be aware of special days
- Helping others helps themselves
- Faith/spiritual beliefs
- Survivor conferences
- **DON'T HURRY GRIEF!!!!!!!!!!!!!!**

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“HINDERING” SURVIVORS

- Denying the death as a suicide
- Ignoring or not taking the problem seriously
- Pressuring them to “get over it”
- Self-medicating/taking them drinking
- Offering negative religious judgments
- Being judgmental
- Using reverse psychology – “Do it”
- Keeping it secret
- Trying to convince them they are not suicidal

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Organizational Implications

What to expect in a CISD

- Why, why, why....
- But, but, but....
- She/he was so happy...
- My religion says...
- Should have...
- Could have...
- Would have...
- Anger
- Frustration
- Grief, guilt
- Feel out of control
- Depression
- Feel empty

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Organizational Implications

CISM issues

- Offer understanding and empathy
- Don't try to answer "why" question directly. Better to say "We wish we could answer that question, but we cannot."
- Don't equate to Line of Duty Death
- Deal with each issue as it arises
- Suggest feelings the group can't bring up
- ****ANGER****

Organizational Implications

CISM issues continued

- Provide practical advice on dealing with family members of the deceased
- Provide practical advice to organization
- Help the group care about the person, and accept the choice he or she made
- Refer individuals who are struggling excessively with anger, loss, or guilt

Line of Duty Death vs. Suicide

LODD	Suicide
<ul style="list-style-type: none">• Continued support• Praised for work• Public outpouring of support• National week to remember• Extensive support network• Increased benefits	<ul style="list-style-type: none">• Cut off from support• Achievements minimized• Private shame and guilt• Nothing• Support network collapses• Decreased benefits

LODD

- Continued support
- Praised for work
- Public outpouring of support
- National week to remember
- Extensive support network
- Increased benefits

Suicide

- Cut off from support
- Achievements minimized
- Private shame and guilt
- Nothing
- Support network collapses
- Decreased benefits

Organizational Implications

CISM issues

- **ALWAYS REMEMBER TO
CARE FOR THE
CAREGIVEERS!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!**

Helping the Helpers

- Both personal and professional
- Personal issues similar to suicide survivor issues
- Personal issues
 - Anger
 - Sadness/Depression
 - Relief
 - Guilt/Shame
 - Denial Repression

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Helping the Helpers

Professional issues

- | | |
|--|--|
| <ul style="list-style-type: none">• Adequacy/competency<ul style="list-style-type: none">• Sense of personal failure• Shattered self-confidence | May Lead to -----
Conservatism
Decrease in emergency tx
Professional shift |
| <ul style="list-style-type: none">• Fears<ul style="list-style-type: none">• Blame by family• Censure by peers• Damage to reputation | Avoid family, funeral
Secrecy, isolation
Leaving profession |
| <ul style="list-style-type: none">• Reorganization<ul style="list-style-type: none">• What can I learn???? | Formal case review
Enhanced competency |

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SUMMARY

- **AWARENESS**
- **PREVENTION**
- **INTERVENTION**
- **POSTVENTION**



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 21: Sample of Law Enforcement LODD Funeral/Memorial Set Up

Example of a Sample Guidelines to Follow

This is a sample guideline of a law enforcement funeral and memorial order of events following a LODD. Most Law Enforcement Agencies have their own protocol to follow. This chapter is in this manual to give the crisis response team member a chance to have knowledge of the what a LODD funeral or memorial for law enforcement may look like in case they are asked to help. This chapter and Chapter 19 which is located in Volume 2 is also available to be used for a department who does not have a protocol in place.

We pray that no department has to ever face a LODD but in the event they do we hope this chapter and chapter 19 will give them through their time of grief and stress in planning a funeral or memorial.

_____ POLICE DEPARTMENT

POLICE FUNERAL PROTOCOL

It shall be the responsibility of the _____ Police Department to provide assistance to the immediate survivors of an officer who dies in the line-of-duty, whether feloniously or accidentally, while an active member of the Department. This includes the clarification and comprehensive study of survivor benefits and the provision for tangible and intangible emotional support during the time of re-adjustment for the surviving family.

The purpose of this document is to direct the _____ Police Department to provide proper emotional care for the deceased officer's family and emotional support for the officer's co-workers.

Introduction

In law enforcement there is the ever-present specter of death in the line of duty. Over 100 times each year, Taps are played, 21 gun salutes are fired, and flags are folded. We recognize it and know it to be the final tribute to a fallen Law Enforcement Officer.

For someone who has never been involved in a 'Police Funeral' the magnitude of details, the number of mourners and the uniqueness of law enforcement rites, could overwhelm and frustrate those involved in the many facets of the funeral service.

The 'Police Funeral' is a demonstration of our respect for one who has made the ultimate sacrifice. It is a public announcement of our grief.

Because the ceremony is a public demonstration, it is important that it be marked by the adherence to protocol, by precision in timing and execution and by the sense of order that marks the 'Police Funeral'.

This manual is intended to cover all aspects of arrangements from a critical injury where death is a real possibility through post funeral responsibilities. It covers both in-the-line of-duty deaths, and deaths that occur which are not duty related.

Notifications – Critical Injuries

Not every officer who is shot or injured in the line of duty will result in death. However, it is just as important that care, compassion and assistance be exercised in critical injuries as well as with deaths. It is imperative that the notification procedure be implemented as soon as possible when Dispatch is aware of the incident. **Notification is NOT to be made by telephone.**

Notification procedure:

1. Principles of Notification
 - a. In person
 - b. In time
 - c. In pairs
 - d. In plain language
 - e. With compassion
2. As soon as Dispatch becomes aware of a serious or critical injury of an officer all chaplains or (Crisis Response Team Members) shall be called to respond if possible.

3. A Chaplain or (Crisis Response Team Member) with the Chief or his/her representative and another officer (a friend of the family, if possible) should make the notification.
 - a. The notification procedure shall be followed.
 - b. Transport spouse/family to hospital as soon as possible.
 - c. The Duty Commander shall notify the hospital that the family is en route.
 - d. Help make arrangements for small children.
 - e. Contact the family's clergy by the Chaplain or (Crisis Response Team Members).
4. A second Chaplain or (Crisis Response Team Member) is to be dispatched to the hospital. He, with a ranking officer, shall:
 - a. arrange waiting facilities for the family (protect from the media).
 - b. arrange waiting facilities for peace officers.
 - c. insure that the medical personnel keep the family informed of the officer's condition.
 - d. obtain information on hospital policies on visiting the officer and/or visiting the body following the death.
 - e. be available to minister to the family members/officers.
5. A third Chaplain or (Crisis Response Team Member) is to be dispatched to the Department Headquarters. This Chaplain or (Crisis Response Team Member) shall:
 - a. be available to minister to officers, support staff, and dispatchers as needed.
 - b. receive updated reports from the hospital as to the officer's condition and report to Headquarters personnel.
 - c. be available for other assignments that may become necessary.

No Department employees, including Chaplains or (Crisis Response Team Member), should make promises to the family that may be caused by the emotionalism of the moment and perhaps cannot be kept.

Introduction Notifications – Line of Duty Death (LODD)

In line of duty deaths, it is imperative that the following be implemented immediately. Notification is **NOT** to be done by telephone. It must be done in person.

Notification procedure

1. Principles of Death Notification
 - a. In person
 - b. In time
 - c. In pairs
 - d. In plain language
 - e. With compassion
2. As soon as Dispatch is aware of a line of duty death all Chaplains or (Crisis Response Team Member) shall be called to respond if possible.
3. A Chaplain or (Crisis Response Team Member) with the Chief or his/her representative and another police officer (a friend of the family, if possible) should make the notification.
 - a. The notification procedure shall be followed.
 - b. If there is a known medical problem with an immediate family member, medical personnel should be dispatched to coincide with the notification team.
 - c. If the family wants to go to the hospital, transportation should be by police vehicle. Family members should not drive themselves. If they insist on driving, an officer should accompany them.
 - d. The Duty Commander should notify the hospital that the family is enroute.
 - e. The Department should be prepared to handle immediate baby-sitting.
 - f. Parents living in the area should receive personal notification by a ranking officer and Chaplain or (Crisis Response Team Member).
 - g. A Chaplain or (Crisis Response Team Member) will contact the family's clergy.

4. The second Chaplain or (Crisis Response Team Member) should be dispatched to the scene (if there is no scene respond to Headquarters) to be available to the officers and for other necessary assignments.
5. The third Chaplain or (Crisis Response Team Member) should be dispatched to Headquarters to be available to officers, dispatchers and other support personnel.

The name of the deceased shall **NOT** be released to the media before the immediate family and relatives living in the area have been notified.

Upon completion of the notification, protocol relating to the police funeral should be implemented.

Critical Incident Debriefing

In line of duty deaths are very traumatic for individuals involved in or responding to the situation. In order to offer emotional assistance to all parties involved, a Critical Incident Debriefing shall be held.

By instruction of the Chief or the Chief's designee, the debriefing shall be organized by the Duty Commander and Chaplain or (Crisis Response Team Member). They will in turn contact:

1. _____ Critical Incident Stress Management Team: _____
2. Employee Assistance Program: _____
3. All individuals/agencies affected by the incident/death.

Funeral Responsibilities of Assigned Individuals

THE POLICE FUNERAL RESPONSIBILITIES OF ASSIGNED INDIVIDUALS

Funeral Coordinator

Funeral Coordinator – The Chief or the Chief’s designee

1. The facilitator between
 - a. the family and the Department.
 - b. the funeral home and the Department.
 - c. the clergy and the Department.
2. Must be thoroughly familiar with all the protocol of a police funeral.
3. Coordinate each part of the police funeral with funeral home director and clergy.
4. Appoint and coordinate the activities of the Family Liaison Officer, Department Liaison Officer and the Honor Guard Commander.

Agency Chaplain or (Crisis Response Team Member)

Agency Chaplain or (Crisis Response Team Member)

1. Work closely with the Funeral Coordinator, Family Liaison Officer, Department Liaison Officer and the Benefits Coordinator.
2. If the funeral service is to be conducted by a member of the Clergy who is not an Agency Chaplain or (Crisis Response Team Member), the Agency Chaplain or (Crisis Response Team Member) will meet with the officiating Clergy to explain the protocol of a police funeral service.
3. Meet with funeral director to explain the protocol of a police funeral service.
4. Provide other services as assigned by the Funeral Coordinator.

Family Liaison Officer

Family Liaison Officer

1. The selection of a Family Liaison Officer is a critical assignment. An attempt should be made to assign someone who enjoyed a close relationship with the officer and his family.
2. This is not a decision making position. This is a role of facilitator between the family and the Police Department.
3. Responsibilities of the Family Liaison Officer:
 - a. Ensure that the needs of the family come before the wishes of the Department.
 - b. Assist the family with funeral arrangements and make them aware of what the Department can offer if they decide to have a police funeral. If they choose the latter, brief the family on funeral procedure (i.e. presenting the flag, 21 gun salute, playing of Taps).
 - c. Apprise the family of information concerning the death and when appropriate, information on and any continuing investigation.
 - d. Provide as much assistance as possible, including overseeing travel and lodging arrangements for out-of-town family members, arranging for food for the family, meeting child care and transportation needs, etc.
 - e. Be constantly available to the family.
 - f. Determine what public safety, church, fraternal and labor organizations will provide in terms of financial assistance for out-of-town family travel, food for funeral attendees following the burial, etc.
 - g. Notify Concerns of Police Survivors (C.O.P.S.) to :
_____ Members are available to provide emotional support to surviving families.
 - h. Carry a pager/cellular phone at all times.

Department Liaison Officer

Department Liaison Officer

1. This position is normally assigned to a division commander because of the need to effectively coordinate resources throughout the Department.
2. Department Liaison Officer's responsibilities:
 - a. Work closely with the Family Liaison Officer to ensure that the needs of the family are fulfilled.
 - b. Handle the news media throughout the ordeal. If the family decides to accept an interview, an officer should attend to "screen" questions presented to the family so as not to jeopardize subsequent legal proceedings.
 - c. Meet with the following persons to coordinate funeral activities and establish an itinerary:
 1. Chief of Police and commanders
 2. Funeral Director
 3. Department Chaplains or (Crisis Response Team Members)
 4. Cemetery Director
 5. Honor Guard
 - d. Direct the funeral activities of the Department and visiting agencies according to the wishes of the family.
 - e. Issue a teletype message to include the following:
 1. Name of deceased
 2. Date and time of death
 3. Circumstances surrounding the death
 4. Funeral arrangements (state if service will be private or a police funeral)
 5. Uniform to be worn
 6. Expressions of sympathy in lieu of flowers

7. Contact person and phone number for visiting agencies to indicate their desire to attend and to obtain further information
 8. Address for which flowers, cards memorials are to be directed
- f. Obtain an American flag if the family wishes a flag presentation by the Chief and notify the Chief's office.
 - g. If the family desires a burial in uniform, select an officer to obtain a uniform and all accouterments (except weapons) and deliver them to the funeral home.
 - h. Assign members for usher duty at the church.
 - i. Arrange for the delivery of the officer's personal belongings to the family.
 - j. Brief the Chief and staff concerning all funeral arrangements.
 - k. Ensure that the surviving parents are afforded recognition and that proper placement is arranged for them during the funeral and procession.
 - l. Arrange for a stand-by doctor/EPA member for the family, if necessary.
 - m. Coordinate traffic management with other jurisdictions if necessary, during the viewing, funeral and procession. Arrange for a tow truck to be available along the procession route.
 - n. Assign an officer to remain at the family home during the viewing and funeral.
 - o. Maintain a roster of all Departments sending personnel to the funeral, including:
 1. Name and address of responding agency
 2. Name of the Chief of Police
 3. Number of officers responding
 4. Number of officers attending the reception after the funeral
 5. Number of vehicles
 6. Assist in making the necessary accommodations (food, lodging, etc.)

- p. Acknowledge visiting and assisting departments.
- q. Arrange for routine residence checks by patrol units of the survivor's home for 6-8 weeks following the funeral. This service is necessary since large amounts of money are passing through the residence and the survivors will be spending much time away from the home dealing with matters surrounding the death of a family member.

Honor Guard Commander

Honor Guard Commander

1. Must work closely with the Funeral Coordinator in determining procedure.
2. Establishes procedures and the positions of ushers, color guard, firearm salute team, bugler and pallbearers (active and honorary).
3. Secure the funeral flag from the Department Liaison Officer.
3. Secure the chapel/church/synagogue diagram. Include the following:
 - a. maximum occupancy
 - b. location of alternative seating if available
 - c. Establish seating zones
 - d. with the funeral director, determine the entrance the family will use
5. Set a meeting with the coordinator, firearm salute team, color guard, bugler and pallbearers (active and honorary).
6. Upon learning the time of the family's arrival, post color guard, firearm salute team, bugler and pallbearers (active and honorary).

Firearms Salute Team Commander

Firearms Salute Team Commander

1. Should work closely with the Honor Guard Commander concerning the Honor Details at the chapel/church/synagogue and interment.
2. The firearm salute team shall consist of not more than seven officers.
3. The firearm salute team's weapons may be the service sidearm, or other suitable weapon capable of firing blank ammunition.
4. The Honor Guard Commander orders, **FIRE THREE VOLLEYS**.
 - a. Each officer comes to PORT ARMS and executes a half right face and moves his/her right foot 10 inches to the right to a position giving a firm, steady stance.
5. Firearm Salute Team Commander commands READY, AIM, FIRE.
 - a. READY – officer moves the safety to the firing position after chambering a round.
 - b. AIM – officer shoulders the weapon, if a long gun, or extends his shooting arm, if a handgun, and aims to the front at a 45 degree angle above the horizon.
 - c. FIRE – the trigger is squeezed quickly and the weapon is returned to PORT ARMS.
6. The Firearms Salute Team Commander commands AIM, FIRE with weapons that fire automatically. Firearms Salute Team Commander commands READY, AIM, FIRE with weapons that must be manually operated.
7. After the third firing, Firearms Salute Team Commander commands CEASE FIRE. Officers immediately come to PORT ARMS.
8. Officers immediately place their weapons on safe and return to the position of ATTENTION, facing front, with their weapons at PORT ARMS. Firearms Salute Team Commander commands PRESENT ARMS.

Traffic Supervisor

Traffic Supervisor

1. Meet with Funeral Coordinator and Honor Guard Commander as soon as possible.
2. Secure a diagram of the parking lot and seating capacity of chapel/church/synagogue.
3. Designate the entrance the family will use to enter chapel/church/synagogue and share this information with the Escort Supervisor.
4. Prepare instructions as to the needs of barricades and of their availability.
5. Share the above information with the Family Liaison Officer and assist in the practice of posting at the interment site.
6. Notify the Escort Supervisor with as much lead time as possible when the family is to leave home for the chapel/church/synagogue for the Memorial Service.

Benefits Coordinator

Benefits Coordinator

1. The Benefits Coordinator will gather information on all benefits/funeral payments available to the family. He will have the Department's full support to fulfill this responsibility to the survivors.
2. Responsibilities of the Benefits Coordinator are found in the section entitled Post Funeral Responsibilities.

Visitation Responsibilities

Sample Announcement

Announcement:

A visitation for _____ (name) _____ will be held _____ (date) _____ from _____ to _____ hours. The location will be the _____ (mortuary/church/synagogue) at _____ (address). At _____ hours the Color Guard will post the American and State flags at the casket. At _____ hours the first Honor Guard will be posted.

Honor Guard Uniform

The uniform of the day for the Honor Guard will be a clean and pressed Departmental uniform, clean white gloves and black band across the badge diagonally from the top outside edge to the bottom inside edge (left to right).

Casket Watch

The casket watch is usually comprised of officers from the Honor Guard. However, volunteers may stand watch at the discretion of the Honor Guard Commander. Officers who are assigned to the casket watch must present an excellent uniform appearance and conform to all current grooming regulations. The dress uniform of the day including hat, white gloves and tie will be worn.

The Honor Guard will meet at Police Headquarters and proceed to the visitation location as a unit. The watch will be divided into shifts with two officers standing 15 to 30 minute intervals depending upon the number of officers available.

The casket watch moves in slow cadence. This includes marching, movement and saluting. The official will post the watch and the officers will position themselves at or near the head and feet of the deceased officer.

If the family wishes, an informal watch can take place after the viewing has been concluded for the day.

Funeral Protocol

General Funeral Procedures

Uniforms

All members will maintain an excellent appearance. Uniforms and equipment must be in outstanding condition. Only Class A, dress uniforms will be worn (long sleeve shirt with tie).

The uniform of the day will be a clean and pressed Departmental uniform. A black band will be placed across the badge diagonally from top outside edge to bottom inside edge (left to right).

Pallbearers Active and Honorary

Active Pallbearers are those who will be carrying the casket. They will be selected from the officers of the Department and according to the wishes of the family. Honorary Pallbearers will be comprised of Departmental members and family/friends identified by the family.

Ushers

Ushers will be selected from the officers of the Department and/or other agencies according to the wishes of the family.

Uniformed Personnel

All uniformed personnel attending the funeral in an individual capacity will face the casket and execute the hand salute on the following:

1. When honors are sounded
2. Any time the casket is being moved (except when they themselves are moving)
3. During the firing of volleys
4. When Taps are being played

Personnel in Civilian Clothiers

Sworn personnel in civilian clothes shall remove any headgear and place their hat and/or right hand over their heart and stand at the position of attention whenever the casket is moved or during honors, volleys or the playing of Taps.

Entrance and Exit of Chapel/Church/Synagogue

Members who attend the funeral services will report to a pre-designated assembly point away from the place of services for inspection and briefing.

From the assembly point, members will march or drive in convoy to the place of service, timing their arrival to permit immediate entry.

Upon entering the building, members will remove their uniform hats, place them under their left arm, hat brim forward, and move in an orderly manner to the place reserved for them.

Members will remain standing until all members are in their places and the command, “Be Seated” is given.

Members will sit with their hats upright in their laps with the brim facing forward.

At the end of the service, members, upon receiving the command, “Officers Rise” will rise in unison and place their hats under their left arm preparatory to filing past the casket. They will hold their hats in this position until they have passed the casket and have arrived outside.

Upon leaving the building, members will replace their hats and assemble in formation at right angles to the hearse.

Two ranks will be formed facing each other, leaving an aisle through which pallbearers and casket may pass.

Members will be formed by height. They will normally be dressed at extended intervals but may be dressed at close intervals if space is limited.

While waiting in formation, members will stand at parade rest.

When the casket comes into view, the formation will be called to attention. The next command will be “Present Arms.” All members salute and hold this salute until the casket is placed in the hearse. At this time the command, “Ready”, “Front”, will be given and members will return their hands to their sides.

After the doors of the hearse are closed, the command “First Rank (passenger side of hearse), Right Face” and Second Rank (driver’s side of hearse) Left Face” is given so that the two columns are facing the hearse.

The Commander will then dismiss the formation with the command, “Officers Dismissed.” The members will break ranks and leave in a quiet and orderly manner.

Members will then take their assigned places in the motorcade and proceed to the cemetery.

Following Events Should Be Planned Carefully

The arrival of the funeral coach and flower vehicles at the chapel/church/synagogue.

The Honor Guard should be in place upon their arrival (knowledge of entrance is important).

Ushers will be in place awaiting the arrival and seating of those attending the service (knowledge of the seating arrangement is important).

Dignitaries arrive and are seated (again, knowledge of the seating arrangement is important).

Pallbearers are seated (note again the importance of seating arrangement).

Family procession arrives at the chapel/church/synagogue; Honor Guard Detail in place for the family's entrance into the chapel/church/synagogue. Family is escorted to the entrance where Ushers will escort and seat the family.

Members of the immediate family, relatives and friends of the deceased are requested to enter the chapel/church/synagogue before the casket is taken in. Members of the immediate family and relatives are seated in the front rows of the chapel/church/synagogue. The Ushers are important to the proper seating of the family.

The Memorial Service

The Service procedure is the domain of the Clergy/Chaplain or (Crisis Response Team Member) and the family.

If the interment is held in another location other than locally, the flag will be folded by the Active Pallbearers at the conclusion of the Memorial Service and presented to the designated family member by the Chief of Police or his/her designate.

The Funeral Processional

If there is a traditional “Police Procession,” the Traffic Supervisor shall coordinate the route and schedule with all involved and shall request as much assistance as necessary so as to limit interruptions or stoppages of the procession.

The Funeral Procession shall be formed in the following manner:

- Escort Supervisor
- Escort
- Colors
- Firing Party/Bugler
- Clergy (if not with hearse) or (Crisis Response Team Member)
- Active Pallbearers
- Honorary Pallbearers
- Funeral Coach
- Family
- Chief’s Car, etc.

Note: This is one of several formations which may be considered. Escort Supervisor should consult with Funeral Director.

Graveside Services

Upon arrival at the cemetery or gravesite, the Escort Supervisor or one assigned shall assure that the parking at the gravesite will be such that the Hearse, Family Cars and Pallbearers are next to the gravesite. Upon arrival, all Friends and Fraternal Groups shall take their places before the casket is unloaded (the Funeral Director will usually be in charge of seating the family). The Family Remains in their conveyances until the casket is unloaded.

The Escort is formed in a line in view of the next of kin, facing the gravesite. The Colors are positioned one pace in front of and centered on the Escort. The Escort Supervisor is positioned one pace in front of and centered on the Colors.

The Firing Squad is positioned to the right or left of the Escort facing the grave, in a position so that the volleys are fired over the grave but not over or in the direction of the Family. The Firing Squad commander is positioned to the side of the Firing Squad and one pace in front.

The Family is normally facing the grave and opposite the Escort. The next of kin should be seated in the front row directly adjacent to the casket-lowering device.

Ranks of Police Officers in uniform, representing agencies honoring their fallen comrade, are normally formed in the ranks behind the Firing Squad facing the grave. The Escort Supervisor shall brief the assembled troops on the sequence of events, positions and shall give all the commands.

As soon as the hearse has halted, the Honorary Pallbearers are formed in two ranks facing each other, forming an aisle extending from the hearse toward the grave. If the grave is too near the road to permit this formation, the Honorary Pallbearers take their positions at the grave before the unloading of the hearse.

Service Procedures

1. Members will report to the places that have been reserved for them immediately upon arrival at the graveside. If indoors, members will remove their hats and hold them under their left arm. All members will sit with hats in laps with brim facing forward. If services are outdoors, members will wear their hats.
2. After the Committal Service by the Minister/Chaplain, the Pallbearers will remove and fold the flag. The Colors shall be folded in a military triangle with the blue field showing. The folded flag shall be presented to the Chief of Police who will present it to the family.
3. After the presentation of the flag, the 21 gun salute will take place followed by Taps. Following Taps, the command "Officers dismissed" shall be given. Members will break ranks and return to their vehicles.

Honors Accorded

Any Bismarck Police Officer who dies in the line of duty will be accorded full honors if requested by the survivors. This will include the casket watch during viewing, Honor Guard, Pallbearers, firearm salute, Taps, military flag fold and presentation, and motor escort.

The Honor Guard Commander is responsible for coordinating the directing the activities of the Honor Guard casket watch, pallbearers, firearms salute team, bugler and flag presentation.

Casket Watch

The casket watch is usually comprised of officers from the Honor Guard. However, volunteers may stand watch at the discretion of the Honor Guard Commander. Officers who are assigned to the casket watch must present an excellent uniform appearance and conform to all current grooming regulations. The dress uniform of the day including hat, white gloves and tie will be worn.

The Honor Guard will meet at Police Headquarters and proceed to the visitation location as a unit. The watch will be divided into shifts with two officers standing 15 to 30 minute intervals depending upon the number of officers available.

The casket watch moves in slow cadence. This includes marching, movement and saluting. The official will post the watch and the officers will position themselves at or near the head and feet of the deceased officer.

If the family wishes, an informal watch can take place after the viewing has been concluded for the day.

Honor Guard

Members of the Honor Guard will assemble at a location near the service (funeral home, church or synagogue) for inspection by the Honor Guard Commander.

Commands will be executed by the Honor Guard Commander.

Pallbearers

If Pallbearers are requested by the family, they will be selected by the family and/or the Honor Guard Commander.

Pallbearers will be under the direction of the Honor Guard Commander. They will report to the funeral home or church/synagogue as directed for instructions and seating arrangements.

Procedural Variation

The procedures outlined in this Order shall be followed in most cases. Any changes made necessary by a shortage of manpower, the unusual size of the funeral, the type of service, the physical arrangement of the place of service or for any other reason shall be made by the Department Liaison Officer under the direction of the family and/or the Chief.

Any additional honors to be accorded to deceased members or employees of the Police Force or to deceased members of other Law Enforcement agencies shall be at the discretion of the Chief of Police.

Retired Officers / Private Funerals

In the event a retired _____ Police Department Officer dies within the _____ area or within reasonable distance and the family requests a Police Funeral, the following is a suggested procedure.

Retired Officers

The Chief of Police will designate a member of the Department (the Police Chaplain would be most helpful in this position) or (Crisis Response Team Member) to ensure the service is scheduled with sufficient time for reasonable notification of the Department. A cap with badge and a flag will be provided to the Funeral Directors at their place of business if the deceased is to be buried in uniform (the cap and badge will be returned to the Department).

The flag will be presented to the family in the same fashion as that of an active duty officer who dies in the line-of-duty.

It will be recommended to the family that the Active Pallbearers be chosen by the Department and that family friends, both inside and outside of the Department, be Honorary Pallbearers.

Six (6) officers may be designed as Pallbearers. Dress will be the Class “A” uniform.

Notice of the retired officer’s death and funeral information will request any officer attending to make themselves known to the Funeral Directors and sit together. They should be in the uniform of the day. There will be no Honor Guard prior to the service.

The Department recognition will be the Memorial Service only and not at the interment.

The Active Pallbearers will carry the casket from the funeral coach into the Chapel/Church/Synagogue. At the end of the service, the flag will be folded by the Active Pallbearers and the Chief of Police or his/her designate will present it to the family (widow(er), if present. It will be known beforehand who is to receive the flag for the family.

The Funeral Director will arrange for all Department members present to precede the casket from the place of service in sufficient time for them to form an Honor Guard to the funeral coach. A pre-selected Lead Officer will start the formation of the Honor Guard with other officers following his/her lead. Only the lead officer will salute when the casket and family exit the building. Other officers will stand at attention at the Lead Officer’s command. When the family has passed the Honor Guard, the Lead Officer will give the command, “Officers Dismissed.”

When the body is to be cremated, the Active Pallbearers will carry the casket to the coach and remain in line – six (6) on one side (or three on each) as pre-determined, until the coach and family cars leave.

When there is to be an interment, the Active Pallbearers will carry the casket to the hearse and after it is loaded, stand in place until after the family has passed and then proceed to the Pallbearers' car provided by the Funeral Director.

Private Funerals

The funeral of a member of the Department whether a sworn officer or civilian employee will have a Department member present if a local service is held.

In the death of a sworn or civilian member's immediate family in the local area, every attempt shall be made to have Department representation (uniform and other) present at both the Memorial Service and Interment.

Law Enforcement Suicide

Remember, regardless of the cause of death, the deceased was a “fellow officer” and his survivors will always be part of the “police family.”

In the event that a _____ Police Department Officer dies by suicide, the following protocol will enhance the image of the Department as a “caring” and “compassionate” department that attempts to meet the needs of their police families. We need to remember that funerals are for the living – the family needs your support in this most difficult time in their lives. The family is “hurting.” Don’t add to their pain by passing judgment – just be there.

Prior to Funeral

1. Meet with the family to see what expectations they have of the Department in relationship to the funeral (i.e. Will the officer be buried in uniform? Will uniformed officers assist with the funeral, etc.?) It is important that the Department makes the initial contact, instead of waiting to see if the family contacts the Department.
2. Have uniformed officers present during the viewing hours at the funeral home to assist the family if needed.

Funeral

1. If a family minister is conducting the service, ask if a Police Chaplain or a Department Representative could speak on behalf of the Department. If there is no family minister, offer the services of the Police Chaplain.
2. If possible, allow uniformed officers to attend the funeral service – especially those who worked with the deceased officer. This is important not only for the family, but for his fellow officers as well.
3. A “final salute” in front of the casket is appropriate. (A final salute constitutes a momentary pause at the casket as the officers file past). This can be accomplished in a single file order. After offering their final salute, they should proceed outside to gather in ranks in preparation for the casket to be placed in the hearse.
4. Have Honor Guard located outside Chapel/Church/Synagogue when the casket is brought out. An order of “Present Arms” (salute) would be appropriate.
5. Have Departmental vehicles cover the front and rear of the funeral procession. Lights are appropriate during the procession.

Grave Site

1. Have uniformed officers and Honor Guard line the immediate pathway to the grave site. Call officers to attention when the casket and family pass by.
2. Play Taps at the conclusion of the service. Dismiss officers after conclusion of Taps.
3. If Bag Pipes are used they can replace the playing of taps or you can have the bag pipes played as after the taps and have the piper to walk away as they are playing. After the bag piper is finished you can dismiss the officers.

Family Reception

1. If possible, attend this reception and request the Police Chaplain to attend.

Post Funeral Responsibilities

Benefits Coordinator

The Benefits Coordinator will gather information on all benefits/funeral payments available to the family. For assistance refer to: “Benefits Available to Surviving Families of _____ Law Enforcement Officers Killed in the Line of Duty,” compiled by _____. A copy of this book will be housed with the Chief and the Chaplain or (Crisis Response Team Member).

The Benefits Coordinator responsibilities:

1. Filing Worker’s Compensations claims and related paperwork.
2. Contacting the appropriate offices without delay to ensure that the beneficiary receives death and retirements benefits, the officer’s remaining paychecks and payment for remaining annual and compensatory time.
3. Gathering information on all benefit/funeral payments that are available to the family.
4. Assist in setting up any special trust funds or educational funds if the family requests.
5. Notifying police organizations such as the Fraternal Order of Police, the Police Association, etc. of the death and to ensure that any and all entitlements are paid to the beneficiary(s). These agencies may also offer legal and financial counseling to the family at no cost.
6. Preparing a print-out of the various benefits/funeral payments that are due to the family, listing named beneficiaries, contacts at various benefits offices and when they can expect to receive payment.

7. Meeting with the surviving family a few days after a funeral to discuss the benefits they will receive. A copy of the prepared print-out and any other related paperwork should be given to the family at this time.
 - a. If there are surviving children from a former marriage, the guardian of those children should also receive a print-out of what benefits the child(ren) may be receiving.
 - b. Attention should be given to the revocation of health benefits. The majority of health benefit providers allow a 30 day grace period before canceling or imposing monthly payments upon survivors.
8. Meeting again with the family in about six months to make sure they are receiving benefits.

Continued Support for the Family

Members of the Department must remain sensitive to the needs of the survivors long after the officer's death. The grief process has no timetable and survivors may develop a complicated grief process. More than half of the surviving spouses can be expected to develop a post-traumatic stress reaction to the tragedy.

Survivors should continue to feel a part of the "police family." They should be invited to Police Department activities to ensure continued contact.

Members of the Department are encouraged to keep in touch with the family. Close friends, co-workers and officials should arrange with the family to visit the home from time to time so long as the family expresses a desire to have these contacts continue.

The Chief of Police should observe the officer's death date with a short note to the family and/or flowers on the grave.

Holidays may be especially difficult for the family, particularly if small children are involved. Increased contact with the survivors and additional support is important at these times.

The Family Liaison acts as a long-term liaison with the surviving family who ensure close contact is maintained between the Department and the survivors and that their needs are met for as long as they feel the need for support.

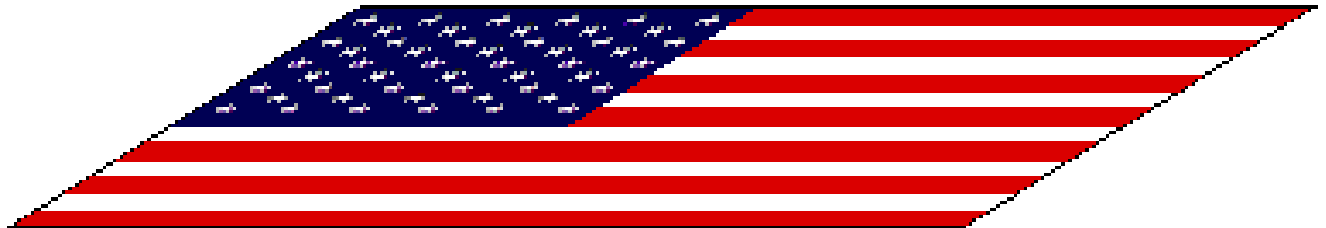
If no court proceedings/investigations surround the circumstances of the officer's death, the Family Liaison will relay all details of the incident to the family at the earliest opportunity.

If criminal violations surround the death, the Family Liaison will:

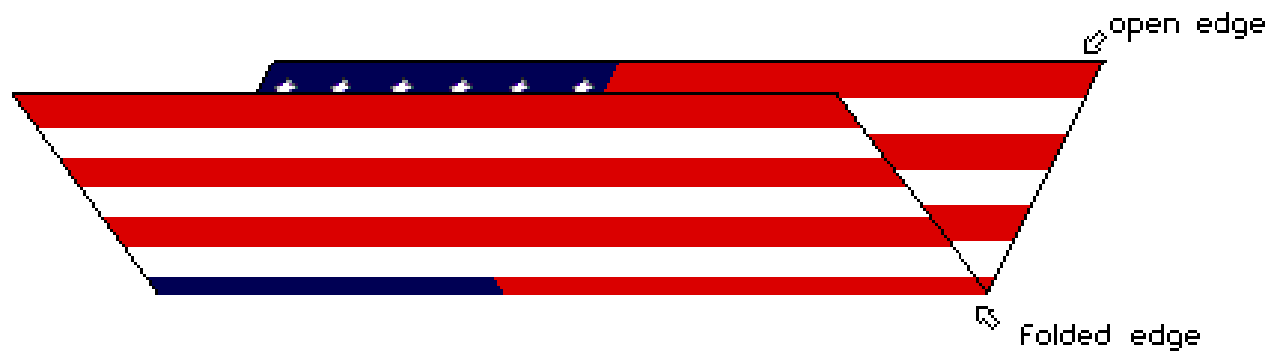
1. Inform the family of all new developments prior to press release. Information for release must be approved by the Chief.
2. When appropriate, keep the family apprised of legal and parole proceedings.
3. Introduce the family to victim assistance specialists of the court.
4. Encourage the family to attend the trial and accompany them whenever possible.
5. Arrange for investigators to meet with the family at the earliest opportunity following the trial for a debriefing.

How to Fold the United States Flag

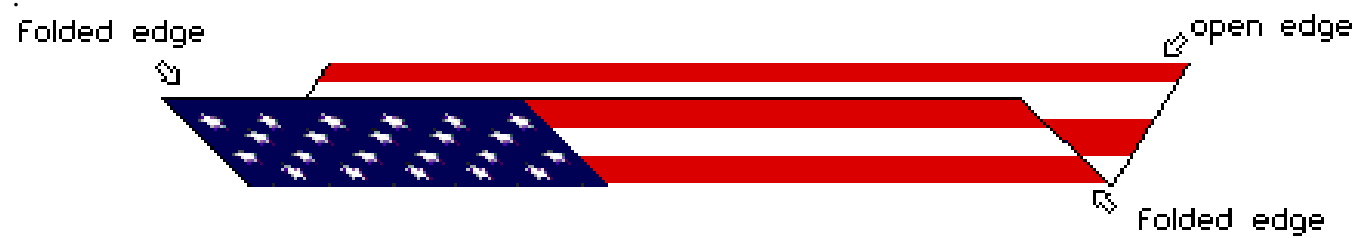
Our Flag! United States Flag Folding Correct Procedure.



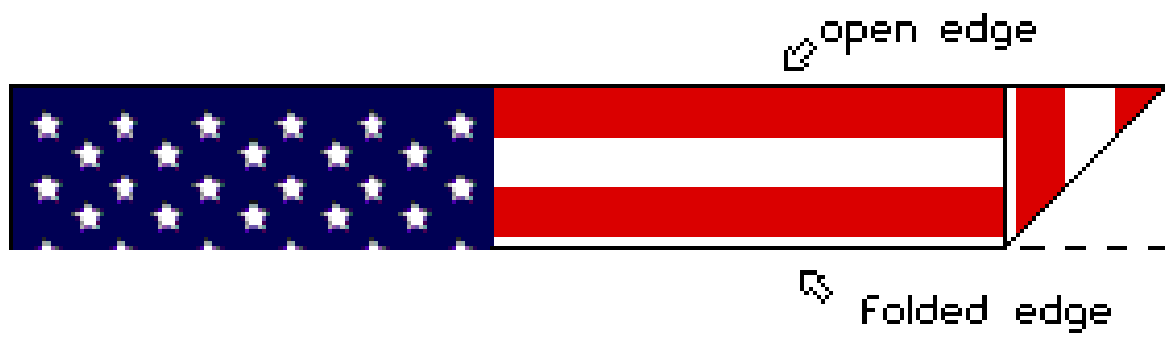
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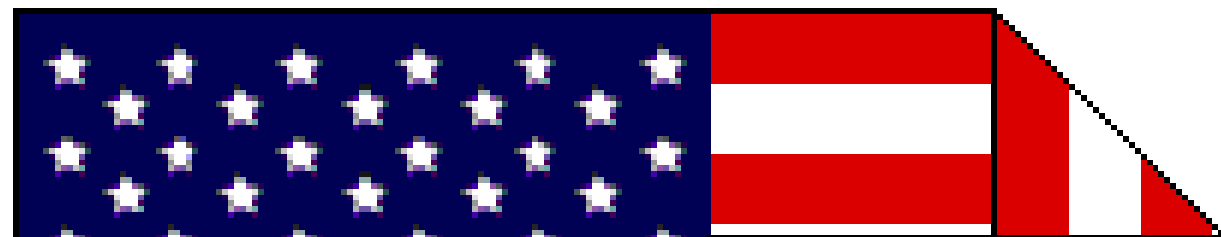
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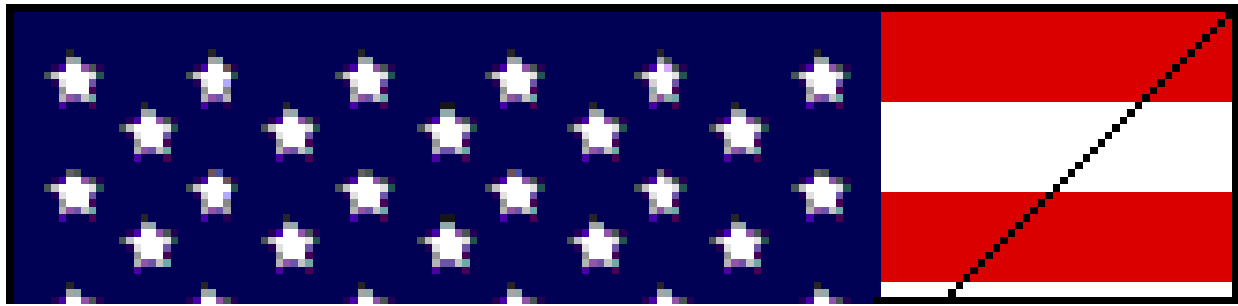
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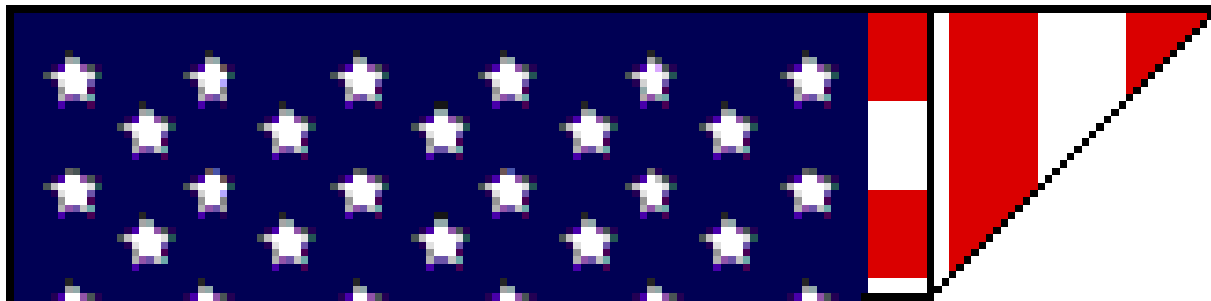
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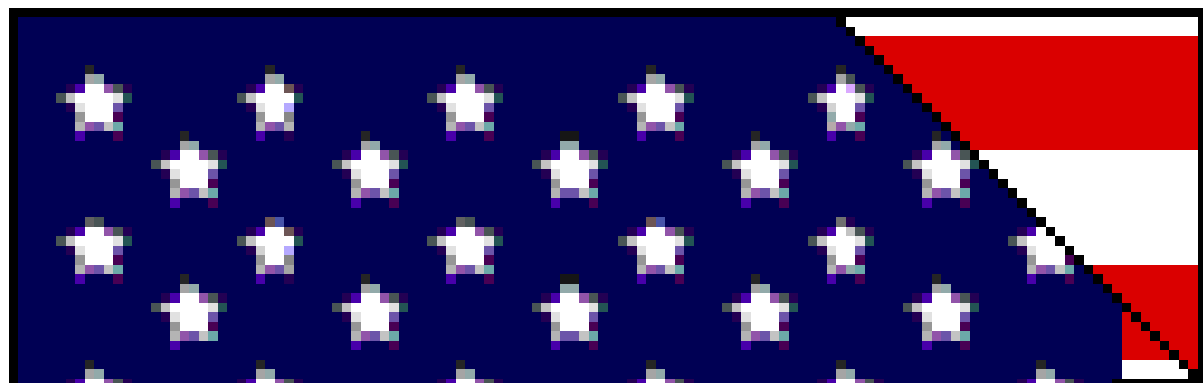
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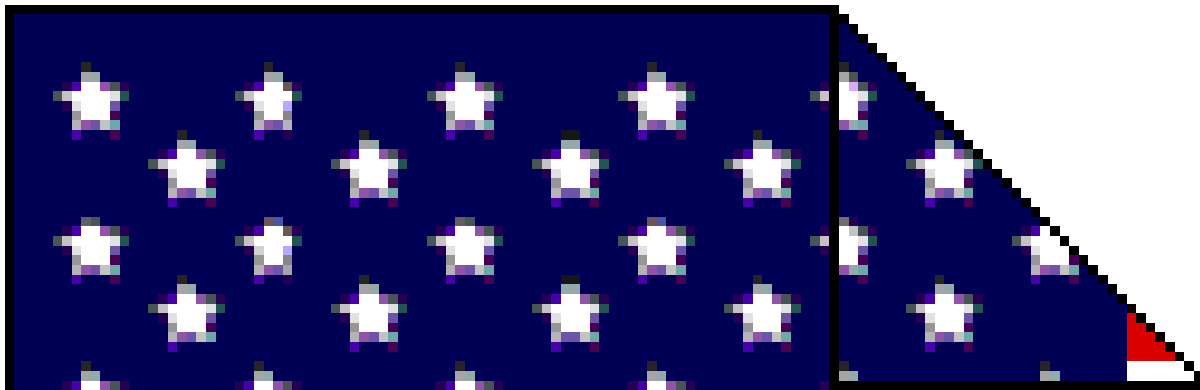
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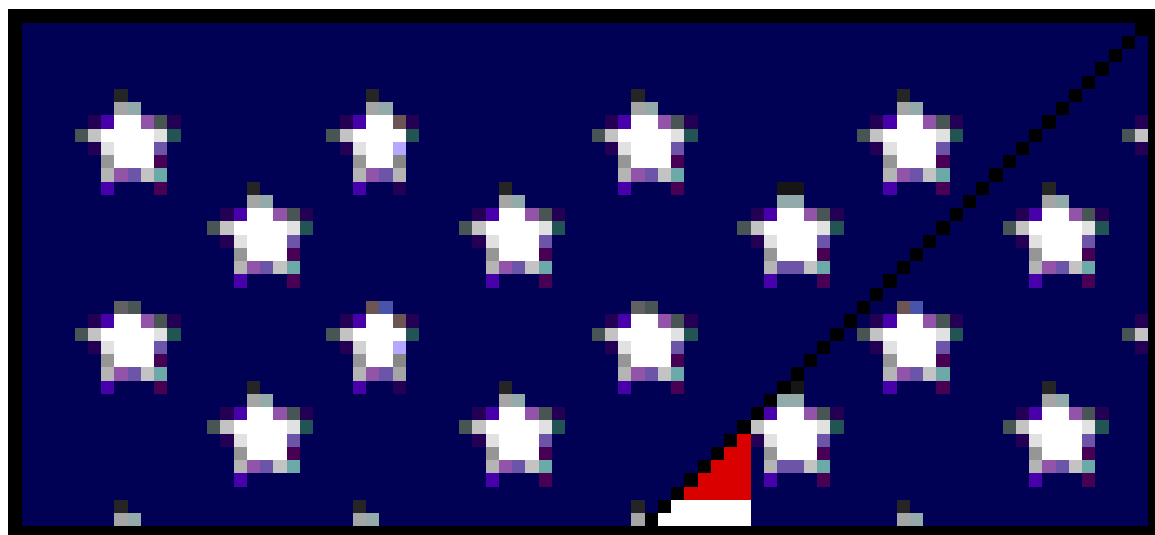
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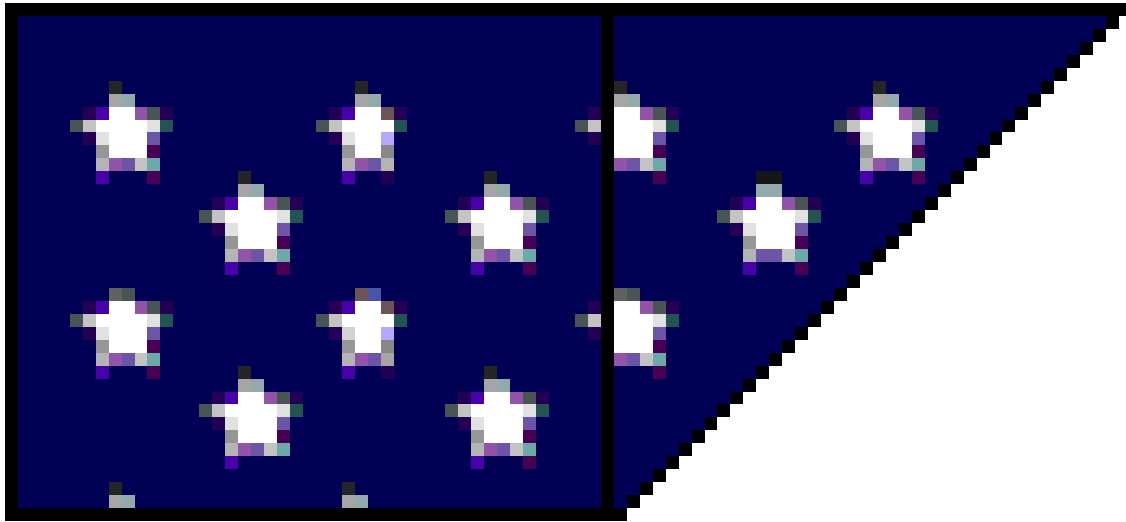
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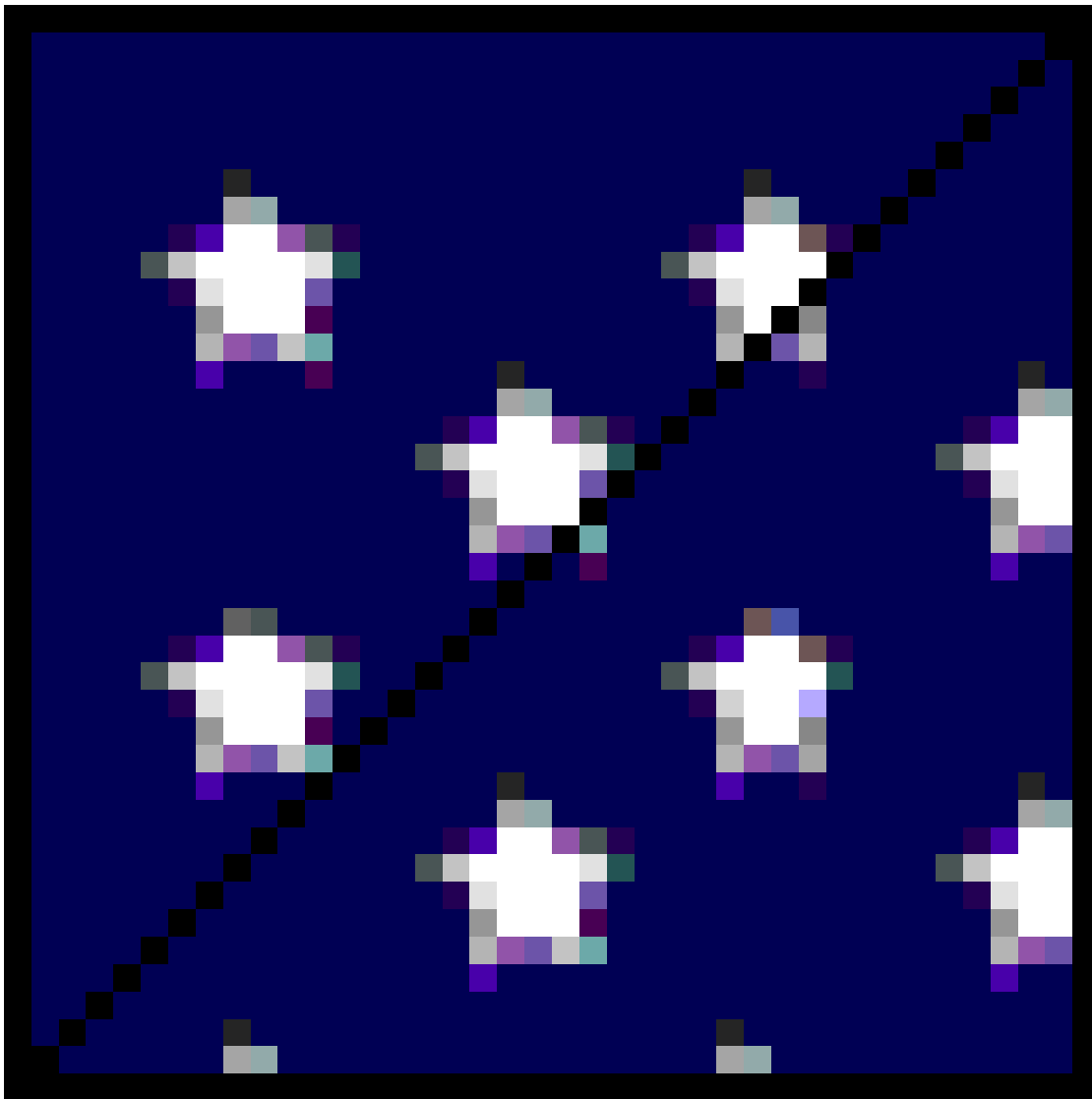
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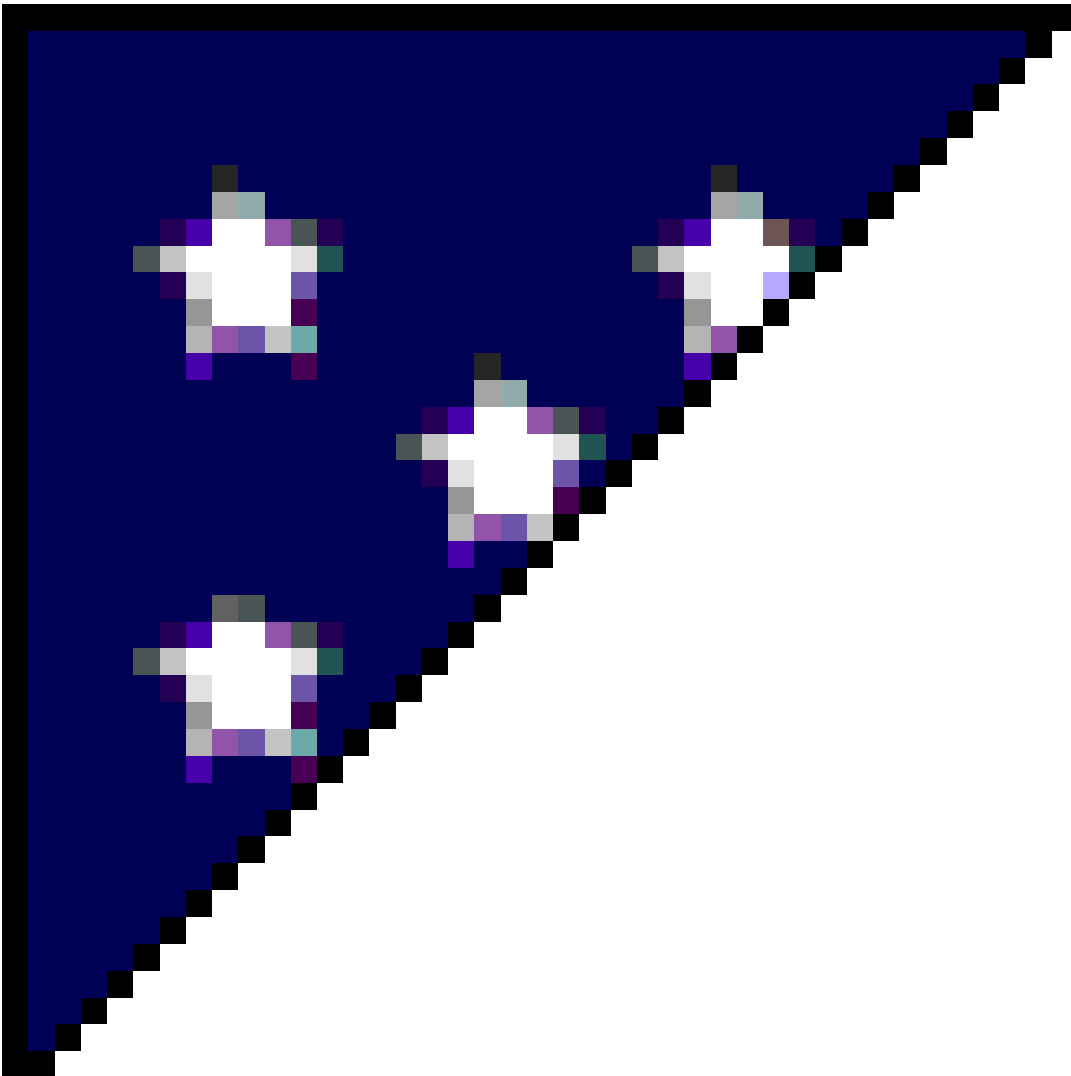
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The 13th fold



Seating Arrangements for a Police Funeral (One aisle setting)

USHERS' GUIDE

Choir	
Choir	
XX	
X	X
Pallbearers Active	Family
Pallbearers Honorary	Family
Pallbearers Honorary	Family
Firing Party	Family
Firing Party	Family
Color Guard – Bugler	Dignitaries
Officers	Dignitaries
Officers	Dignitaries
Officers	Dignitaries
Officers	Dignitaries
Officers	Dignitaries
Officers	Civilians
Officers	Civilians
Officers	Civilians
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Officers	Civilians

XX - Pulpit

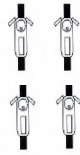
X - Position of Posted Colors

USHERS' GUIDE

XX - Pulpit
X - Position of Posted Colors

FUNERAL PROCESSION

FUNERAL PROCESSION



Motorcycle Escort



Funeral Director/Clergy



Pallbearers



Funeral Coach



Family (Immediate)



Family (Other)



Dignitaries



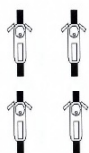
All Other Vehicles



Tail-end Vehicle

FUNERAL PROCESSION

FUNERAL PROCESSION



Motorcycle Escort



Police Vehicle



Funeral Director/Clergy



Pallbearers



Pallbearers



Funeral Coach



Family Vehicles



Other Vehicles



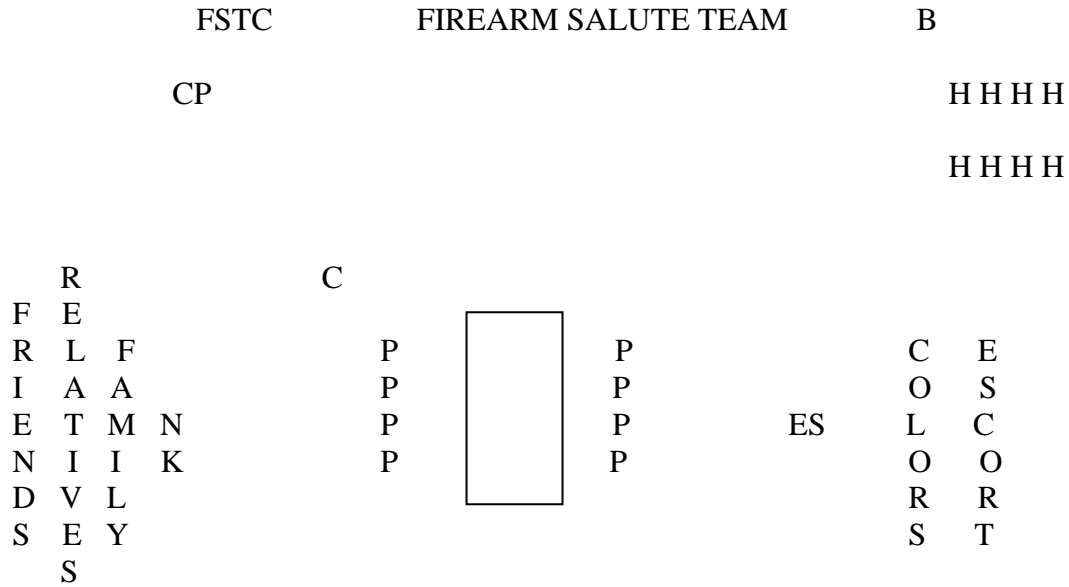
Rear Escort

CEMETERY SET-UP

CEMETERY SET-UP

BP

UNIFORMED OFFICERS



CP	Chief of Police
ES	Escort Supervisor
B	Bugler
BP	Bag Pipes
C	Clergy
H	Honorary Pallbearers
P	Pallbearers
FSTC	Firearms Salute Team Supervisor
NK	Next of Kin



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 22: EMS / Rescue Squad Funerals and Memorials Guidelines

If EMS or Rescue Squad does not have their own protocol in place please refer to Chapter 19 of this Volume which in turn will refer you to Volume 2 of this set. The goal is to help the agency during their time of grief.

We pray that no department has to ever face a LODD but in the event they do we hope that Chapter 19 will give them through their time of grief and stress in planning a funeral or memorial for a member.

See Chapter 19 for Guidelines of a Funeral or Memorial



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 23: Descriptions of the Positions under the Leadership of the CISM Team

Descriptions of the different positions under the leadership of the critical incident support team

To get the different levels of training, experience and knowledge for a Critical Incident Stress Management Team we used information from FEMA 508-2 Resource manual dated July 2005 along with our local guidelines and standards to come up with what is required to be a member of our local critical incident response team. We have 7 levels of training starting at the basic entry level going to Level 6 – Officer. To move up each level a person must complete the required training, have the required experience and completed the required paperwork for each level as well. We have included a copy of the front of FEMA 508-2 and page 8 of that document for reference.

CISM Type I Crisis Response Team Officer – Level 6

A description for this level of training can be found on page 3 of this section

CISM Type II Crisis Response Team Leader – Level 5

A description for this level of training can be found on page 4 of this section

CISM Type III Crisis Response Team – Supervisor – Level 4

A description for this level of training can be found on page 5 of this section

CISM Crisis Response Team Member – Provider - Level 3

A description for this level of training can be found on page 6 of this section

CISM Crisis Response Team Member – Provider – Level 2

A description for this level of training can be found on page 7 of this section

CISM Crisis Response Team Member – Provider – Level 1

A description for this level of training can be found on page 8 of this section

CISM Crisis Response Team Member – Basic Entry Level

Information taken from NIMS Web page

Information taken from NIMS Web page on Critical Incident Stress Management Team Leader Descriptions

Type I (1-2 Teams) Coordinators – The person in this position has experience as supervisor of CISM Team in large scale disaster situations in home and other States. Has extensive experience in CISM team administration and knowledge of ICISF standards. Completed certification from ICISF. Participated in training approved by ICISF.

Type II (1 Team Coordinator) - The person in this position has experience as supervisor of CISM Team in medium to large scale disaster situations in their home state. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST.

Type III (1 Team Coordinator) - The person in this position has experience as supervisor of CISM Team in small scale disaster situations in their home state. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST.

Crisis Response Team Officer (CRTO)

The Emotional and Spiritual Care Officer (CRTO) is responsible for managing emotional and spiritual support services on an emergency or disaster operation. This support includes external care for disaster victims, rescue workers and their families, and the general public as well as internal care for staff and volunteers.

CISM Type I Crisis Response Team - Officer – Level 6

The Crisis Response Team Officer (CRTO) is responsible for managing emotional and spiritual support services on an emergency or disaster operation. This support includes external care for disaster victims, rescue workers and their families, and the general public as well as internal care for staff and volunteers.

It is the primary responsibility of the Crisis Response Team Officer Level 6 to provide management of all components of the emotional and spiritual care and ensure that critical incident support exists throughout the entire emergency / disaster operation. The result may be that the CRTO may or may not provide personal provision of direct services. There are a number of core responsibilities of the CRTO that are critical to providing effect oversight of the chaplain program within an emergency or disaster operation as defined below. The CRTO may assign different Crisis Response Team members to assist in each of these key areas and responsibilities below.

(1) Assessment, (2) Development of an ESC plan, (3) Team formation, (4) Training, (5) Coordination, (6) Liaison, (7) Supervision and team care (8) Administration

This person in this position has experience as supervisor of CISM Team in large scale disaster situations in their home state and others. Has extensive experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST program. The person in this position usually will be located in the Command Post, Emergency Operations Center and will oversee the daily operations of the Crisis Response Teams. The Team Leaders will work under the Team Officer and coordinate all information and duties given from Team Officer back to their team members.

CISM Type II Crisis Response Team - Team Leader– Level 5

The Crisis Response Team Leader provides direct coordination of the CRT team under his or her direction. CRTs are often assigned by geographic location and provide direct services as well. Team leader duties may include: monitoring the well-being of the team, ensuring transportation and basic needs are met, compiling and report statistical data to the CRTO.

This person in this position has extensive experience as supervisor of CISM Team in medium to large scale disaster situations in their home state. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST. The person in this position has had experience in leading and overseeing the daily operations of CRT (Critical Response Teams) 5 to 7 teams with supervisor of each team answering back to Team Leader for that group of teams.

CISM Type III Crisis Response Team – Supervisor – Level 4

The Crisis Response Team - Supervisor is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors.

CRTS may be assigned to specific tasks, such as: Psychological first aid, Field Assessment, Small and large group debriefings, Chaplaincy functions for specific venues, Worship and memorial services, Daily devotions, Outreach, Training, Hospital / funeral visitation, CISM intervention services, Companionship, Information giving, and Greeter / crowd monitoring.

The person in this position can also be asked to supervise CRT Team members working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

This person in this position has extensive experience as supervisor of CISM Team in small scale disaster situations in their home state. Has experience in CISM team administration and knowledge of ICISF standards. Participated in training and completed certification from ICISF and local CIST. The person in this position has had experience in leading and overseeing the daily operations of a 5 to 7 person team.

CISM Crisis Response Team Member – Provider - Level 3

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors. The person in this position has had experience in leading and overseeing the daily operations of a 2 to 4 person team.

The person in this position as a CRT Team member will be working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

CISM Crisis Response Team Member – Provider - Level 2

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors. At no time are they to operate in any role without supervision from at least a Level 3 or higher Crisis Response Certificate of Completion team member.

The person in this position as a CRT Team member will be working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

CISM Crisis Response Team Member – Provider - Level 1

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role of meeting the emotional and spiritual needs of the staff, volunteers and disaster survivors. At no time are they to operate in any role without supervision from at least a Level 3 or higher Crisis Response Certificate of Completion team member.

The person in this position as a CRT Team member will be working with service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Emergency operations centers, Command center, Morgue staff support and Stress reduction centers.

CISM Crisis Response Team Member – Basic Entry Level

The Crisis Response Team Member is an integral part of the disaster operation and plays the critical role in assisting other team members in daily operations. At no time are they to operate in any role without supervision from at least a Level 3 or higher Crisis Response Certificate of Completion team member.

The person in this position as a CRT Team member will be working with other team members who are Level 3 or higher in service areas such as: Canteen crews, Disaster assistance centers, Cleanup crews, Assessments teams, Family assistance centers, Morgue staff support and Stress reduction centers.

Page 247 is a copy of the page off FEMA's Web page

RESOURCE: Critical Incident Stress Management Team						
CATEGORY: Health and Medical (ESF #8)			KIND:		Team	
MINIMUM CAPABILITIES:		TYPE I	TYPE II	TYPE III	TYPE IV	OTHER
COMPONENT	METRIC					
Personnel	Number of Team Coordinators	1-2	1	1		
Personnel	Team Coordinator Experience and Comprehension	Experience as supervisor of CISM Team in large-scale disaster situations in home and other States. Has extensive experience in CISM team administration and knowledge of ICISF standards.	Experience as supervisor of CISM Team in medium- to large-scale disaster situations in home State. Has extensive experience in CISM team administration and knowledge of ICISF standards.	Experience as supervisor of CISM Team in small-scale disaster situations in home State. Has experience in CISM team administration and knowledge of ICISF standards.		
Personnel	Team Coordinator Training	Completed certification from the ICISF. Participated in training approved by the ICISF	Completed certification from the ICISF. Participated in training approved by the ICISF	Participated in training approved by the ICISF		
Personnel	Number of team members See Note 1	10-15	2-4	1		
Personnel	Team member experience and comprehension	Experience as part of CISM Team in large-scale disaster situations in home and other States. Has extensive experience in CISM administration and knowledge of ICISF standards.	Experience as part of CISM Team in medium- to large- scale disaster situations in home State. Has extensive experience in CISM administration and knowledge of ICISF standards.	Experience as part of CISM Team in small-scale disaster situations in home State.		
Personnel	Team member training	Completed certification from the ICISF. Participated in training approved by the ICISF	Completed certification from the ICISF. Participated in training approved by the ICISF	Participated in training approved by the ICISF		





FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 24: The Debriefing Process

The Debriefing Process – Nine Step Process to Follow

1. **Pre-Debriefing Activities** – Before the meeting, the MH Professional and Peer Debriefers meet key personnel, review the “facts” of the incident, and organize the room and review group process and procedures.
2. **Introductory Phase** – Once the meeting starts, the MH Professional or “designated” Debriefers should introduce the team, describe and explain the debriefing process, and outline group rules.
3. **Fact Phase** – The team leader (MH Professional or “designated” Debriefers) will ask each participant to give name, job, role in the incident and what happened to them.
4. **Thought Phase** – During this phase, the participants are asked to share their observations or “thoughts” on what took place.
5. **Reaction Phase** – The Team Leader will ask participants to share their “reaction” to the incident or how it made them feel.
6. **Symptom Phase** – The Team Leader, along with the Peer Debriefers, will encourage participants to share any symptoms they may be experiencing.
7. **Teaching Phase** – During this phase an attempt will be made to explain the source of stress, give out information on coping, provide reassurance, and allow participants to ask questions.
8. **Re-entry Phase** – During the “wrap-up”, information will be offered concerning follow-up, participants will be allowed an opportunity to ask questions or state how they feel about the process, and lastly anyone displaying difficulty “handling” the situation will be asked to stay and speak with one of the Debriefers.

9. **Post-Debriefing Activities** – Following the meeting, the Debriefers stay around for participants to talk to Debriefers concerning personal issues if anyone wants to. The team members can “compare notes” to see if everyone felt okay about the debriefing and then have someone complete an activity report.

How to Set Up Debriefing

• DEBRIEFING

- This is a formal setting called into existence by leadership because of the incident that occurred on _____
- **There are rules for setting up the Debriefing**
Some of you do not want to be here. You feel you don't need a debriefing. Please stay.
- You don't have to speak, but if you do, what you may say could help one of your friends or family members.
- **What we say here stays here** (Heavily emphasize confidentiality) **Nothing leaves this room!!!!**
This debriefing is a discussion of an unusual event but it is not a critique or part of an investigation. No notes are allowed, no recordings, no media is allowed.
- We won't take breaks until we finish
- Speak for yourself, don't speak for others
- You don't have to say anything that will embarrass you or compromise a friend
- All radios, pagers and phones off please
- Only those related to this event are supposed to be here. (no reporters or unwelcome guests)
- Ask questions if you have them
These sessions often help to enhance a group's resilience, that is, the ability of the group to “bounce back” from a bad event like this.
We have found that people who talk about a bad event eat better, sleep better, remain healthier, stay on the job longer, and do not have as much disruption in their home lives.

This is not psychotherapy nor is it a substitute for psychotherapy. It is only a group support process.

Team Support after debriefing

Take a few moments for each other and debrief each other after a debriefing.

Did this stir any issues up for the debriefers?

If yes, ask the debriefer questions to see what concerns they have.

Manage your own stress before you help others, all the time.

Sample Protocol for Opening Discussion

I. Introduction

- A. Introduce process
- B. Encourage participation
- C. Set ground rules
- D. Have team introduce themselves**
- E. Have other introduce themselves**

II. Fact Phase

- A. Let each participant describe what happened
 - 1. What happened?**
 - 2. What was their role?**Tell us who you are, what your role was and what happen; describe the event from your perspective.
- B. Start with first person and go around in a circle

III. Thought Phase

- A. What was you first thought?**
- B. Begins transition from cognitive to emotional
- C. Incident becomes more personal

IV. Reaction Phase

- A. Share your reaction to the event**
 - B. What was the worst part for you?**
- Use your 5 senses to describe, Sight, sound, touch, smell, taste

V. Symptom Phase

Provide an opportunity to normalize the event and its impact on the individual.

- A. Share any unusual reactions that you had on scene or after**
- B. How was the incident different for you?
- C. How are you different because of the incident?
- D. What physical or behavioral changes have experience?
- E. What has life been like since this incident?

VI. Teaching Phase

- A. Reassurance that symptoms are normal**
- B. Teach additional signs and symptoms**
- C. Teach positive coping strategy**
- D. Answer Questions**

VII. Re-Entry Phase

- A. Wrap Up – closure by emphasizing normalization /effective summarization
- B. Answer further questions**
- C. Provide handouts to reinforce teaching objectives

CISM Tally Form is located on page 254

CISM TALLY FORM

Date of Debriefing_____ Time Debriefing Began_____ Ended at _____

Group(s) Debriefed_____

Agencies (please provide the number from each)

EMS_____ **Firefighters**_____ **Rescue**_____ **Law Enforcement**_____ **Dispatchers**_____

Hospital_____ **Other's (identify)**_____

Number of Hours Volunteered including the travel for each CISM Team Member.

Name	# of hours
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

Peer Debriefers' Signature_____ **Date**_____

You must return this form to Mike Futrell within three days of the debriefing. The address is 115 West Main Street, Lincolnton, North Carolina 28092, Fax # 704 732-9036, or call 704 736-8516.

Mental Health Report Portion (Confidential)

Brief History of Precipitating Event _____

General Organizational comments (strengths and weaknesses, observations) _____

Follow up recommendations (Suggestions and comments) _____

Signature of Mental Health _____ **Date**_____

Reviewed by _____ **Date**_____
(Clinical Director)

Follow up Survey is located on page 256

Follow up Survey

1. In what county did this event that precipitated the debriefing occur?

2. Circle your profession on this incident? Fire Police EMS Medical Dispatcher
First Responders Other

3. What is your age range?

18-24_____

45-54_____

25-34_____

55-64_____

35-44_____

65-up_____

4. Have you ever heard of Critical Incident Stress Debriefing? Yes___ No___

5. Did you know what a stress debriefing was before this one? Yes___ No___

6. Have you ever participated in a debriefing before? Yes___ No___

If yes, what organization did the debriefing? _____

Did they use peers from your profession in the debriefing? Yes___ No___

7. Did you find this debriefing to be.....?

Extremely Helpful_____ Not Very Helpful_____ Somewhat Helpful_____ Don't Know_____

8. What did you find helpful about this debriefing? _____

9. What if anything did you not like? _____

10. What suggestions do you have that might improve the team or the process?

11. Would you like to know more about Critical Incident Stress Debriefing?

Yes_____ No_____

Name (if you would like to include it)_____

You must return this form to Mike Futrell within three days of the debriefing. The address is 115 West Main Street, Lincolnton, North Carolina 28092, Fax # 704 732-9036, or call 704 736-8516.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 25: Disaster Deployment Action Plan

Disaster Deployment Action Plan for Lincoln County CRT Team

Disaster Deployments: ACTION PLAN for Lincoln County Crisis Response Team. There has to be procedures put into place to protect the safety of our team members, and to protect **LC** CRT regarding the liability that deploying can lead to. There are procedures that we all must follow when working in disaster areas for our own welfare.

1. Team Members will not self-deploy under any circumstances any National Disaster as a representative of **LC** CRT without going through the Senior Crisis Response Team Leader in charge of Disaster Deployments. There are many reasons for this!
2. All disasters are not the same, so if a team member or members are deployed to a disaster area the Senior Crisis Response Team Leader will have already established a contact person at the (EOC) Emergency Operation Center, if it be Homeland Security, FEMA, State, Local, or County Government Officials
3. Deployments most likely will be what we call Hardship Deployments; we may get a call from an EOC wanting say Five to Ten Crisis Response Team members ASAP. This means that the deployed members will pay for their transportation to and from the disaster area. **LC** CRT members will need their Lincoln County Emergency Services Crisis Response Team ID cards and all members who do have badges, they need to wear them. Please take into consideration your families that you will be leaving behind and the everyday business you conduct on a normal basis. Remember it is not a vacation, it is a serious endeavor and at all times chaplains will conduct themselves in a (Professional Manner) the safety of our team members is very important to us and their time given to help others.
4. Upon arrival at the EOC/Command Post/Staging Area, you will be processed and receive the proper ID, and shots for whatever the disaster may be.
5. Your accommodations will be taken care of by the agency you will be deployed to, it be a Motel, Church Hall, or tent or somewhere to lay your bedroll down. Before deployment we will know all the details, of whom our members will be reporting to, phone numbers etc.

6. **LC** CRT members must take their cell phone, pager or Satellite Phone with them which ever they have. The Deputy Chief Director in charge of Disaster Deployments or other Chief staff members will be checking in with you from time to time during your deployment.
7. **LC** CRT members will be deployed no more than (SEVEN DAYS AT ANY ONE GIVEN TIME) and that includes travel time. Remember none of us are heroes; we are there to help those who need us so pay attention and follow orders. If at any time a member feels their life may be in danger they are to without hesitation call either The Senior Crisis Response Team leader any time day or night 704-736-2164.



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 26: Classes needed for each level of Certificate of Completion for Lincoln County Crisis Response Team

Basic Entry Level

- ___ Defining the Roles of a Crisis Response (At least one of the following Fire, Police, BGRRT, Red Cross)
- ___ NIMS 800
- ___ Individual Crisis Intervention and Peer Support

Level 1 – Provider Level 1

- ___ Defining the Roles of a Crisis Response (At least one of the following Fire, Police, BGRRT, Red Cross)
- ___ NIMS 800
- ___ NIMS 700
- ___ Individual Crisis Intervention and Peer Support
- ___ Group Crisis Intervention
- ___ Red Cross Psychological First Aid Class/Fulfilling Our Mission and CBRNE

Level 2 – Provider Level 2

- ___ Defining the Roles of a Crisis Response (At least one of the following Fire, Police, BGRRT, Red Cross)
- ___ Individual Crisis Intervention and Peer Support
- ___ Group Crisis Intervention
- ___ Pastoral Crisis Intervention I
- ___ Stress Management for the Trauma Services Provider
- ___ NIMS 800
- ___ NIMS 700
- ___ NIMS 100
- ___ Red Cross Psychological First Aid Class/Fulfilling Our Mission and CBRNE

Level 3 – Provider Level 3

- ___ Individual Crisis Intervention and Peer Support
- ___ Group Crisis Intervention
- ___ Pastoral Crisis Intervention I
- ___ Stress Management for the Trauma Services Provider
- ___ NIMS 800
- ___ NIMS 700
- ___ NIMS 100
- ___ NIMS 200
- ___ Pastoral Crisis Intervention II
- ___ CISM Application with Children
- ___ Suicide Prevention, Intervention & Postvention
- ___ Emotional and Spiritual Care in Disasters
- ___ Red Cross Psychological First Aid Class/Fulfilling Our Mission and CBRNE
- ___ Billy Graham Rapid Response Training

Level 4 – Supervisor

- ___ Individual Crisis Intervention and Peer Support
- ___ Group Crisis Intervention
- ___ Pastoral Crisis Intervention I
- ___ Stress Management for the Trauma Services Provider
- ___ NIMS 800
- ___ NIMS 700
- ___ NIMS 100
- ___ NIMS 200
- ___ CISM Application with Children
- ___ Suicide Prevention, Intervention & Postvention
- ___ Pastoral Crisis Intervention II
- ___ Advance Group Crisis Intervention
- ___ Managing School Crises: From Theory to Application
- ___ Strategic Response to Crisis
- ___ Emotional and Spiritual Care in Disasters
- ___ Red Cross Psychological First Aid Class/Fulfilling Our Mission and CBRNE
- ___ Billy Graham Rapid Response Training

Level 5 – Team Leader

- ___ Individual Crisis Intervention and Peer Support
- ___ Group Crisis Intervention
- ___ Pastoral Crisis Intervention I
- ___ Stress Management for the Trauma Services Provider
- ___ NIMS 800
- ___ NIMS 700
- ___ NIMS 100
- ___ NIMS 200
- ___ NIMS 300
- ___ CISM Application with Children
- ___ Suicide Prevention, Intervention & Postvention
- ___ Law Enforcement Perspectives for CISM Enhancement
- ___ Pastoral Crisis Intervention II
- ___ Advance Group Crisis Intervention
- ___ **Managing School Crises: From Theory to Application**
- ___ Strategic Response to Crisis
- ___ Emotional and Spiritual Care in Disasters
- ___ Grief Following Trauma
- ___ Red Cross Psychological First Aid Class/Fulfilling Our Mission and CBRNE
- ___ Billy Graham Rapid Response Training

Level 6 – Officer

- ___ Individual Crisis Intervention and Peer Support
- ___ Group Crisis Intervention
- ___ Pastoral Crisis Intervention I
- ___ Stress Management for the Trauma Services Provider
- ___ NIMS 800
- ___ NIMS 700
- ___ NIMS 100
- ___ NIMS 200
- ___ NIMS 300
- ___ NIMS 400
- ___ CISM Application with Children
- ___ Suicide Prevention, Intervention & Postvention
- ___ Law Enforcement Perspectives for CISM Enhancement
- ___ Advance Group Crisis Intervention
- ___ Managing School Crises: From Theory to Application
- ___ Strategic Response to Crisis
- ___ Emotional and Spiritual Care in Disasters
- ___ Pastoral Crisis Intervention II
- ___ Grief Following Trauma
- ___ Line of Duty Death Preparing for the Best for the Worst
- ___ Red Cross Psychological First Aid Class/Fulfilling Our Mission and CBRNE
- ___ Billy Graham Rapid Response Training



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 27: Application Process for Applying for each Level of Certificate of Completion

Application for Certificate of Completion see on page 274

Application for Certificate of Completion
From The Academy - NICRT

Prefix: _____ Name _____
(Mr./Mrs./Rev./Dr.) Last First
Middle

Address: _____
Number Street City State
Zip

Home: (____) - _____ Work: (____) - _____ Cell: (____) - _____

Pager: (____) - _____ Fax: (____) - _____

E-mail: _____ Spouse's name: _____

Denomination: _____ Number of years in ministry: _____

Education: College: _____ Degree received: _____

Graduate: _____ Degree received: _____

Seminary: _____ Degree received: _____

Have you taken any classes related to crisis response training? _____. If so please provide copies of classes with application.

Are you a certified chaplain? _____. If so provide a copy of your certification with application.

What experience do you have in counseling and critical stress incident response and debriefings? _____

Do you have any experience working with emergency service agencies or disaster response groups? _____.
(ex. Fire, EMS, Law Enforcement, Billy Graham Rapid Response Team, Red Cross and etc.)

If so please list what agencies you have worked with in the past and a contact person & number.

Number of years' experience in crisis response _____. How long have you been responding to help others either individually _____ or as part of a team _____. How many one on ones have you done _____ and how many group debriefings have you been a part of _____.

Other items that must be turned in with application for certificate

Other items that must be turned in with application

- (1) Letter of Recommendation/Endorsement from an agency you will be working with.
- (2) Letter of Recommendation/Endorsement from individual who is on a crisis response team.
- (3) Letter of Recommendation/Endorsement from your church leader.
- (4) List of three references with contact address and phones for each and how long you have known that person.
- (5) Copy of all training certificates you may have already taken dealing with crisis response.
- (6) A copy of the certificate of completion you are requesting credit for with each of the classes marked off showing you have completed them. It is your responsibility to turn in copies of the classes taken to match the certificate of completion you are requesting. Without the correct copies attached to the certificate it will not be issued.
- (7) List of events/responses you have worked on or helped with.
- (8) Authorization and Release form for background checks filled out front and back, signed and notarized front and back.
- (9) All paperwork must be turned in 30 days prior to graduation date.

Pages 277 to 283 depending on level you are applying for, that level certificate

Depending on which level of certificate of completion you are applying for that level must be turned in with your application.

Pages 284 to 290 are samples of what the Certificate will look like for each level of completion.

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT



NAME



HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – BASIC ENTRY LEVEL

This “Basic Entry Level Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NISM, which consists of the following classes:

___ Defining the Roles of Crisis Responder ___ ICS 700 ___ Individual Crisis Intervention and Peer Support

This copy of this certificate is part of the application process only. The _____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME



HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING - LEVEL 1 - PROVIDER

This “Level I Training Certificate of Completion” attests to the completion of a standardized curriculum in
Crisis Intervention and NISM, which consists of the following classes:

___ Defining the Roles of Crisis Responder ___ ICS 700 ___ Individual Crisis Intervention and Peer Support
___ ICS 800 ___ Group Crisis Intervention ___ Red Cross Psychological First Aid

This copy of this certificate is part of the application process only. The _____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR

CRISIS RESPONSE TRAINING – LEVEL 2 - PROVIDER

This “Level II Training Certificate of Completion” attests to the completion of a standardized curriculum in
Crisis Intervention and NIMS, which consists of the following classes:

_____ Defining the Roles of a Crisis Responder _____ Individual Crisis Intervention and Peer Support _____ Group Crisis Intervention
_____ Pastoral Crisis Intervention I _____ NIMS 700 _____ NISM 800 _____ NIMS 100
_____ Stress Management for the Trauma Services Provider _____ Red Cross Psychological First Aid

This copy of this certificate is part of the application process only. The _____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT



NAME



HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – LEVEL 3 - PROVIDER

This “Level III Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS, which consists of the following classes:

☐ Defining the Roles of a Crisis Responder ☐ Individual Crisis Intervention and Peer Support ☐ Group Crisis Intervention
☐ Pastoral Crisis Intervention I ☐ Stress Management for the Trauma Services Provider ☐ Pastoral Crisis Intervention II
☐ CISM Application with Children ☐ Suicide Prevention, Intervention & Postvention ☐ NIMS 700 ☐ NIMS 800
☐ Emotional and Spiritual Care in Disasters ☐ NIMS 100 ☐ NIMS 200 ☐ Red Cross Psychological First Aid
☐ Billy Graham Rapid Response Training

This copy of this certificate is part of the application process only. The _____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

Name



HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – Level 4 - SUPERVISOR

This “Level IV Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS
which consists of the following classes:

- ___ Defining the Roles of a Crisis Responder ___ Individual Crisis Intervention and Peer Support ___ Group Crisis Intervention
- ___ Pastoral Crisis Intervention ___ Stress Management for the Trauma Services Provider ___ Pastoral Crisis Intervention II
- ___ CISM Application with Children ___ Suicide Prevention, Intervention & Postvention ___ NIMS 700 ___ NIMS 800
- ___ Law Enforcement Perspectives for CISM Enhancement ___ NIMS 100 ___ NIMS 200 ___ Advance Group Crisis Intervention
- ___ Managing School Crises: From Theory to Application ___ Strategic Response to Crisis
- ___ Emotional and Spiritual Care in Disasters ___ Red Cross Psychological First Aid ___ Billy Graham Rapid Response Training

This copy of this certificate is part of the application process only. The _____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING

CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT



NAME



HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – Level 5 - TEAM LEADER

This “Level V Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS
which consists of the following classes:

____ Defining the Roles of a Crisis Responder ____ Individual Crisis Intervention and Peer Support ____ Group Crisis Intervention
____ Pastoral Crisis Intervention I ____ Stress Management for the Trauma Services Provider ____ Pastoral Crisis Intervention II
____ CISM Application with Children ____ Suicide Prevention, Intervention & Postvention ____ NIMS 700 ____ NIMS 800
____ Law Enforcement Perspectives for CISM Enhancement ____ NIMS 100 ____ NIMS 200 ____ NIMS 300
____ Advance Group Crisis Intervention ____ Managing School Crises: From Theory to Application ____ Strategic Response to Crisis ____
Grief Following Trauma ____ Emotional and Spiritual Care in Disasters ____ Red Cross Psychological First Aid
____ Line of Duty Death Preparing the Best for the Worst ____ Billy Graham Rapid Response Training

This copy of this certificate is part of the application process only. The _____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____

Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME



HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – Level 6 - OFFICER

This “Level VI Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS
which consists of the following classes:

___ Defining the Role of a Crisis Responder ___ Individual Crisis Intervention and Peer Support ___ Group Crisis Intervention
___ Pastoral Crisis Intervention I ___ Stress Management for the Trauma Services Provider ___ Pastoral Crisis Intervention II
___ CISM Application with Children ___ Suicide Prevention, Intervention & Postvention ___ Grief Following Trauma
___ Law Enforcement Perspectives for CISM Enhancement ___ Advance Group Crisis Intervention
___ Managing School Crises: From Theory to Application ___ Strategic Response to Crisis ___ NIMS 700 ___ NIMS 800
___ Emotional and Spiritual Care in Disasters ___ Line of Duty Death Preparing the Best for the Worst ___ NIMS 100
___ NIMS 200 ___ NIMS 300 ___ NIMS 400 ___ Red Cross Psychological First Aid ___ Billy Graham Rapid Response Training

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ___ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – BASIC ENTRY LEVEL



This “Basic Entry Level Training Certificate of Completion” attests to the completion of a standardized curriculum in
Crisis Intervention and NISM, which consists of the following classes:

___ Defining the Roles of Crisis Responder ___ ICS 700 ___ Individual Crisis Intervention and Peer Support

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ___ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

Certificate # _____

Dr. Tina S. Brookes
Assistant Director and Chief Training Officer
The Academy – National Institute for Crisis Response Training

Charles M. Futrell
Director and Coordinator of
The Academy – National Institute for Crisis Response Training

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING - LEVEL 1 - PROVIDER



This “Level I Training Certificate of Completion” attests to the completion of a standardized curriculum in
Crisis Intervention and NISM, which consists of the following classes:

___ Defining the Roles of Crisis Responder ___ ICS 700 ___ Individual Crisis Intervention and Peer Support
___ ICS 800 ___ Group Crisis Intervention ___ Red Cross Psychological First Aid

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ___ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

Certificate # _____

Dr. Tina S. Brookes
Assistant Director and Chief Training Officer
The Academy – National Institute for Crisis Response Training
Training

Charles M. Futrell
Director and Coordinator of
The Academy – National Institute for Crisis Response Training

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – LEVEL 2 - PROVIDER



This “Level II Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS, which consists of the following classes:

_____ Defining the Roles of a Crisis Responder _____ Individual Crisis Intervention and Peer Support _____ Group Crisis Intervention
_____ Pastoral Crisis Intervention I _____ NIMS 700 _____ NISM 800 _____ NIMS 100
_____ Stress Management for the Trauma Services Provide _____ Red Cross Psychological First Aid

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

Certificate # _____

Dr. Tina S. Brookes
Assistant Director and Chief Training Officer
The Academy – National Institute for Crisis Response Training

Charles M. Futrell
Director and Coordinator of
The Academy – National Institute for Crisis Response Training

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – LEVEL 3 - PROVIDER



This “Level III Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS, which consists of the following classes:

____ Defining the Roles of a Crisis Responder ____ Individual Crisis Intervention and Peer Support ____ Group Crisis Intervention
____ Pastoral Crisis Intervention I ____ Stress Management for the Trauma Services Provider ____ Pastoral Crisis Intervention II
____ CISM Application with Children ____ Suicide Prevention, Intervention & Postvention ____ NIMS 700 ____ NIMS 800
____ Emotional and Spiritual Care in Disasters ____ NIMS 100 ____ NIMS 200 ____ Red Cross Psychological First Aid
____ Billy Graham Rapid Response Training

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

Certificate # _____

Dr. Tina S. Brookes
Assistant Director and Chief Training Officer
The Academy – National Institute for Crisis Response Training

Charles M. Futrell
Director and President of
The Academy – National Institute for Crisis Response Training

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

Name

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – Level 4 - SUPERVISOR



This “Level IV Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS which consists of the following classes:

____ Defining the Roles of a Crisis Responder ____ Individual Crisis Intervention and Peer Support ____ Group Crisis Intervention
____ Pastoral Crisis Intervention ____ Stress Management for the Trauma Services Provider ____ Pastoral Crisis Intervention II
____ CISM Application with Children ____ Suicide Prevention, Intervention & Postvention ____ NIMS 700 ____ NIMS 800
____ Law Enforcement Perspectives for CISM Enhancement ____ NIMS 100 ____ NIMS 200 ____ Advance Group Crisis Intervention
____ Managing School Crises: From Theory to Application ____ Strategic Response to Crisis
____ Emotional and Spiritual Care in Disasters ____ Red Cross Psychological First Aid ____ Billy Graham Rapid Response Training

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____
Signature

Certificate # _____

Dr. Tina S. Brookes
Assistant Director and Chief Training Officer
The Academy – National Institute for Crisis Response Training

Charles M. Futrell
Director and Coordinator of
The Academy – National Institute for Crisis Response Training

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – Level 5 - TEAM LEADER



This “Level V Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS which consists of the following classes:

____ Defining the Roles of a Crisis Responder ____ Individual Crisis Intervention and Peer Support ____ Group Crisis Intervention
____ Pastoral Crisis Intervention I ____ Stress Management for the Trauma Services Provider ____ Pastoral Crisis Intervention II
____ CISM Application with Children ____ Suicide Prevention, Intervention & Postvention ____ NIMS 700 ____ NIMS 800
____ Law Enforcement Perspectives for CISM Enhancement ____ NIMS 100 ____ NIMS 200 ____ NIMS 300
____ Advance Group Crisis Intervention ____ Managing School Crises: From Theory to Application ____ Strategic Response to Crisis
____ Grief Following Trauma ____ Emotional and Spiritual Care in Disasters ____ Red Cross Psychological First Aid
____ Line of Duty Death Preparing the Best for the Worst ____ Billy Graham Rapid Response Training

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ____ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____

Signature

Certificate # _____

Dr. Tina S. Brookes
Assistant Director and Chief Training Officer
The Academy – National Institute for Crisis Response Training

Charles M. Futrell
Director and Coordinator of
The Academy – National Institute for Crisis Response Training

CERTIFICATE OF COMPLETION

THE ACADEMY – NATIONAL INSTITUTE for CRISIS RESPONSE TRAINING
CRISIS RESPONSE TRAINING PROGRAM

HEREBY ATTESTS THAT

NAME

HAS SUCCESSFULLY COMPLETED THE REQUIREMENTS FOR
CRISIS RESPONSE TRAINING – Level 6 - OFFICER



This “Level VI Training Certificate of Completion” attests to the completion of a standardized curriculum in Crisis Intervention and NIMS which consists of the following classes:

___ Defining the Role of a Crisis Responder ___ Individual Crisis Intervention and Peer Support ___ Group Crisis Intervention
___ Pastoral Crisis Intervention I ___ Stress Management for the Trauma Services Provider ___ Pastoral Crisis Intervention II
___ CISM Application with Children ___ Suicide Prevention, Intervention & Postvention ___ Grief Following Trauma
___ Law Enforcement Perspectives for CISM Enhancement ___ Advance Group Crisis Intervention
___ Managing School Crises: From Theory to Application ___ Strategic Response to Crisis ___ NIMS 700 ___ NIMS 800
___ Emotional and Spiritual Care in Disasters ___ Line of Duty Death Preparing the Best for the Worst ___ NIMS 100
___ NIMS 200 ___ NIMS 300 ___ NIMS 400 ___ Red Cross Psychological First Aid ___ Billy Graham Rapid Response Training

This certificate does not indicate competence in the field, but rather the completion of the curriculum. The ___ day of _____ of _____

Notarized _____ Date: _____ Date my commission expires _____

Signature

Certificate # _____

Dr. Tina S. Brookes
Vice President - Education and Training Division
The Academy – National Institute for Crisis Response Training

Charles M. Futrell
Director and Coordinator of
The Academy – National Institute for Crisis Response Training



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 28: Notification of Clergy

Notification of Clergy Process

During an emergency where it is an injury, sickness or death there will be times that you will need to contact the individual's clergy, pastor, priest, Rabbi, Spiritual Leader whoever it may be. You need to know where to find a list of numbers so you can at least try and notify someone for the individual when requested. There are some factors such as the time of death, the place where the death occurred, and the relationship between the family and clergy will play a role in the family's decision as to the appropriate time to notify the clergy that the death has occurred. This might especially be true in those cases when the death was expected and where the sacrament of the sick had already been administered. Always check with the individuals before notifying anyone. Ask them if they would like for you call anyone, if they would like for you to notify anyone from their church (they may say yes, or they may say they do not have a church or pastor at this time). Before calling family members may sure you have been given clearance from the individual to call any family members for them.

List of Churches in Lincoln County

The rest of this chapter is a list of Churches to contact for assistance or to notify them of one of their members in need

NAME	ADDRESS	Pastor/Rev/Priest	Phone #
Amity Baptist Church	881 Amity Church Rd.	Rev Jeff Kincaid	704-735-4340
Antioch Baptist Church	3387 E. 150 Hwy.		704-732-1351
Asbury United Methodist Church	3097 Asbury Church Road	Pastor Anita Sain	704-735-648
Bess Chapel Methodist Church	6073 Flay Rd.		
Beth Haven Baptist Church	1783 Beth Haven Church Rd.		704-483-2635
Bethel Baptist Church	200 Bethel Church Rd,	Pastor Larry Little	704-735-8357
Bethel Lutheran / NALC	509 Long Shoals	Rev. Steven King	704-922-5487
Bethel United Methodist Church	7284 Camp Ground Road		704-483-1366
Bethlehem Methodist Church	6771 Hwy. 182		
Bethpage Lutheran Church	4060 Hwy. 182	Pastor Fred Mitchike	704-735-8405
Brevard's Chapel United Methodist Church	6943 Camp Ground Road		704-483-746
Blazin' Trails Cowboy Church	1222 Ponderosa Road	Pastor Harry Gates	980-241-1251
Boger City Baptist Church	2201 East Main Street	Pastor Bill Bigham	704-735-5642
Boger City United Methodist Church	2320 East Main Street	Rev. Eric Reece	704-735-7513
Boger City Wesleyan	2803 East Hwy 27	Rev. J.V. Allen	704-735-4681
Brevard's Chapel Church	6941 Campground Rd./PO 684		704-483-7446
Buffalo Shoals Baptist Church	1744 Buffalo Shoals Rd.	Rev. Roy Lanier	704-736-1656
Calvary Baptist Church	493 Calvary Church Road	Pastor David Jones	704-735-9976
Calvary Hispanic Missionary Church	493 Calvary Church Road		704-735-9976
Cedar Grove Baptist Church	6105 Startown Road		828-428-4307
Cedar Grove Lutheran Church	261 Cedar Grove Church Rd.	Pastor Dale Pederson	704-276-2430
Center View Baptist Church	3976 East Maiden Road		828-428-3086
Church of Jesus Christ of Latter Day Saints	105 Old Train Street		704-735-1504
Church of Our Savior-Episcopal	1128 Hwy. 182		
Commandment Keepers Church	982 Horseshoe Lake Rd.		
Community Full Gospel Church	2787 Gastonia Hwy.		
Community Praise & Worship Center	3301 Hog Hill Rd.		
Coral Park Baptist Church	295 Springs East Rd.		
Cornerstone Baptist Church	409 East Main Street		828-428-0101
Cornerstone Independent Baptist Church	706 South Madison Street	Pastor Chip Stowe	704-618-8675
Covenant Bible Church	2166 Gastonia Hwy	Rev. Mike Devine	704-735-1559
Craig Memorial Baptist Church	1246 Mariposa Road		704-263-8321
Crouse Baptist Church	2764 St. Marks Ch. Rd.		704-747-2775
Crouse United Methodist Church	3311 Crouse School Rd.	Rev. Jim Sanders	704-735-2443
Crowell Memorial Methodist Church	4018 Killian Rd.	Pastor Freida Hobson	704-735-8889
Daniels Lutheran Church	3170 Reepsville Rd.	Pastor Lewis Murdock	704-735-2388
David Memorial Baptist Church	2533 Country Club Rd.		704-735-5481
David's Chapel United Methodist Church	784 David's Chapel Ch. Rd.		
Daystar FWS Church of God	115 Industrial Park Drive	Rev. Joey Williams	704-736-9949
Denver Baptist Church	6955 Forest Hills Dr.		704-483-3030
Denver Gospel Hall Assembly	4733 Hwy 16 North		704-489-8822
Denver United Methodist Church	3910 N. 16 Hwy.		704-483-1601
Denver Wesleyan Church	2381 N. 16 Hwy.		704-483-0469
East Lincoln Missionary Baptist Church	Hwy. 73		

NAME	ADDRESS	Pastor/Rev/Priest	Phone #
East Maiden Baptist Church	1400 East Maiden Road		828-428-8451
East Wind United Pentecostal Church	3617 E. 27 Hwy.		704-736-9162
Ebenezer United Methodist Church	8510 Unity Church Rd.		704-483-6407
Edwards Chapel Baptist Church	8615 Hebron Church Rd.		
El Shaddai Full Gospel Baptist Church	4953 E. 27 Hwy.		704-732-1355
Emmanuel Independent Baptist Church	102 Iron Station Road	Pastor Dr. Richard King, Sr.	704-718-8239
Emmanuel Lutheran Church / ELCA	216 South Aspen Street	Pastor Michael Collins	704-735-9033
Emmanuel Reformed Church	329 East Main Street	Dr. J. Keith Brown	704-735-8486
Exodus Baptist Church	3164 Exodus Church Rd.		
Fairfield Methodist Church	7860 Fairfield Forest Rd.		704-483-6407
Fairview Baptist Church	5051 Fairview Church Rd.		704-460-5080
Faith Baptist Church	5194 Old Plank Rd.	Pastor Michael D. Scott, Jr.	704-735-9820
Fellowship Baptist Church	2891 Long Circle		
First Assembly of God Church	3090 East Hwy. 27		
Frist Baptist Church	201 Robin Road	Dr. Stanley W. Spencer	704-732-1101
First Baptist Church High Shoals	600 North Lincoln Street	Dr. Doug McClain	704-735-5652
First Christian Church Disciples of Christ	735 Buffalo Shoals Rd.		704-735-9843
First Presbyterian Church	114 West Main Street	Rev. Veronica Cannon	704-735-5671
First UMC	201 East Main Street	Sr. Pastor Rev. David Wyant	704-735-7489
Free In Him Ministries	102 West Main Street		704-530-6044
Freedom Church	125 East Main Street		336-609-2172
Freedom Biker Church	1385 33 rd Street SE		704-325-3185
Friendly Chapel Baptist Church	6815 East Hwy. 150		704-489-9728
Gainesville Baptist Church	276 Gainesville Church Rd.		704-732-0293
Gloryland Missionary Baptist Church	3925 King Wilkinson Rd.	Pastor Macon N. Ballard	704-732-1947
Gold Hill Baptist Church	7447 Old Plank Rd.		
Grace Baptist Church	495 Horseshoe Lake Rd.	Pastor Bobby Jones	704-735-1390
Grace Covenant Fellowship	3816 North Hwy. 16		
Grace Covenant – East Lincoln Sally's YMCA	1601 Forney Creek Parkway	Pastor Farrell Lemings	704-892-8005
Harvest Time Baptist Church	904 Ivey Church Rd.		828-428-3185
Harvest Church PCA	707 Lithia Inn Road		704-732-9978
Harvest Cove Community Church	3608 Hwy 16 North		704-489-2305
Heavenly View Baptist Church	1000 Shady Retreat Lane		
Hebron Methodist Church	7929 Hwy. 27		704-276-1411
Hickory Creek Church of Christ	7903 Hickory Creek Dr.		
High Shoals First Baptist Church	600 Lincoln Street	Dr. Doug McClain	704-735-5652
Highland Drive Free Will Baptist Church	2610 Highland Drive	Pastor Luke Johnson	704-735-0074
Hill Chapel United Methodist Church	988 South Hwy. 16		
Hills Chapel United Methodist Church	982 South Hwy. 16		
Hinton Memorial United Methodist Church	830 Car Farm Rd.		704-732-0931
Holy Cross Lutheran Church	2639 East Hwy. 150	Rev. Chad Walker	704-732-0251
Holy Ground Baptist Church	4249 Randleman Rd.		

NAME	ADDRESS	Pastor/Rev/Priest	Phone #
Holy Spirit Catholic Church	537 North Hwy. 16		704-483-6448
Hope Baptist Church	571 Salem Church Road	Rev. Justin Houser	704-732-9374
Hour of Truth Church	173 Horseshoe Lake Rd.		
Howards Creek Baptist Church	3118 Hwy. 27		704-530-8733
Hudson Chapel	6474 Hudson Chapel Road		828-241-9696
Hulls Grove Baptist Church North	270 Car Farm Road		704-732-1191
Hulls Grove Baptist Church West	6263 Hwy. 27		704-276-1181
Indian Creek Primitive Baptist Church	5569 Indian Creek Primitive Ch. Rd		
Iron Station Church of God	5477 East Hwy. 27		
Iron Station United Methodist Church	4754 East Hwy. 27	Rev. Carolyn Sears	704-735-6453
Iron Station Midyear Baptist Church	2583 Will Schronce Rd.		
Ironton Presbyterian Church	1405 Depot Street		
Ivey Memorial United Methodist Church	1360 Ivey Church Rd.	Rev. James R. Matthews	704-868-4817
Kingdom Hall of Jehovah's Witness	855 buffalo Shoals Rd.		
Laboratory United Methodist Church	1830 Bill Lynch Rd.	Pastor Charlene Hutchings	704-735-6605
Lake Norman Lutheran Church	1420 North Hwy. 16		704-483-2130
Lake Side Church of God	6636 Pine Ridge Road		704-996-1226
Lake Shore Presbyterian Church	8083 Hope Dr.		
Laurel Hill Methodist Church	731 North Hwy. 18		
Lawings Chapel	4637 Lawing Chapel Church Road		828-428-8841
Leonard's Fork Baptist Church	1462 Leonard's Ford Church Rd.		704-735-2117
Liberty Baptist Church	2054 West Maiden Road		828-428-2278
Lincoln Avenue Baptist Church	619 South Grove Street	Pastor Ken Jones	704-735-8057
Lincoln Church of Christ	3781 East Hwy. 27		
Lincolnton Church of God	Hwy 150 Bypass West	Pastor Dr. Richard A. King, Sr.	704-732-0012
Lincolnton Congregation of Jehovah's Witnesses	855 Buffalo Shoals Road	704-735-8538	
Lincolnton First Baptist Church	201 Robin Road	Dr. Stanley W. Spencer	704-732-1101
Links Chapel AME Zion Church	1642 Hwy. 73		704-732-4779
Long Shoals Baptist Church	2988 Longs Shoals Rd.	Rev. Ken Gibson	704-736-1106
Long Shoals Wesleyan Church	3032 Wesleyan Ch. Rd.		704-732-1617
Macedonia Baptist Church	5286 East Hwy. 150	Pastor Randy Setzer	704-735-3287
Macedonia Methodist Church	8099 Macedonia Ch. Rd.		
Maiden First Baptist Church	50 East Main Street		828-428-8714
Maiden Wesleyan Church	1111 Ivey Church Rd.		
Marvin United Methodist Church	2731 Startown Rd.	Rev. Jim Tate	704-732-2910
Massapoag Baptist Church	2139 Laboratory Road		704-748-1203
Mathis Chapel	1786 Mathis Chapel Road		828-241-2161
McKendree United Methodist Church	3537 Maiden Hwy.	Rev. Gregg Plott	704-735-4062
Meadow Ridge Baptist Church	1173 Zeb Haynes Road		828-428-1463
Messiah United Methodist Church	4102 West Hwy. 27	Rev. Kevin Miller	704-276-2423
Middle Cross Baptist Church	3474 Crouse School Road		704-530-4681
Midnight Cry Deliverance Hall Church	1273 Buffalo Shoals Rd.		
Moore's Chapel AME Zion Church	1009 East Main Street		704-732-8900
Moore's Chapel Baptist Church	1312 Buffalo Shoals Rd.		704-735-2567

NAME	ADDRESS	Pastor/Rev/Priest	Phone #
Mount Zion Baptist Church	2151 Mt. Zion Church Rd.		
Mountain View Baptist Church	5045 East Maiden Road	Pastor Raymond Hamrick	704-483-5806
Mt. Anderson Baptist Church	4818 South NC Hwy 16		828-465-2680
Mt. Calvary Baptist Church	730 Hulls Grove Church Rd.		704-276-1794
Mt. Ruhama Baptist Church	3273 Mt. Ruhama Church Road		828-428-8961
Mt. Vernon Baptist Church	1156 North Brook III School Rd.		704-276-2830
Mt. Vernon Baptist Church	454 Mt. Vernon Church Rd.		704-736-1030
Mt. Zion Baptist Church	2151 Mt. Zion Church Road		704-263-1869
New Destiny Community Church	626 South Hwy 16	Pastor Mike Teeter	704-947-3828
New Grace Baptist Church	3462 Hwy. 73	Pastor Jerry Taylor, Sr.	704-736-9648
New Hope Baptist Church	1577 Prison Camp Road		828-466-0609
New Hope Baptist Church	532 N. Little Egypt Rd.	Dr. Bob Lynn	704-483-8610
New Hope United Methodist Church	5795 Old Plank Rd.		
New Jerusalem	1560 Nathaniel Street		828-464-7177
New Life Christian Fellowship	1525 Riverview Rd.		
New Providence Full Gospel Church	947 George Brown Road		704-732-9644
New Testament Church	145 Antique Rd.		
New Vision Ministries	661 Clark Creek Road	Pastor Scott Main	704-736-0902
North Brook Baptist Church	7421 Flay Rd.	Rev. Bob Wise	704-435-4471
Oak Grove Baptist Church	1139 Oak Grove Church Rd.	Rev. Joe Staley	704-735-9069
Olivet	7893 Monbo Road		828-478-3118
Palm Tree United Methodist Church	7356 Palm Tree Church Rd.		704-402-1103
Pearl Baptist Church	4649 East Hwy. 27	Pastor Dr. Tim Walker	704-735-2038
Piney Grove Baptist Church	2400 Balls Creek Road		828-241-9400
Pisgah United Methodist Church	2582 Gastonia Hwy.		704-732-1990
Pleasant Grove United Methodist Church	2179 Hwy. 182		
Poplar Springs AME Zion Church	1205 Buffalo Shoals Rd.		704-735-0960
Providence Road Baptist Church	Providence Mill Road	Dr. Charles L. Worley	828-428-2518
Redeemed Baptist Church	1525 Riverview Road	Pastor Allan Wheeler	704-735-1127
Redemption Outreach Center	700 Lithia Inn Road	Pastor Jerry Goodman	
Reeps Grove Methodist Church	7401 Reeps Grove Ch. Rd.	Pastor Harry Andrews	704-735-7511
Reepsville Baptist Church	1513 Alf Hoover Rd.	Pastor Rev. Jeffery Hull	704-276-1152
Resurrection Hispanic	1726 Southside Church Road		
Revealed Word Tabernacle	2834 Hampton Rd.		
Riverview Baptist Church	2230 Riverview Rd.	Pastor Ricky Brown	704-735-3935
Rock Hill Methodist Church	7603 Old Plank Rd.		
Roseland Baptist Church	1172 Rosehill Dr.	Pastor Rev. Tom Teems	704-735-6567
Rhyne Heights UMC	520 Madison Street	Rev. Kathy McAbee	704-735-6136
Salem Baptist Church	1982 Salem Church Rd.	Dr. Andrew J. Royals	704-732-1131
Salem Lutheran Church	3410 Startown Rd.		
Salem United Methodist Church	378 North Pilot Knob Rd.	Pastor Anne Wepner	828-428-9651

NAME	ADDRESS	Pastor/Rev/Priest	Phone #
Shalom Baptist Church	210 N. Aspen Street	Dr. Charles M. Futrell	704-732-6909
Sharon Baptist Church	2388 Hwy. 73		704-735-3246
Solid Rock Baptist Church	1659 Old Conover Startown Road		828-695-8249
South River Baptist Church	2036 Southside Rd.		
Southside Baptist Church	1725 Southside Rd.	Rev. Barry Devine	704-735-2418
St. Dorothy's Catholic Church	148 St. Dorothy's Lane	Father David Miller	
St. James United Methodist Church	2201 St. James Ch. Rd.		704-483-3394
St. Luke's Episcopal	303 North Cedar Street		704-732-9179
St. Luke's Lutheran Church / LCMS	4051 King Wilkinson Rd.		704-735-3265
St. Matthews United Church of Christ	4575 Maiden Hwy.		
St. Paul Lutheran Church	2834 West Hwy. 150	Pastor Ricky Sloop	704-732-3265
St. Peters by the Lake (The Episcopal Ch. Of)	8433 Fairfield Forest Rd.	Rev. Dr. Ron Taylor	704-483-3460
Tabernacle of Praise	Long Circle		
Temple Baptist Church	3115 Hwy 27 East		704-735-0440
Terrell Baptist Church	4146 Slanting Bridge Road		828-632-2344
The Upper Room	Laboratory Rd.		
The Way of the Cross	1582 North Hwy. 16		
Thompson Memorial Evang. Church	7465 Forney Hill Rd.		
Trinity Lutheran Church	Trinity Church Road	Pastor John Lockie	704-276-1257
Tucker's Grove United Methodist Church	5892 Tucker's Grove Ch. Rd.		704-732-0550
Union Baptist Church	2801 McCorkle Rd.		
United Christian Church	4467 King Wilkinson Rd.		
Unity Chapel Church	3200 Gastonia Hwy.		
Unity Presbyterian Church	8210 Unity Church Rd.		704-483-5266
Vertical	PO Box 1446		704-512-9394
Victory Baptist Church	5974 King Wilkinson Rd.	Pastor Lonny Ramsey	828-241-2431
Victory Grove Baptist Church	457 Vickory Grove Church Road	Pastor Dr. David Jarrell	704-735-9097
Webb's Chapel	3051 Gaston Webb's Chapel Road		704-732-2508
Webb's Chapel United Methodist Church	4640 Webb's Chapel Church Rd.		704-489-8434
Wesleyan Church Camino Al Ceb	145 Antiques Road		704-735-0605
Westport Baptist Church	2501 Lake Shore Rd. South		704-483-5851



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 29: List of Local Hospital ER Numbers and Hospital Chaplain Contact Numbers

List of Local ER Numbers and Chaplain's Numbers

Information is located on Page 303

List of Chaplains Contact Numbers for Local Hospitals

This list will be found on Pages 305 - 306

Chaplain's Contact Numbers for Local Hospitals

[illegible]

[illegible]



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 30: Information on and list of Bag Pipers, Honor Guards and Color Guards

Funerals and Memorial – The pipes. The pipes are calling

The pipes, the pipes are calling...

There is something in the sound of the bagpipes that evokes our deepest emotions when we hear it. The same sound can be either exhilarating or deeply moving depending upon what tune or tunes are being played. Over the years, I have had countless people tell me that they want the bagpipes played at their funeral, often requesting the tune *Amazing Grace*. It is gratifying to me when I am able to honor their last request by providing this service.

Before the Service

The bagpiper may play outside the church to call mourners together for the service.

During the Service

The bagpiper can play a special piece during the service. If you would like to preserve a quieter and softer mood, the [Scottish Small pipes](#) may be played. The Small pipes are not as loud as the Highland Bagpipes and are ideal for meditations.

After the Service

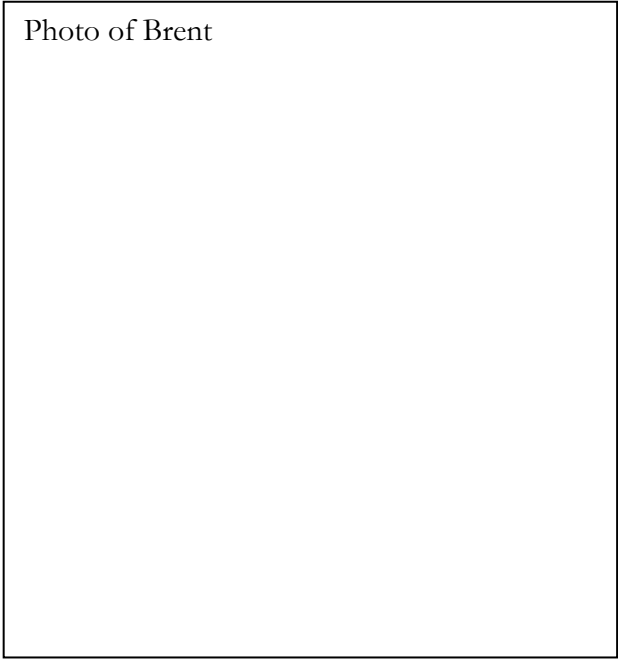
The bagpiper may play outside the church as mourners are leaving the service.

Graveside

When playing graveside, the bagpiper can play as the mourners arrive and until the deceased is carried to their final resting place. The family often requests a special tune, usually *Amazing Grace*, at some point during the graveside service. After the service as the mourners are moving back to their vehicles, the bagpiper can play *Going Home* and other soulful melodies.

Brent Turner

Photo of Brent



Brent Turner
Lincolnton, NC 28092
Phone # 704-735-5062

Charlotte Pipes & Drums Band

Pipes & Drums Band

The Charlotte Fire Department Pipes and Drums Band were formed in 2001 as part of the Honor Guard. It was decided early on that the musical development and professional image of the band was a priority. The addition of talented competition musicians to instruct the group was a crucial step. Practice continued for two years before the band was ready to perform and by the summer of 2003 the countless hours paid off when the band received its first assignment: The opening ceremony for the North Carolina Chief's Association Conference.

Since then the band continues to grow and improve thanks to new members that have committed their time and effort. Today, the band continues to travel and perform and all members are Charlotte firefighters.



Jerry Finegan

Jerry Finegan

404-314-1739

907 Northwoods Dr.

Cary, NC 27513

jerry@raleighbagpiper.com



Wake & District Public Safety Pipes and Drums



The Wake & District Public Safety Pipes and Drums were formed to provide bagpipes and drums at funeral services for public safety officers who were killed in the line of duty.

In addition to providing a distinguishing feature for a fallen hero's funeral – the band is available for hire for other events... From solo pipers for official public safety events, weddings, funerals, and any number of celebratory events, to mini bands or even the full band for a parade or corporate event **THE BAND IS AVAILABLE**. We are a growing band drawing membership from the entire public safety service as well as members from the community – and can serve your bagpipe and drumming musical needs with dignity and solemnity.

Do you have an event you want everyone to remember?

Why not try the skirl of the pipes and drums... Wake & District provides a musical experience with kilts and bagpipes and drums which is second to none! Since 2006 Wake and District has played at various engagements throughout the Raleigh-Durham region and are experienced in putting together a varied and entertaining musical program which will suit your specific needs. Please contact us for a non-committal talk – and let us help you make your engagement even more festive and colorful.

What is a pipe band suitable for?

Pipe bands, mini-bands or solo players attend a huge variety of public, private and corporate engagements throughout the year. Since 2006 our members have played at all kinds of imaginable venues including the the *Syngenta RTP groundbreaking*, *USO Gala*, *Jimmy V Gala and Golf Tournament*, on stage with the *Chieftains*, *Seven Nations*, *Albannach* or on parade in Raleigh, North Myrtle Beach or Winston-Salem; the presence of the pipes and drums bring distinction to any event.

What can I get?

We will tailor the engagement to suit your specific needs. You can get everything from a solo piper to a large band with 40-50 bagpipers and drummers. We are delighted to assist with information and advice on what fits your engagement. The number of guests, the surroundings and whether the event is in or outdoors are important factors to keep in mind when deciding on the size of band.

- A full band: 50 -60 pipers and drummers
- A mini-band: 4 pipers and 3 drummers
- A trio: 2 pipers and 1 drummer
- A solo player: 1 piper

How do we look?

A performing pipe band wearing full uniform is an impressive sight. We always perform in traditional highland attire with kilts, knee stockings and the classic cap (a glengarry). The colors of the bagpipes and drums match the uniform, and provide a complete finish. Experiencing a pipe band makes an impression of both sight and sound.

How much does it cost?

Our prices vary depending on how many players are needed, how long they are to play, travel distance, etc. Please contact us for a non-committal talk. Wake & District is a federally registered 501(c)(3) organization and ***all contributions and fees are tax deductible.***

Please understand when considering to hire a bagpiper or pipe band for your event to balance the requirements of the performance with the proficiency of the player or band. Our members have extensive repertoires, and experience on handling problematic performance requirements and issues. We would be pleased to provide audio and video files for your consideration.

Wake & District Public Safety Pipes and Drums

919-374-8166

Carolina Pipes & Drums of the Emerald Society

Founded in 2005, the Carolina Pipes & Drums of the Emerald Society is a not-for-profit Public Safety Bagpipe and Drum band. Our mission is to provide a distinguishing tribute to our fallen comrades and to be in service to the family, friends and co-workers of public safety employees of the Carolinas; where heroes are never forgotten.

We desire to strengthen relations between the protective services and the public and to preserve cultural heritage and enrich our community by providing traditional Bagpipe and Drum music.

Joe Brady, Pipe Major
Carolina Pipes & Drums of the Emerald Society
www.fourfallen.org

Traditional Songs Played at Funerals

Traditional Songs Played at Funerals

Many of the traditional songs played and even [sung](#) at funerals include songs or hymns of the Christian faith. At times, the entire congregation may be asked to join in and sing a stanza or two of the hymn. Often choirs also sing at funerals. Some of these songs, both played and sung, are:

- Amazing Grace
- Jesus Loves Me
- The Lord's My Shepherd
- When the Roll is Called Up Yonder
- Sweet Chariot
- Abide in Me
- Be Thou My Vision
- I'll Walk With God

Honor and Color Guards

Honor Guard Resource List – Updated 9/20/05

BUNCOMBE COUNTY FIREFIGHTERS ASSOCIATION HONOR GUARD	PO Box 640 Skyland NC 28776
Day #: 828-684-6421	Emerg. #: 828-890-8493 or 828-650-0534
Contact: Battalion Chief Rick Wood	Will travel: Yes
Services: Folding flag, Posting of Colors	Resources: None Listed

BURLINGTON FIRE DEPT.	215 S. Church St. Burlington NC 27215
Contact: Captain Mark Grogan 336-229-3558 Captain Bud Catoe 336-229-3559	Will travel: Yes
Services: Memorial, drills, funerals, colors	Resources: None listed

CARY FIRE DEPT.	100 N. Academy St Cary NC 27511
Day #: 919-469-4056	
Contact: Alan Mounds	Will travel: Yes
Services: Funerals, colors	Resources: Trumpet Player, Bagpipes

CATAWBA CO. FIREFIGHTERS	276 Sipe Road Taylorsville NC 28681
Day #: 828-464-1295	
Contact: Eric Sprinkle 828-465-4983 or 828-431-1773	Will travel: Yes
Services: Funerals, colors	Resources: Bagpiper, bell

Catawba County Firefighters Association Honor Guard
P.O. Box 935 Conover, NC 28613
828-312-3541
CCFAHONORGUARD@YAHOO.COM

CHAPEL HILL FIRE DEPARTMENT www.chfdhonorguard.org	306 North Columbia Street Chapel Hill NC 27514
Day #: 919-968-2781	
Contact: Commander Chris Bradley 919-304-2728 or 336-263-1686 cbradley@townofchapelhill.org	Will travel:
Services: Funeral, Color Guard, Post Colors	Resources: Bagpiper, bell

CITY OF CHARLOTTE	600 East Fourth Street Charlotte NC 28296
Day #: 704-336-2791	
Contact: Batt. Chief J.B. Thompson (B-Shift)	Will travel: Yes
Services: Funerals, colors, parades, bells	Resources: Trumpet player/bagpiper

CITY OF DURHAM FIRE DEPT.	200 East Club Blvd Durham Nc 27704
Day #: 919-560-4251	
Contact: B.J. Yeargan	Will travel: Yes
Services: Color guard/casket detail/rifles	Resources: Trumpet player

CONCORD FIRE/RESCUE	100 Hwy. 601 Bypass Concord NC 28027
Day #: 704-784-1507	
Contact: R. Carrington, Jr. 704-786-0832 or 704-793-0705	Will travel: Yes
Services: Funeral/flags/parades	Resources: None listed

DAVIDSON COUNTY FIREFIGHTERS	404 Old Hwy. 29 Lexington NC 27292
Day #: 336-249-3018	
Contact: Roger Gregory Kim Workman	Will travel: Yes
Services: Funeral, parades, weddings	Resources: None listed

DUPLIN COUNTY HONOR GUARD	PO Box 294 Rose Hill NC 28458
http://www.home.earthlink.net/~duplincountyfahg/	
Day #: 910-289-8284 (Murphy) 919-921-0067 (Blizzard)	
Contact: Capt. Garry Murphy Lt. Angie Blizzard Lt. Dustin Jackson Chaplain Greg Maready	Will travel: Yes
Services: Folding & presenting flag, posting casket, pallbearers, memorial/ceremonies, color guard, parades	Resources: Bell, Flag Detail

ELIZABETH CITY FIRE DEPT	
Day #: 252-338-3912	
Contact: Michael L. Varnell	Will travel: Yes
Services: Funeral/parades/posting colors	Resources: None Listed

FORSYTH COUNTY EMS	911 East Fifth Street Winston-Salem, NC 27101
Day:336-703-2750 or 2760	
Night: 336-727-8083	
Contact: Commander Shane C. Moore	Will travel: Yes
Services: Memorials, Funerals, Color Guard	Resources: Trumpet, Bagpiper, Vocalist

GASTON COUNTY FIREFIGHTERS	PO Box 12607 Gastonia NC 28052
Day #: 704-866-3212	
Contact: D.Abernathy/D.Thornburg 704-735-3523 or 704-732-3500	Will travel: Yes
Services: Funeral/weddings/any requested	Resources: None listed

GREENSBORO FIRE DEPARTMENT	1514 N. Church Street Greensboro NC 27410
Day #: 336-373-2387	Emerg. #:
Contact: Chief Skip Nik	Will travel: Yes
Services: Funerals, ceremonies	Resources: Bell, bugle

GREENVILLE FIRE/RESCUE	PO Box 7207 Greenville NC 27835-7207
Day #: 252-329-4404	
Contact: Lennie Waters	Will travel: Yes
Services: Funerals, ceremonies	Resources: None listed

HENDERSON CO. FIREMENS ASSOC.	
Day #: 828-693-7865 & 681-6669(pgr)	
Contact: Britt Gordon	Will travel:
Services: Funerals/Colors	Resources: Bagpipes

JOHNSON COUNTY FIREMEN'S ASSOCIATION	3531 Steven's Chapel Rd. Smithville NC 27577
Contact: Mel Thompson 919-965-8735 or 919-631-2670	Will travel: Yes
Services: Funerals, Memorials, Posting Colors	Resources: Bugle, Bagpipe

NEW BERN FIRE DEPARTMENT	PO Box 1129 New Bern NC 28563
Day #: 252-636-4020	
Contact: Commander Terry Gaskins	Will travel: Yes
Services: Funerals, Color Guard, Casket Guard	Resources: Rifles, Flags, Trumpet, Bell

RALEIGH FIRE DEPARTMENT	105 Keeter Center Dr. Raleigh NC 27601
Day #: 919-831-6115	
Contact: Freddie Lynn/J. B. Sandy	Will travel: Yes
Services: Any service approved by Chief	Resources: None Listed

ROCKY MOUNT FIRE DEPARTMENT	101 S. George St. Rocky Mount NC 27801
Day #: 252-972-1490	
Contact: Mike Barnell/Cory Mercer	Will travel: Yes
Services: Colors/special ceremonies	Resources: None listed

ROWAN COUNTY FIREFIGHTERS	
Day #: 704-857-5345	
Contact: Cmndr. Mark Goss	Will travel: Yes
Services: Any requested	Resources: None listed

RUTHERFORD COUNTY FIREFIGHTERS	
workingfire1018@bellsouth.net workingfirecodeh@yahoo.com	
Contact: Dep. Cmndr. Byron Callahan	Will travel:
Services: Any requested	Resources: None listed

SAMPSON COUNTY HONOR GUARD	PO Box 1735 Clinton NC 28329
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SOUTHERN PINES FIRE DEPT.	160 Memorial Park Ct. Southern Pines NC 28287
Day #: 910-692-2720	
Contact: Martin Dowd	Will travel: Yes
Services: National Fallen Firefighter's Memorial Service/Weddings/Funerals/Flag ceremonies	Resources: None listed

WILMINGTON FIRE DEPT.	PO Box 1954 Wilmington NC 28401
Day #: 910-452-1267	
Contact: Tom Robinson	Will travel: Yes
Services: Memorials, Funerals, Color Presentations, Parades, Building Dedications	Resources: Bagpipe, Flag set, Axe set, Trumpet

WILSON FIRE DEPARTMENT	307 W. Hines St. Wilson NC 27893
Day #: 252-399-2891	
Contact: Reggie Yelverton (FF Engineer)	Will travel: Yes, with approval
Services: Funerals/Memorials	Resources: None listed

WINSTON-SALEM FIRE DEPT	PO Box 2511 Winston Salem NC 27102
Day #: 336-773-7950 or 773-7900	
Contact: Arlin Sechrist (Dist Chief)	Will travel: Yes
Services: Funerals/Posting colors	Resources: Bell, bugle, bagpipes



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 31: Chaplain Oath and Commissioning and Endorsement Letter

Sample of Letter for Chaplain Oath/Commissioning and Endorsement

The letter is located on pages 317 to 319

Chaplain Oath

For Name of Person who is a member of

Name of Agency

It is my belief and declaration that I have been called to devote my life to the service of humanity without regard to race, gender, ideology, or religion. Through my own conscious choice I have chosen to manifest my calling through the form of Chaplaincy.

As a Member of the **Name of Agency**, and when I am performing my duties as a chaplain or crisis response team member, I recognize that every individual follows their own spiritual path. I vow to be respectful of all paths of faith or no faith and to honor an individual's personal journey towards enlightenment and truth. Further, I acknowledge the diversity of the people of the world and I solemnly vow to carry out my duties as a Chaplain of the **Name of Agency**, Chaplain – Crisis Response Division without prejudice or judgment of any kind.

As a Member of the **Name of Agency**, Chaplain – Crisis Response Division, I oblige myself to always do what is RIGHT and JUST. I vow to harm no one and shall adhere both to the laws of my nation and of my Creator. I declare that I freely and seriously take the vows as stated above under my own free will. Further, I understand that I am requesting endorsement and commissioning in the **Name of Agency**, Chaplain – Crisis Response Division, while serving in the role of chaplain / crisis response, I understand there are MANY FAITHS and not simply one faith. As a chaplain my goals are to meet the needs of the individual first (physical, emotional or spiritual) and if **God opens the door** for me to minister to them about their faith or salvation then at that time I will. I further understand that if accepted by the **Name of Agency**, Chaplain – Crisis Response Division, I shall abide by the laws of the United States of America, State of NC, State of SC and all local jurisdictions. This endorsement and commissioning is stating that **Name of Person Goes Here** has completed training in chaplaincy and crisis response training. Each agency she works with will be responsible for determining her level of competency.

I understand that if accepted by the **Name of Agency**, Chaplain – Crisis Response Division

- E. It is the policy of the Chaplain / Crisis Support Program to assist fellow employees and others in dealing with stress, emotional difficulties or other personal problems. These problems may have an impact on the employee, and in some cases may present a danger to the welfare and safety of the employee, his or her family, the public and fellow employees.
- F. Department Heads and Supervisors are prohibited from soliciting information obtained from any employee during a Chaplain Peer Support encounter except as outlined in this directive as exceptions to privileged communication.

- G. Participation in Chaplain Program or the Use of the Chaplain / Crisis Support Program will not adversely impact any employee's performance appraisal or request for transfer/promotion.
- D. The Chaplain Support Program will be administered jointly by a Senior Chaplain and a Licensed Mental Health Worker, both appointed by Shalom Baptist Church.
- E. **Privileged communication:** any communication made by the employee or immediate family member to the chaplain or peer support team member while receiving **advisement** that does not fall within the exceptions noted in this directive.

North Carolina G.S. 8-53.10 provides that communications between Chaplaincy Peer Support / Critical Intervention Team members and employees are privileged except as follows.

1. When information revealed must be disclosed by law, such as in cases of child abuse, elder abuse, spousal abuse or when the employee reveals that he or she has committed a crime that presented a clear and immediate danger to self or others.
2. When due to mental, emotional or substance abuse problems, the employee presents a clear and immediate danger to self or others.
3. When information revealed gives reason to believe the employee has violated or conspired to violate a person's civil rights. Federal law (42 U.S.C. 1986) requires anyone with knowledge of such violations to report them or be subject to liability for the civil rights violations.
4. When the critical intervention counselor team member is directed by court order to disclose the information or is compelled to disclose the information by rules of civil or criminal discovery.
5. When the peer support/ critical intervention counselor team member is directly involved in an incident as a participant, witness, or investigator.
6. Confidentiality requirements extend to peer support/ critical intervention counselor team services that occur off-duty.

I acknowledge and agree that in making these commitments that it is my understanding that they are a matter of Public Record and I vow to keep these commitments for as long as I am a member of the **Name of Agency**, Chaplain – Crisis Response Division.

Signed this date _____, 20____

_____ (Chaplain)

_____ (Pastor _____ Church)

_____ (Notary)

My Commission expires: _____

(Notary's Seal goes here)

(Agency or Church's seal goes here)

(School seal goes here)



FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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Chapter 32: Contact Information for Lincoln County Departments and Agencies for Emergency Services

Lincoln County Emergency Management / Fire Marshal Office

Lincoln County EM/FMO

EM Phone: 704-736-8511
FMO Phone: 704-736-8516 Fax: 704-732-9036

EM Director: Martha Lide (1200)
Office Phone: 704-736-8489
Cell Phone: 704-658-7738
Home Phone: 704-483-8350
E-mail: mlide@lincolncounty.org

Fire Marshal: Mike Futrell (1201)
Office Phone: 704-736-8516
Cell Phone: 980-429-0044
Home Phone: 704-736-9415
E-mail: mfutrell@lincolncounty.org

Deputy FM/EM: Bill Summers (1202)
Office Phone: 704-736-8662
Cell Phone: 980-429-6614
Cell Phone: 980-429-0127
Home Phone: 704-748-2221
E-mail: bsummers@lincolncounty.org

Deputy Fire Marshal: Rodney Emmett (1204)
Office Phone: 704-736-8516
Cell Phone: 980-429-3201
E-mail: remmett@lincolncounty.org

Adm. Asst.: Debbie Hartsell (1203)
Office Phone: 704-736-8660
Cell Phone: 980-429-7254
Home Phone:
E-mail: dhartsell@lincolncounty.org

Lincoln County Communications

Address:

Lincolnton, NC

Phone: 704-735-8202

Fax: 704-732-9035

Rick Ellis, Administrator

Cell Phone: 704-913-466

Direct Office Line: 704-268-3032

E-mail: rellis@lincolne911.org

Second Contact

Name: Cory Saunders

Cell Phone: 704-477-2896

Direct Office Line: 704-736-8400

E-mail: csaunders@lincolne911.org

Third Contact

Name: Bill Gibbs

Cell Phone: 980-429-0943

Direct Office Line: 704-735-8202

E-mail: bgibbs@lincolne911.org

NC Forest Service for Lincoln County

NC Forest Service

Address: P.O. Box 35
Dallas, NC 28034
Phone: 704-922-0719

Chase Payne, Forester 1
Phone: 704-922-0719
Cell: 704-616-2865
E-mail: chase.payne@ncdenr.gov

Jody Eudy, Forester 2
Phone: 704-922-0719
Cell: 704-936-6902
E-mail: jody.eudy@ncdenr.gov

Lincoln County EMS Services

Lincoln County EMS

Mail: 720 John Howell Memorial Drive
Lincolnton, N.C. 28092
Phone: 704-736-9385
Fax: 704-736-1924

Director: Ron Rombs (EMS 1)
Office Phone: 704-736-9385
Cell Phone: 980-429-6528
E-mail: rrombs@lincolncounty.org

Deputy Director: Kim Green (EMS 2)
Office Phone: 704-736-9387
Cell Phone: 980-429-6040
E-mail: kgreen@lincolncounty.org

Training Coordinator: Chad Parlier (EMS 3)
Phone: 704-736-9386
Cell Phone: 980-429-6529
E-mail: cparlier@lincolncounty.org

Denver Fire Department

Station 1

Denver Fire Dept.

Mail: P.O. Box 122
HQ: 3956 Hwy 16 North
Kidville: 6625 Kidville Road
Webbs: 7748 Tree Farm Lane
Denver, N.C. 28037
HQ Phone: 704-483-5115
Kidville Phone: 704-966-0276
Webbs Phone: 704-966-0275
Fax: 888-245-1518

Chief: Jay Flynn (120)
Cell: 980-722-8862
E-mail: jflynn@denverfd.com

Battalion Chief: Chad McIntosh
Cell Phone: 704-622-6467
E-mail: cmcintosh@denverfd.com

Battalion Chief: Mike Carpenter
Cell Phone: 704-400-1601
E-mail: mcarpenter@denverfd.com

North Brook Volunteer Fire Department

Station 2

North Brook Volunteer Fire Dept.

Mail: 7050 Doyle Beam Rd
Vale, N.C. 28168

Station Phone: 704-276-2774

Fax: 704-276-0266

Chief: Donald Hull (220)

Cell Phone: 704-477-3313

E-mail: northbrookvfd@bellsouth.net

Assistant Chief: Mike Richardson

Cell Phone: 980-241-1899

E-mail: loggerman107@hotmail.com

Assistant Chief: Daniel Houser

Cell Phone: 704-472-4196

E-mail: dhous33@bellsouth.net

East Lincoln Fire Department

Station 3

East Lincoln Fire Dept.

Mail: 406 South Pilot Knob Rd
Stanley, N.C. 28164

Phone: 704-822-5999

Fax: 704-822-9830

Chief: Tim Tench (320)

Cell Phone: 704-400-4868

E-mail: ttench@eastlincolnfd.org

Assistant Chief: Mike Turner (321))

Cell Phone: 704-622-2484

E-mail: mturner@eastlincolnfd.org

Assistant Chief:

Cell Phone:

E-mail:

Boger City Fire Volunteer Department

Station 4

Boger City Volunteer Fire Dept.

Mail: 410 McAlister Rd.

Lincolnton, N.C. 28092

Station Phone: 704-735-6046

Fax: 704-736-0911

Chief: Mike Hill (420)

Cell Phone: 980-429-6295

E-mail: mhill@lincolne911.org

Assistant Chief: Joe Fletcher

Cell Phone: 980-429-0498

E-mail:

Assistant Chief: Bryan Lynch (421)

Cell Phone: 980-429-0490

E-mail: tiny461bc@yahoo.com

Howards Creek Volunteer Fire Department

Station 5

Howard's Creek Volunteer Fire Dept.

Mail: 3604 West Hwy 27
Lincolnton, N.C. 28092
Phone: [704-735-9874](tel:704-735-9874) and 704-36-8439
Fax: 704-732-3918

Chief: Dusty Rudisill (520)
Cell Phone: [704-913-6465](tel:704-913-6465)
E-mail: drudisill@howardscreekfd.org

Assistant Chief: Ben Harkey(521)
Cell Phone: [704-913-5501](tel:704-913-5501)
E-mail: bharkey@howardscreekfd.org

Assistant Chief: Mike Huss (522)
Cell Phone: [704-913-6944](tel:704-913-6944)
E-mail: mhuss@howardscreekfd.org

Union Volunteer Fire Department

Station 6

Union Volunteer Fire Dept.

Mail: 4588 Reepsville Rd.

Vale, N.C. 28168

Phone: 704-276-2944

Fax: 704-276-2921

Chief: Rodney Seagle (620)

Cell Phone: 704-913-1094

E-mail: union620@charter.net

Assistant Chief: Kevin Yount (621)

Cell Phone: 980-429-0500

E-mail: unionfd621@yahoo.com

Assistant Chief: Chad Avery

Cell Phone: 828-217-7207

E-mail: cavery@unionvfd.com

South Fork Volunteer Fire Department

Station 7

South Fork Volunteer Fire Dept.

Mail: 2736 Long Shoals Rd.

Lincolnton, N.C. 28092

Phone: 704-735-3446

Fax: 704-735-1603

Chief: Greg Lowrance (720)

Cell Phone: 704-914-7028

E-mail: glowrance@southforkfd.com

Assistant Chief: Thomas Raper (721)

Cell Phone: (828) 578-9516

E-mail: traper@southforkfd.com

Assistant Chief:

Cell Phone:

E-mail:

Assistant Chief:

Cell Phone:

E-mail:

Crouse Volunteer Fire Department

Station 8

Crouse Volunteer Fire Dept.

2764 West Old NC 150 Hwy.

Mail: P.O. Box 220

Crouse, N.C. 28033

Phone: 704-735-2247

Fax: 704-735-2898

Chief: Charles Hayes (820)

Cell: 980-241-6482

E-mail: crousevfd@bellsouth.net

Assistant Chief: Jason Cook (821)

Cell Phone: 980-241-2165

E-mail: crousevfd@bellsouth.net

Assistant Chief: Mike Henderson (822)

Cell Phone: 704-740-6794

crousevfd@bellsouth.net

City of Lincolnton Fire Department

Station 9

City of Lincolnton Fire Dept.

116 W. Sycamore St.

Mail: P.O. Box 617

Lincolnton, N.C. 28092

Phone: 704-736-8920

Fax: 704-736-8929

Chief: Mitch Burgin (Car 1)

Cell Phone:

E-mail: mitchburgin@ci.lincolnton.nc.us

Assistant Chief: Ryan Heavner

Cell Phone: 704-240-0688

E-mail: ryanheavner@ci.lincolnton.nc.us

Vol. Captain – Brent Turner

Home Phone: 704-735-5062

E-Mail: brent@lincolnk12.nc.us

N321 Volunteer Fire Department

Station 10

North 321 Volunteer Fire Dept.

Mail: 3769 Maiden Hwy.

Lincolnton, N.C. 28092

Phone: 704-735-5797

Fax: 704-732-4529

Chief: Ronnie Williams (1020)

Cell Phone: 980-429-6697

E-mail: n321firemen@bellsouth.net

Assistant Chief: Dwight Hoyle (1021)

Cell Phone: 704-530-4158

E-mail: n321firemen@bellsouth.net

Assistant Chief: Mike Boyels (1022)

Cell Phone: 980-429-1464

E-mail: n321firemen@bellsouth.net

Pumpkin Center Volunteer Fire Department

Station 11

Pumpkin Center Volunteer Fire Dept.

Mail: HQ: 1537 Amity Church Road

Substation: 2911 Lee Lawing Rd.

Lincolnton, N.C. 28092

Phone: 704-735-4271

Fax: 704-735-6062

E-mail: sdrum@pumpkincenterfd.com

Chief: Shaun Drum (1120)

Cell Phone: 704-913-2391

E-mail: sdrum@pumpkincenterfd.com

Assistant Chief: Sam Jones (1121)

Cell Phone: 704-746-6270

E-mail: sjones@pumpkincenterfd.com

Assistant Chief: Casey Snyder (1122)

Cell Phone: 980-429-6065

E-mail: csnyder@pumpkincenterfd.com

Alexis Volunteer Fire Department

Station 20

Alexis Volunteer Fire Dept.

Mail: P.O. Box 157(HQ 4168 Hwy 27 E) Alexis, N.C. 28006

Base 2: 4639 Old Plank Road

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Lincoln County ES CRT Members

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FOR MORE INFORMATION

Contact the Lincoln County Fire Marshal / CISM Team Leader for any questions you may have.

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FOR MORE INFORMATION

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