



Solano County Fire Chiefs Association GUIDELINES

Guideline Name:	CRITICAL INCIDENT STRESS MANAGEMENT
Number:	16
Revision/Reviewed Date:	March 24, 2020

I. PURPOSE

- A. The purpose of this policy is to establish a County-wide Critical Incident Stress Management Program. The Solano County Fire Chiefs recognize that during the course of performing job duties, members may become involved in or be exposed to incidents that have the potential to cause various forms of short- or long-term emotional trauma.

II. DEFINITIONS

- A. Definitions related to this policy include:
1. Peer Support Member- Individual trained to assist in one on one interactions with members needing assistance for any stress related events.
 2. Critical Incident Stress Management Member- Individual trained to assist in both individual and group interactions. These members have specialized training in defusing and debriefings as specified by the International Critical Stress Foundation Inc.
 3. Critical Incident Stress - A strong emotional, cognitive or physical reaction that has the potential to interfere with daily life, including physical and emotional illness, loss of interest in the job, personality changes, marital discord and loss of ability to function.
 4. Critical Incident Stress Management (CISM) - A standardized approach using a group format to provide education, an atmosphere and opportunity for emotional release through discussion, and support for members who are involved in emergency incidents under conditions of extreme stress. CISM is not a diagnostic or treatment process like that provided in counseling sessions by a mental health professional. Instead, it is a service that provides education and support.

III. POLICY

- A. It is the policy of Solano County Fire Chiefs to implement a CISM Program to provide support and professional intervention to members of their departments following exposure to situations that are likely to create unusually strong emotional reactions. If a fire department is unable to provide these services, that department may utilize a Peer Support or CISM team from an agency within the county that provides such services.



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IV. CISM PROGRAM

- A. It is the recommendation of the Solano County Fire Chiefs that each Department should establish a committee responsible for implementing and managing the CISM Program. The Fire Chief or the authorized designee is responsible for appointing members to the committee who are representative of all levels of department personnel. The Department's safety and health officer serves as the committee chairperson.
- B. Functions of the committee include, but are not limited to:
 - 1. Providing input and assistance to the development and implementation of the CISM Program.
 - 2. Recommending the type and content of critical incident-related programs, workshops or seminars.
 - 3. Distributing CISM-related information to members.
 - 4. Providing the administrative and technical support needed to implement CISM activities.
 - 5. Assisting in the recruitment and training of peer support personnel.
 - 6. Coordinating and following-up on requests for CISM.

V. CISM COMPONENTS

- A. The CISM Program should include pre-incident, on-scene and post-incident activities, including education, diffusion of emotional reactions and debriefing. The purpose of the program is to minimize the impact of stress on members following major incidents.
- B. Ideally, CISM should incorporate the services of both peer support personnel and trained professionals, such as physicians, psychologists or counselors.
- C. The program is intended to be consistent with the recommendations of the National Fire Protection Association (NFPA) and the Fire Service Joint Labor/Management Wellness and Fitness Initiative, developed by the International Association of Fire Fighters (IAFF) and the International Association of Fire Chiefs (IAFC)

VI. ACTIVATION

- A. The following are examples of incidents that may initiate a Critical Incident Stress Management (CISM) response:
 - 1. Major disaster or mass casualty incidents



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

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

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

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

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

VII. CISM PROVIDERS

- A. CISM providers should include mental health professionals and peer support members.
 1. The duties and responsibilities of mental health professionals include the following:
 - a. Supervise and advise on all clinical aspects of the program.
 - b. Ensure the quality of CISM services.
 - c. Offer clinical support and program guidance to the CISM committee and peer support personnel.
 - d. Assist in the selection of new peer support personnel and CISM members.
 - e. Provide guidance to peer support personnel and CISM members



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- f. Assist in training peer support personnel and with continuing education.
- g. Advise on the development of policy and written operational CISM protocols.
2. Mental health professionals involved in the CISM program should have the following qualifications:
 - a. Be a licensed mental health professional.
 - b. Be trained and experienced in a recognized CISM model.
 - c. Demonstrate experience in counseling emergency services personnel.
3. The duties and responsibilities of peer support members include the following:
 - a. Assist and support the CISM mental health professionals as necessary.
 - b. Provide referrals to mental health professionals, where appropriate.
 - c. Providing support and basic education to members and their families.
 - d. Serving as a CISM provider with mental health professionals.
 - e. Complete training and supervision necessary for the role.
4. Members involved in the CISM Program as peer support personnel or CISM members should have the following qualities:
 - a. Good negotiating skills
 - b. Ability to communicate effectively
 - c. The respect and trust of peers
 - d. Ability to maintain confidentiality
 - e. Ability to adhere to established limits and criteria
 - f. Ability to learn about the psycho-social process
 - g. Good listening skills
 - h. Good rapport with fellow emergency workers
 - i. Sensitivity to the problems of others
 - j. Be an emergency service provider or a member of a related service
 - k. Experience and knowledge about the types of incidents and situations to which members may be exposed
5. Peer support personnel and CISM members should participate in both initial and continuing education and training regarding CISM principles and procedures.

VIII. DEBRIEFING

- A. The form of CISM utilized should depend upon how early the intervention is activated and the nature of the incident. The use of one format does not preclude the use of others for the same critical incident.
- B. Common formats for CISM include:



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1. On-scene debriefing: Peer support personnel or mental health professionals respond to the scene as observers and advisers to watch for the development of acute reactions. They may offer encouragement and support, check on the well-being of personnel and allow for individual discussion of feelings and reactions.
2. Initial defusing: This usually takes place within a few hours of the incident and is generally facilitated by CISM members. It is an informal process encouraging open and free expression of feelings without a critique of the incident. The purpose is to stabilize involved members so they can go home or return to service.
3. Formal debriefing: Debriefing led by a CISM Program mental health professional and peer support personnel that usually takes place 24 to 48 hours after the conclusion of the incident. Members involved in the critical incident are given the opportunity for free expression of feelings. This expression should be met with acceptance, support and understanding.
4. Follow-up debriefing: If deemed necessary, it may be facilitated by the CISM mental health professional and peer support personnel several weeks or months after a critical incident. The main purpose is to resolve any issues or problems that were not initially resolved. The follow-up debriefing may include the entire group or a portion of those originally involved.

- B. Regardless of the type of debriefing, CISM is not a critique of department operations at the incident. The CISM provides a setting in which members can discuss their feelings and reactions as a means to reduce the stress resulting from exposure to critical incidents. Performance issues should not be discussed during the debriefing.
- C. No one has rank during a debriefing process. Everyone is equal.
- D. Following any intervention, should members feel a need for additional assistance, contact may be made with peer support personnel or a CISM committee member to obtain information regarding a referral.

IX. ATTENDANCE

- A. Only those involved in the incident and CISM team members should be present. Members directly exposed to the traumatic aspects of an incident are strongly encouraged to participate in CISM.
- B. Under special circumstances, the supervising officer may make attendance mandatory. Even if attendance is mandatory, members should not be obligated to speak or express their feelings during the CISM.



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

X. ROTATION OF PERSONNEL

- A. Command officers should minimize members' exposure at critical incidents by rotating or removing initial responding personnel from the immediate scene and reassigning them to less stressful operations as soon as possible. Members directly involved in critical incidents should be considered a high priority for immediate reassignment or removal from the scene. Relief from duty may also be considered.
- B. Trained peer support personnel may make a request to their command officer for relief or reassignment during a shift to participate in CISM activities. The peer support personnel should provide a number of on-scene services, including on-site evaluation, encouragement and consultation. They should also be considered an available resource for assignment to rehab, medical, or other areas as needed.
- C. Circumstances of a critical incident may result in a recommendation that individuals or companies be taken out of service. The command officer is responsible for making the appropriate arrangements.
- D. Under no circumstances is being taken out of service to be construed as critical or negative. Personnel taken out of service are to be viewed as deserving of the same consideration as an injured firefighter.

XI. CONFIDENTIALITY

- A. The department considers all CISM interventions, regardless of type, as strictly confidential. Notes, other than those specifically identified in this policy, are prohibited. No audio or video recording may be made without the express consent of all participants.
- B. The only exceptions to confidentiality should be when:
 - 1. There is reasonable evidence to assume a risk of harm to the member or to others. If the risk is to another person, that person is identifiable and there are means to contact the person.
 - 2. Participants divulge information that falls under any applicable state mandatory reporting duties.



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XII. RECORD KEEPING

- A. Following a CISM intervention, the committee chairperson should prepare a summary report and forward it to the CISM Program committee for statistical record-keeping. The report should be limited to the following information:
1. Incident date and time
 2. Brief description of incident facts
 3. Intervention date and location
 4. Names of CISM members conducting the interview
 5. Numbers of participants from each agency involved
 - a. Names of participants should not be recorded.

XIII. SOLANO COUNTY MUTUAL AID ACTIVATION

- A. Any department within Solano County, or any member of a Solano County agency that requires Peer Support and/or CISM may utilize any department within Solano County that offers Peer Support and or CISM.
- B. Mutual aid Peer Support and/or CISM may be utilized for any event that overwhelms a department's ability to provide emotional and mental health support to its members after a traumatic event occurs.
- C. As of July 1, 2019, the following departments are capable of providing assistance in the form of Peer Support:
1. Vacaville Fire Department
 2. Dixon Fire Department
 3. Vallejo Fire Department
- D. As of July 1, 2019, the following departments are capable of providing assistance for both Peer Support and CISM Team capacity:
1. Fairfield Fire Department
 2. Benicia Fire Department

**Fairfield Fire Department and Benicia Fire Department CISM Teams are available to provide assistance for both in County and Out of County Incidents.

- E. To activate Peer Support or CISM, contact the on-duty Battalion Chief or the agency's dispatch center.