



Interagency Critical Incident Stress Management Program

Critical Incident Stress Management: What to Expect



Background: The history of the wildland fire culture is replete with examples of good employees who have never been able to fully recover after being involved in a critical incident. Previous generations of fire fighters learned their difficult world and were often told that it hurts sometimes, but one had to "suck it in and stick it out" to survive in the culture. That's how most would learn to cope with stress. The nature of wildland firefighters is not to admit weakness or express feelings.

However, that approach wasn't all bad. One of the key success factors in the interagency Critical Incident Stress Management Program has been recognizing that attitudes and approaches that were once strong features in the wildland firefighting culture can still be of help today in dealing with the stress of the profession. The utilization of Critical Incident Peer Support (CIPS) or "peer support" to deliver CISM services has evolved over the last decade.

CIPS has clearly demonstrated its effectiveness as a tool to reduce human distress when applied by trained, qualified specialists, including peers, and licensed Mental Health Professionals (MHP) under appropriate circumstances and established Boundaries of Competence and Standards of Care.

Critical Incident Stress Management Program

The Critical Incident Stress Management (CISM) Program is designed for individuals affected by potentially traumatic events which are outside their normal work experience. We need to respond to these in a way that is qualitatively different to that in normal work situations. Individuals experience critical incidents in different ways and vary in their reaction to similar events. What may be traumatic for one may not be for others. It is not possible to make rigid recommendations for all situations and employees.

Psychological intervention should be based on recognition of need, not strictly the occurrence of an event. It is important to **get advice** on what post-incident support would be appropriate as soon as possible. One of the challenges is intervening only where and when needed using the most appropriate intervention for the situation.

Critical Incidents and Trauma

Critical Incident: Is not defined by the incident itself; it is defined by individuals and/or an organization's reaction to what occurred. A critical incident is any unexpected, traumatic event that affects an individual's feelings of personal safety, their ability to perform daily activities, and their ability to concentrate on their normal job duties. Simply put, a critical incident is a traumatic event (or perceived life-threatening event) that has sufficient power to overwhelm an individual's or organization's ability to cope.

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 (PTSD). Such an experience simply means that the event occurred, is now part of a person's sensory memory, and needs to be processed and integrated.

The 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 individual responses. Even with identical exposure to a traumatic event, responses will differ based on factors like how different individuals cope with stress, availability of social support, prior traumatic experiences, and the overall stress in their lives.

Most Geographic Areas do not maintain “CISM Teams.” [Critical Incident Peer Support \(CIPS\) Groups](#) are assembled at the time of request and will be comprised of trained and certified CIPS personnel selected to match the backgrounds and experience of those involved in the critical incident (helitack, engines, dispatchers, smokejumpers, etc). The Peer Support Program selects only the best and most qualified for each assignment, including trainees. Those selected must be credible, experienced in fire and aviation, trusted and held in high esteem. They must be sensitive to diversity and multi-cultural components within the agencies

Critical Incident Peer Support Groups

Not all serious outcomes can be prevented, but many people can be helped and return to normal life after a traumatic event. Many long-term negative outcomes can be mitigated or prevented by building a resilient agency, promoting healthy coping strategies, and always utilizing expertise from a licensed MHP as part of the Critical Incident Peer Support Group.

Critical Incident Peer Support (CIPS) is about peers, or “people of mutual respect” helping each other, i.e., 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. Peer relationships are effective because they are built around this mutual understanding, respect and trust, which is the foundation of the CISM program.

A CIPS Group consists of personnel who are (1) formally recognized and operate under established agency policy, (2) have received specialized CISM training for the position or qualifications they hold (3) are assembled by a formally appointed and qualified CISM Coordinator (4) operate under officially established operational guidelines (5) function under the oversight of a licensed Mental Health Professional.

This model, which is referred to as the [“International Critical Incident Stress Foundation \(ICISF\)”](#) model, has found its way into civilian first responders (police, fire, ambulance, emergency workers, and disaster rescuers). It is accepted as the most effective standard of care for organizations with cultures having a history of mistrust in outside sources for crisis intervention and support. It is also the Standard of Care adopted by the Bureau of Land Management.

Peer Supporters have received training and certification as Critical Incident Peer Supporters through the ICISF. They are trained to listen, assess and refer, when necessary to a MHP who specializes in trauma. Peer Supporters should never be used as a replacement for this professional care and **should never** function independently. This would put them outside of the scope and boundaries of competence they’ve been trained for.

CIPS intervention is not psychotherapy or counseling. It is not a treatment for PTSD and is not intended as a substitute for any of these treatments. Neither is CIPS a critique or investigation of the traumatic event. CIPS personnel are not trained to deal with mediation or local administrative issues.



..I was almost certain the crew felt comfortable with these guys. They looked like hotshots, acted like hotshots because they were hotshots...

What We Do

- Situational assessment for managers to help determine the timing and type of support needed for each incident. Each process is put in place based on a methodical approach. Tactics are applied at the right time, in the right place and under the right circumstances.
- Provide a CIPS Group which includes the expertise of a licensed, mental health provider who is experienced in trauma.
- Committed to Code of Ethics and confidentiality requirements.
- Provide peer supporters who can travel to the fire line, spike camp and other remote locations.

Terminology

Critical Incident Stress Management: a crisis intervention process that allows peers to help their peers understand problems that might occur after an event.

Crisis Intervention: temporary, active, and supportive entry into the life of individuals or groups during a period of extreme distress.

Critical Incident Stress Debriefing (CISD): incorporates one or more aspects of a Seven Part (7) Model known as the “ICISF model.” **CISD is but one tactic** within a comprehensive, systematic, integrated, multi-component strategic program. CISD is perhaps the most misunderstood and overused term in the CISM process. The term “debriefing” is used loosely and as a “catch all” for a variety of crisis intervention protocols **that are substantially different than the CISD application and structure.**

Timeline – CISM intervention generally starts no sooner than 48-72 hours after an incident.

Crisis intervention is not an emergency however assistance should be ordered as soon as possible. Peer Support services can also be provided within a few weeks or longer depending on the incident. It is important to allow time for affected individuals to disengage operationally, and re-connect with family or friends. Once this occurs individuals are typically emotionally ready to benefit from peer support.

Peer Support has been shown to lead to improved mental health outcomes. If your staff have been exposed to a significant incident it is important to **get advice** on what post-incident support would be appropriate as soon as possible. For more information go to <https://gacc.nifc.gov/cism/index.html>

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.

2. Requesting Peer Support (CISM): Requests for Peer Support should be made by the Agency Administrator or designee to the appropriate Geographic Area Coordination Center (GACC). A general overview of the situation is required and GACC will work with the Geographic Area CISM Coordinator, who will determine the number and types of positions needed. The GACC will work with the CISM Coordinator to order support group members via the roster function in ROSS. **Critical Incident Peer Support Group personnel are to be ordered as THSP and not CISD.** <https://gacc.nifc.gov/cism/ordering.html>

2. Working with the CISM Coordinator:

The Agency Administrator or designee is responsible for providing the CISM Coordinator with information about the incident. The Agency Administrator is responsible for providing a budget code for expenses associated with CIPS Group response.

When an order is placed a CISM Coordinator will be assigned who will work with the Agency Administrator and designated CIPS Group Leader to determine the appropriate response protocols, timeframes, and decide the size and make-up of the group.

Often a CIPS group member will arrive before the group leader, peer supporters or the MHP. The individual will assist with any immediate needs, meet with the ordering Agency Administrator to gather facts, determine timelines, make an assessment of the impacted individuals and groups, and brief the Agency Administrator on the process. This "liaison" will initiate logistical support, determine meeting times and locations, arrange for facilities etc.



3. Manage Information about the Critical Incident:

Acknowledge to employees that an incident has occurred. By providing factual 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.

4. Support Employees:

Employees who have experienced trauma respond best to information, structure, and instructions on what to expect next. Find out what employees are planning 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 offer them a quiet place to be, but don't force them to be isolated if they'd prefer to stay with their co-workers. More information can be found at: <https://gacc.nifc.gov/cism/documents/reactions.pdf>

Leadership is always an opportunity to reinforce and build trust, confidence, and workplace cohesiveness. When done well, employees will feel cared about, supported, and secure in the knowledge that leadership is both compassionate and competent. **Feeling cared about and supported in the immediate aftermath of a traumatic event is hugely important in the healing and recovery process.**

5. Provide Information to the CIPS Group:

The Agency Administrator or designee will make time to provide a briefing for the CIPS Group Leader upon arrival. The Agency Administrator or designee is also responsible for providing the CIPS Group Leader with contact information for the EAP provider and/or other resources that may be available to provide support within their local area.

6. Follow Up:

As well as meeting immediate support needs, follow up with staff affected by a critical incident or other form of potentially traumatic situation. How and when follow up occurs should always be proportionate to the individual situation and the level of distress the employee shows.

Working With Incident Management Teams

While the majority of critical incidents occur during initial attack or while performing pre-suppression 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 when support is required.

The Critical Incident Peer Support Group reports to the Agency Administrator or designee. This is important since “incidents within and incident” affect many other groups and not just the IMT and the resources assigned the fire. More often than not, a separate CIPS group will be ordered to respond to the home unit of those assigned to the fire and involved in the incident.

Coordination of CISM activities between a CISM Liaison and an IMT member at the Command and General Staff level has proven to be the most appropriate. The CISM Coordinator will assign a Liaison to coordinate directly with the CIPS Leader, the Agency Administrator and ask the IC to identify someone from Command and General Staff to function as the point of contact. CISM support for IMT’s is fairly limited and usually only includes sharing of information or a Crisis Management Briefing. When an IMT is still operationally engaged crisis intervention processes are limited and should be carefully evaluated.

Coordination with Investigations

Consideration should be given to employees involved in investigations and learning review teams etc. as to the timing of crisis intervention services. The CISM Coordinator is available to provide assistance and coordination with the Investigation Team Leader and will assign a “Liaison” who will provide on-scene coordination and communication between CISM and investigative personnel. CIPS Groups do not work for investigative teams however the Liaison may report directly to investigative authority depending up on agency policy.

Agency Administrators should meet with the investigation team and Critical Incident Peer Support Group/CISM personnel separately for introductions and to deliver commander’s intent and answer questions.

These meetings are done separately due to confidentiality expectations and so roles of investigative groups and CISM stay within their respective boundaries.



For more information visit:

<https://gacc.nifc.gov/cism/index.html>

Other Personnel

To ensure consistency and a coordinated approach to helping those affected by a critical incident, members of the assigned CIPS Group are required to complete specific training courses from the International Critical Incident Stress Foundation (ICISF) and demonstrate competency in their skills. Sometimes, CIPS personnel may be too close to an incident (home unit, close relations, family, etc.) to be an effective peer supporter. 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.

When Peer Support services are ordered outside the National or Geographic Area programs (such as a local fire department or other agency) it is recommended that additional orders not be placed for a CIPS Group without coordinating with the National or Geographic Area CISM Coordinator. Uncoordinated interventions create confusion, result in duplicate efforts and are counterproductive to the people we are trying to help.

When local peer support groups or groups from other areas want to provide “CISM” services immediately after a critical incident, it is important to remember that this can lead to the same problems (coordination, training consistency and duplication) mentioned above. Even with good intentions, not everyone who offers assistance is the best resource for the people who need the help. While they may check in with employees or managers at the incident and identify themselves as being with “CISM” our CIPS Groups do not co-mingle or integrate them into our group. The CISM Coordinator will provide the requesting unit with a roster of approved CISM personnel who have been officially ordered.