

A COMPONENT OF CRITICAL INCIDENT STRESS MANAGEMENT



Agency Administrator Briefing

Critical Incident Stress Management

Definition of a Critical Incident

Definition of a Critical Incident: The **incident itself does not** define a critical incident. It is the individuals and or an organization's **reaction to what occurred** that defines an event as a critical incident.

A critical incident is any unexpected, traumatic event that affects an individual's feelings of personal safety, ability to perform daily activities, and their ability to concentrate on their regular job duties.



Critical Incident Stress Management

While we cannot prevent serious incidents, we can assist individuals and organizations in returning to everyday life after a traumatic event. Promoting healthy coping strategies can mitigate or prevent many long-term adverse outcomes. The Critical Incident Management (CISM) Program is available for individuals affected by potentially traumatic events outside their typical work experience.

Psychological Trauma Is a person's emotional response to a critical incident, such as suffering life-threatening danger, injury, or abuse, witnessing the death of others, or losing a colleague in the line of duty. Experiencing a traumatic incident does not mean someone is impaired or will develop Post-Traumatic Stress Disorder. Such an experience means that the

the event that occurred now needs to be processed and Individuals integrated. experience critical incidents in different ways and react to similar events differently. What may be traumatic for one may not be for others. It is only possible to make rigid recommendations for some situations and employees. Slight differences in how a person experiences a particular event, such as how close they were to the victims or how long they were at the scene, can influence the intensity of their responses. Even with identical exposure to a traumatic event, responses will differ based on factors like how different individuals cope with stress, the availability of social support, prior traumatic experiences, and the overall.

The BIA Division of Wildland Fire Management acknowledges and utilizes the International Critical Incident Stress Foundation (ICISF) as the BIA CISM program personnel training and certification standard. These approved ICISF courses, available for BIA personnel, ensure that CISM personnel are equipped with the best practices in crisis intervention.

Peer Support: What to Expect

Critical Incident Peer Support is about peers, or "people of mutual respect," helping each other, for example, firefighters helping firefighters. The shared experiences of peers foster the initial trust and credibility necessary for developing relationships in which individuals are willing to open up and discuss their reactions and concerns after a critical incident.

Assembled at the time of the request, <u>CIPS Groups</u> also referred to as "CISM Teams" consist of trained and certified CIPS personnel selected to match the backgrounds and experience of those involved in the critical incident, such as helitack, crews, aviation personnel engines, dispatchers, smokejumpers, and others.

A vital member of the peer support group is a licensed Mental Health Professional (Clinician) experienced in trauma who meets our screening and experience requirements. Their presence is a formality and testament to our commitment to well-being.

Screening ensures that clinicians are culturally competent. Cultural competence is a set of behaviors and attitudes that respect an individual's or an organization's backgrounds and beliefs. We incorporate these values into how support is delivered.

Our properly trained and supervised CIPS Groups are here to provide a range of services. They're not just a resource, they're a lifeline, offering situational assessment and support to agency administrators, managers, and others. Their expertise helps determine the appropriate response, most empowering vou to make informed decisions.

Peer Supporters do not operate independently; doing so violates the established Boundaries of Competence and compromises the program's integrity.

A methodical analysis ensures that tactics are applied at the right time, in the right place, and under the right circumstances. BIA Peer Supporters are trained and certified by the International Critical Incident Stress Foundation and must demonstrate competency in their skills and abilities.

Sometimes, Peer Supporters may be too close to an incident (home unit, close relations, family, etc.) to be effective peer supporters. In those circumstances, while not providing direct peer support services, they can provide a wealth of information and be a local resource for the CIPS group.



The First 48 Hours After a Critical Incident

Current research has demonstrated that good management care plays a vital role in preventing, supporting, and improving traumatic stress symptoms. Feeling cared about and supported in the immediate aftermath of a traumatic event is hugely important in the healing and recovery process.

Manager and colleague support is an essential element in the effective recovery of individuals. The provision of a supportive environment is the responsibility of managers. Their accountability in creating this environment is crucial, and their commitment to it is paramount. For more information visit:

https://gacc.nifc.gov/cism/documents/leadership.pdf

PLACINIG A REQUEST FOR CISM: PEER SUPPORT

CISM intervention generally starts no sooner than 72 hours after an event. Peer Support services are often helpful when provided within a few weeks or longer, depending on the incident. Allowing time for affected individuals to disengage operationally and reconnect is vital.

Early psychological intervention is based on recognition of need, not strictly the occurrence of an event. What is appropriate will depend on the event's nature, severity, and duration. The number of those involved, their background and cohesiveness, and their physical and emotional symptoms are crucial considerations.

Understanding the sequence of crisis intervention processes and their appropriate use for individuals or groups is a cornerstone of all effective CISM programs. The Agency Administrator or their designee plays a crucial role in this process. They should take the initiative to contact the BIA CISM Coordinator to discuss the need for CISM services. It's important to note that not all requests for CISM are appropriate, and the CISM Coordinator plays a vital role in carefully evaluating each request to determine the most suitable intervention. They consider the culture of those they are assisting, the circumstances, and assess what post-incident support may be required. For more ordering information, please visit https://gacc.nific.gov/cism/ordering.html.

Fire Related Incidents and Requests

The BIA does not maintain standing "CISM Teams" on an on-call rotation. An Agency Administrator or designee places all CISM requests for BIA-related incidents, regardless of Geographic Area, through the BIA National CISM Coordinator.

A CIPS group will be assembled at the time of request and will consist of members who align with the backgrounds and experience of those involved in the critical incident. The National CISM Coordinator will coordinate requests through the Interagency Resources Ordering Capability (IROC) with the respective Geographic Area Coordination Center.

Units requesting CISM must also route the request through the Regional Fire Management Officer, who will notify the Director of Wildland Fire Operations.

Non-Fire Related Incidents and Requests

CISM (peer support) is only sometimes the most appropriate resource for non-fire-related incidents. CISM was designed for first responders such as firefighters and law enforcement.

When it comes to non-fire CISM requests, they are initiated by the affected unit and then channeled through the National CISM Coordinator. The Coordinator will work with the unit to determine the most suitable response. Typically, the ordering unit is responsible for the associated costs.

The BIA Fire Director approves non-fire requests for support on a case-by-case basis. Use of the coordination system is not required for non-fire events.

Crisis intervention is based on recognizing need, not strictly the occurrence of an event. Getting advice on what crisis intervention services would be appropriate as soon as possible is vital. Intervening only where and when needed and using the most appropriate intervention is crucial. Crisis intervention intends to mitigate the impact of an event, accelerate the recovery process, and assess the need for additional or alternative services.

Agency Administrator: Roles and Responsibilities

- **1. Identification of the Event as a Critical Incident**The Agency Administrator is responsible for identifying an event as a critical incident. The Agency Administrator is the highest-ranking agency line officer with direct responsibility for the location of the incident/personnel involved in the incident. The National CISM Coordinator may assist and advise determining a critical incident.
- 2. Requesting Peer Support (CISM): The agency Administrator or designee should request peer support to the BIA National CISM Coordinator, who will determine the number and types of positions needed. The CISM Coordinator will initiate the ordering process through the national dispatch/coordination system (fire only). In most cases, a CISM Liaison (a member of the Peer Support Group) will be assigned and arrive early to gather information, initiate logistics, and provide immediate support.

3. Working with the CISM Coordinator:

The Agency Administrator or designee is responsible for providing the CISM Coordinator with information about the incident. The AA is responsible for providing a budget code for expenses associated with the response. The CISM Coordinator, in coordination with the AA, will determine the appropriate response protocols and timeframes.

4. Manage Information about the Critical Incident: Acknowledge to employees that an incident has occurred. By providing information to your employees, you can help prevent rumors from spreading. Provide a consistent message to all groups concerning the incident. Address any rumors that may be circulating or concerns employees may voice. Share information about what to expect.

5. Support Employees:

Employees who have experienced trauma respond best to information, structure, and instructions on what to expect next. Find out what employees plan to do with their time once they leave work and provide accountability partners. Coordinate with staff to identify the employees most affected by the traumatic event and require any immediate need support. The CISM Coordinator can assist with this. https://gacc.nifc.gov/cism/documents/reactions.pdf

6. Follow Up:

A BIA National Mental Health and Well-Being Program member will be in contact early in the CISM process. They will locate additional resources and provide referral services.

Follow-Up and Referral Procedures

Follow-up services are integral and fundamental to crisis intervention. Although needs for follow-up services are often determined during crisis intervention, they are included as part of the initial planning for a CISM response. This does not imply that Peer Support groups make "repeated" or "follow-up visits" after the initial intervention is done. That is outside the scope of their training. Follow-up ensures that those individuals who require more intense intervention than acute psychological support are referred to a higher level of care.

The BIA National Mental Health and Well-Being Program is committed to ensuring that the available resources are relevant to the specific needs of both Federal and Tribal organizations. Empowering those affected to seek further help and support beyond the immediate crisis by providing them with tangible resources and information is vital to recovery.



Working With Incident Management Teams...

While most critical incidents occur during initial attack or presuppression activities, they also happen when an Incident Management Team (IMT) is assigned. The Incident Commander (IC) is responsible for making the request through the Agency Administrator (AA) when support is required. CISM personnel report directly to the AA or designee. This is essential since "incidents within an incident (IWI) affect many other groups, not just the IMT and the resources assigned to the fire.

Affected resources assigned to the incident may want to demobilize and return to their home unit. Incidents should not hold personnel while waiting for "CISM." The CISM Coordinator, in coordination with the affected resources and home unit leadership, will determine the appropriate response based on the impact levels and the support needs at the home unit(s).

When an IMT is still operationally engaged, it's important to note that crisis intervention processes are limited. This underscores the need for careful evaluation. The IMT's role in this process is crucial, and it's important to be aware of the potential challenges. in providing immediate support.



neip the INTI in their decision-making process. The CISM Coordinator may assign a Liaison to coordinate directly with the CIPS Leader and the Agency Adm and ask the IC to identify someone from Command and General Staff to function as the point of contact.

Coordination with Investigations

Employees involved in investigations, learning review teams, etc., should be considered the timing of crisis intervention services.

The CISM Coordinator can assist and coordinate with the Investigation Team Leader and assign a "Liaison" to provide on-scene coordination and communication between CISM and investigative personnel.

CIPS Groups do not work for investigative teams; however, depending on agency policy, the Liaison may report directly to the investigative authority.

Working with Other CISM Resources

When Peer Support services are ordered outside normal agency channels, such as a local fire department or other agency, it is essential to notify the National CISM Coordinator. Our goal is to ensure that appropriate interventions are conducted and, importantly, to reduce duplicate efforts that may be counterproductive to the people we are trying to assist.

When local CISM resources are immediately assigned, premature intervention is a concern, and we are committed to providing CISM resources who meet the required training and experience standards, utilize a licensed mental health professional, and intervene with the most appropriate timing and protocols.

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