

<b>Critical Incident Stress Management</b>		<b>MODC FSGOG # 008</b>
Fire Departments : Municipality of the District of Chester		Rev 0 Date: March 13, 2014

## Section 1: Purpose

The purpose of this guideline is to establish procedures for the initiation of Critical Incident Stress Management (CISM) and provide qualified interventions as may be required to minimize stress-related injury to fire department personnel.

## Section 2: Scope

The guideline is applicable to Fire Departments registered with the Municipality of the District of Chester.

### Section 2: General

Firefighters frequently experience trauma, death and sorrow. Critical incident stress is a normal reaction following an event that is abnormal. The emotional trauma can be serious. It can break through a person's defenses suddenly or slowly and collectively. So much so, that the person can no longer function effectively.

Critical incident stress is the inevitable result of trauma experienced by fire service personnel. It cannot be prevented, but can be relieved. Experiencing emotional aftershocks following a traumatic event is a very normal reaction and should not be perceived as evidence of weakness, mental instability, or other abnormality.

Common signs and symptoms of critical incident stress are fatigue, headaches, inability to concentrate, anxiety, depression, inappropriate emotional behaviour, intense anger, irritability, withdrawal from the crew and/or family, change in appetite, increased alcohol consumption, and change in sleeping patterns. Symptoms may appear during, immediately after the incident, days or sometimes weeks to months later and can last for a few days to several weeks.

Appropriate and timely intervention by qualified CISM trained personnel, along with the support of peers and family members can help prevent more serious problems. Occasionally a professional counsellor may be needed for more serious symptoms.

Knowing the signs and symptoms, and the provision of appropriate psychological first aid after the occurrence of a critical incident can greatly reduce (but not necessarily prevent) the chance of more severe and long-term distress such as Post Traumatic Stress Disorder (PTSD).

## Section 3: Definitions

A **CRITICAL INCIDENT** for the fire and emergency services is defined as any incident that exposes personnel to unusually strong emotional involvement that surpasses normal coping abilities.

The following are examples of critical incidents in which CISM interventions should be made available to the response crews:

1. Serious injury, death or suicide of a Fire Department member or other emergency responder.
2. Mass casualty incidents.

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3. Serious injury or death of a civilian resulting from Fire Department operations (i.e. MVA)
5. Violence to or death of a child or family member.
6. Loss of life of a victim following extraordinary measures during rescue efforts.
7. Incidents that attract extremely unusual or critical news media coverage.
8. Highly emotional incident in which the circumstances were unusual or distressing as to produce a high level of immediate or delayed emotional reaction.

*Reference: www.ICISF.com*

## **Section 4: Operations**

The CISM interventions should always be provided by CISM team members trained in accordance with the FSANS CISM Team standards which are consistent with the International Critical Incident Stress Foundation (ICISF) standards. All CISM interventions are conducted in a confidential manner.

### **A. On Scene /Site management:**

Minimizing exposure to these stressful incidents results in fewer stress-related problems. Incident Command (IC) should reduce this exposure by rotating personnel during traumatic calls from the “hot zone” to a “cold zone” and by removing initial personnel from the scene as soon as possible.

On-site evaluation and support by a trained FSANS CISM team member should be considered for some incidents when time and circumstances permit. CISM team members can observe, monitor for acute stress reactions, provide support, encouragement, and consultation, and be available to help resting personnel deal with stress reactions. Information on the status of fire department personnel may also be available from the Scene Rehab operations.

CISM Team members may be considered a resource available for assignment to assist with Rehab, Rescue and Salvage, Staging or other sectors as needed.

### **B. Activation of the CISM team after the Incident:**

All firefighters bear the responsibility for identifying/recognizing significant incidents that may qualify for a debriefing or other CISM intervention.

Request for a CISM intervention should be made as soon as possible. Any firefighter can initiate the process by contacting the **Office of the Fire Marshal (NS) 1-800-559-3473**.

The FSANS CISM Zone Co-coordinator will then be contacted and the incident will be evaluated for the type of intervention required.

### **C. CISM Intervention attendance:**

Attendance at an intervention is ***VOLUNTARY*** but all personnel directly involved in the incident are strongly encouraged to attend.

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The intervention depends on the type of incident, timing, target personnel, themes and team availability. The following types of interventions are commonly used:

Pre-incident Education	Rest, Information, Transition Services (RITS)
Individual (1:1) Intervention	Debriefing
Defusing	Family / Pastoral Care CISM
Crisis Management Briefing	Referral / Follow-up
Organizational / Community Consult, Intervention	

#### **D. Follow up**

To help alleviate some of the emotional pain, personnel can rest more, contact friends, maintain as normal a schedule as possible, eat well-balanced meals on a regular schedule, keep a reasonable level of activity to fight boredom, express feelings, and talk to loved ones. Studies also indicate that exercise, especially soon after the event, can greatly reduce mental pain.

It is important that appropriate follow up is done after the initial CISM intervention. CISM will be able to recommend appropriate actions and referrals.