A Crisis Management Briefing is a structured group meeting designed to:

- Provide information about the event.
- Demonstrate a sense of leadership.
- Reduce sense of chaos.
- Enhance credibility.
- Control rumors.
- Educate about typical stress reactions.
- Provide information about basic stress management and coping techniques and resources.
- Generate cohesion and sense of camaraderie.
- Re-establish a sense of community.

A Crisis Management Briefing is NOT:

- A press conference (media are not permitted).
- An operational critique.
- Part of an investigation.
- A session for name calling, agency bashing, etc.
- A defusing or a critical incident stress debriefing.
- Counseling or psychotherapy.
- A substitute for psychotherapy.
- A “focus group”.
- A solution group for on-going problems in organizations or committees.

Pre-Planning

Prior to any group intervention, the CIPS leader needs to properly plan the upcoming intervention:

- Coordinate with the liaison or contact assigned to you by the Agency Administrator. This person is responsible for notifying employees about meeting time and location.
- Provide food such as fruit, cookies, a light lunch, coffee, tea, water and juice.
- When arranging meeting space and other logistical support try not to impact the local unit.
- Designate the roles of each CIPS group member (teachers, observers). Assign primary duties per phase and determine which group member(s) will check with anyone who leaves early.

Check with agency Point of Contact and determine:

- Their observations about things people might be struggling with.
- What signs and symptoms you have been seeing or concerned about.
- Relevant themes, issues, rumors, etc.
- Biggest concerns.
- Establish time and location of meeting and address logistical concerns.

Identify and meet the “Fact Person” (Appropriate and credible person from the agency) – NOT A CIPS MEMBER.

- Provide the spokesperson with an outline of what you would like them to cover and explain how the factual information is important to the CMB process.
- Do a dry run.
- If you are aware of rumors or speculation, have the “fact person” address them “head on.” The goal is to provide credible information and get everyone on the same page.

Never allow a CMB to turn into name calling, operational critique, accusations and/or a forum for organization or leadership bashing.

A CMB can get out of hand and you can lose control especially during the Fact Telling Phase and the Question an Answer Phase.
Phase 1 – Assemble the Group

This phase was originally the first step in assisting the group in re-establishing a sense of community. The power of group support is important to individuals in crisis. It enforces the idea that “we are in this together.”

- It is helpful if a manager or agency administrator opens the meeting by thanking the people for attending and introducing the CIPS Group Leader.
- Pay attention – what signs and symptoms are you hearing about and/or seeing with the people.
- CIPS Group members need to watch people (including one another) for signs symptoms or concerns that might need to be addressed later.

Introduction and Overview (Done by CIPS Group Leader)

- CIPS leader and members introduce themselves.
- Provide an overview of what a CMB is and introduce the concept. Ask people to hold questions until the end.
- If appropriate acknowledge things like:
  - **Ongoing investigation that you will not have all of the information about**
  - **Rumors and speculation**
  - **Here to tell you what we know**
  - **Other relevant themes**

Phase 2 – Facts

This is a crucial phase of the CMB. People often seek accurate and factual information following a critical incident. Knowing the facts helps reduce anticipatory anxiety and return a sense of control to those impacted by the event. It is important to emphasize information presented is the best available at this time, and is subject to change.

The CIPS Group will answer questions in Phase 4
This prevents the CMB from bogging down with questions about the facts.

Phase 2 – Facts, Continued

Present the Facts (Done by the Agency Representative)

- This is done by a credible representative, preferable the agency administrator or designee.
- Provide the facts and overview of what happened and an update on the current situation (injury status, hospital updates, investigations, etc.).
- Be aware that contradictory or more current information may already be shared through social media. Stay with the facts that you have.

Phase 3 – Reactions

Reaction Phase is intended to:

- Normalize.
- Attribute reactions to being exposed to an event, not personal weakness.
- Make them relevant to the situation and what, if any, things you are hearing.
- Make your comments relevant to the group, theme, and/or situation.

This phase is where information gathered earlier becomes important.
The CMB is more effective when the specific concerns, reactions, or fears of the attendees are discussed.

Refer to handout you have either now or discuss it during the conclusion

Phase 4 – Teaching

Usually done by Mental Health Professional

Common Recommendations include:

- Maintain a normal schedule.
- Rest and eat healthy meals.
- Exercise
- Avoid use of alcohol or other substances used to “relax.”
- Talking with others can be very healing.
- Natural support systems.

These recommendations need to fit the incident as much as possible**
Questions and Answers
(Facilitated by CIPS Group Leader – CIPS Group and Leader Jointly Answer Questions)

If questions and answers are allowed they should be done at the end of this phase. Some prefer not to open it up for questions and find it’s more beneficial to have one-on-one discussions afterwards.

- Know the limitations of your knowledge and never go beyond those limitations.
- If you do not know the answer – say so.
- Have the “fact giver” or appropriate group member respond to questions relating to what they talked about.
- Do not let things get out of hand or allow the CMB to deviate from its purpose.
- The questions asked will tell you what the group is most concerned about or needs.
- Remember and use that information for other individual or group interventions.
- Ending Segway – “We have time for one more question.”

Conclusion and Wrap Up
Done by CIPS Group Leader

- Thank everyone for attending and allowing the CIPS Group to share information.
- Remind group of hand-outs in the back of the room.
- Offer understanding, empathy, concern and hope.
- Inform the group about what other interventions may be available (one-on-one, group sessions, etc).
- Let the group know you will be around for awhile; this allows for the group to talk amongst themselves, interact with CIPS group members, etc.
- Share a light snack, lunch, or other refreshments together.

Logistical Considerations

If one-on-one or small group sessions are expected after a CMB, consider holding the CMB away from a government facility such as a hotel conference room nearby.

- Hotshot crews, helitack crews, etc. will generally insist on meeting at their base.
- Try not to impact the local unit. The CIPS Group should be self-sufficient and able to make these types of arrangements.
- Always follow established incident business rules for procurement, etc.
- CIPS Group should determine meeting room arrangement rather than local unit. For a CMB, a classroom/auditorium setup is the most appropriate.
- Avoid a “circle!

Strategic Planning Factors

CISM Coordinators and CIPS Groups should consider:

- Target population which needs assistance. CMB’s have been found to be extremely useful with a variety of audiences including civilians, military personnel, and emergency responders. Group size may vary from 10-300 or more
- Timing of interventions so to be most helpful. In some cases, consider scheduling multiple CMB’s to better accommodate family care and shift work needs. For instance, schedule one CMB during business hours, another in the evening, and perhaps another one the weekend to provide those affected several opportunities to attend.
- Resources required providing the best services to those in need, and the type(s) of intervention which best fit the situation. The number of peer supporters needed varies depending on the severity of the incident.
- During a CMB for a suicide for example, it is recommended one peer supporter per 5-8 expected attendees. For a CMB following a large-scale event, it is recommended one peer supporter for 15-20 expected attendees.