

## CRITICAL INCIDENT STRESS MANAGEMENT PROTOCOL

### 1. INTRODUCTION

1.1 The Maryland Critical Incident Stress Management (M.C.I.S.M.) program is based on a team approach, consisting of mental health professionals and peer support personnel. The M.C.I.S.M. team provides multiple services for emergency service workers, e.g., defusing, debriefings, referrals, and education. These services are performed in conjunction with fire, police, and E.M.S. departments and providers across the state. The coordination of the M.C.I.S.M. team is conducted by M.I.E.M.S.S..

1.2 There are strong indications that more than 86% of emergency services personnel experience some emotional, cognitive or physical reaction after responding to certain calls. These calls have the potential to create a state of psychological distress which will cause the provider to become concerned about his or her health. It is extremely important that when providers are having unusual or intense reactions to a certain call or an accumulation of calls, that the M.C.I.S.M. team be notified. The major stressors of emergency workers may include but are not limited to:

- \* Death or serious injury of a fellow colleague
- \* Suicide of a fellow worker
- \* Multiple casualty incidents
- \* Death or serious injury to children
- \* Familiarity with the victims
- \* Prolonged rescue work
- \* Exposure to dismemberment

### 2. GOALS

2.1 To provide the psychological support necessary to ensure optimal functioning of Maryland emergency workers and their primary support systems.

- 2.2 To enhance job (volunteer & career) retention capabilities for providers and reduce the turn-over rates.
- 2.3 To enhance the quality of response for persons in the State of Maryland needing emergency services.
- 2.4 To enhance the psychological welfare of providers and their families.

### 3. **DEFINITION**

#### 3.1 Defusings

3.1.1 Defusings are performed after the incident and after the unit has returned to the station. The purpose is to offer information, support, and allow initial ventilations of feelings. The need for a debriefing can be established at this time.

3.1.2 Defusings should last only 15-30 minutes

#### 3.2 Debriefings

3.2.1 Optimally debriefings are to take place 48 to 72 hours after the incident. The debriefing process allows the providers to express what they did, what they saw, and how they felt. This is done in a group forum to allow the discussion to take place freely among the providers. The M.C.I.S.M. team members facilitate this discussion and provide positive feedback when appropriate.

### 4. **INDICATIONS**

4.1 Feelings of anger

4.2 Embarrassment

4.3 Anxiety

4.4 Frustration

4.5 Blaming yourself

4.6 Unable to get good rest

4.7 Guilt

4.8 Nightmares

4.9 Depression

5. **CONTRAINDICATIONS**

5.1 The M.C.I.S.M. coordinators and their team members **should not** force this concept on the providers who are not reacting in an unusual manner.

5.2 Providers that do not exhibit any unusual reactions.

5.3 Except in very rare situations should debriefings be made mandatory and only in consultation with the M.C.I.S.M. coordinator.

6. **PROCEDURE TO ACTIVATE THE TEAM**

6.1 The providers are to contact the M.C.I.S.M. coordinator in their region if one has been established. If your region does not have a coordinator you may call SYSCOM, and a M.C.I.S.M. representative will call you back. 1-800-648-3001

6.2 When notified, the M.C.I.S.M. Program Coordinator contacts the Agency requesting service to assess the specific support needs and is given a time and place for the defusing or debriefing.

6.3 It is the responsibility of the M.C.I.S.M. Program Coordinator to contact the appropriate number of mental health and peer support team members to conduct the defusing or debriefing. Team members who live in or near the area of the station will be called first. One of the team members will be the team leader and be responsible for the team.

6.4 It is imperative for the station to give the M.C.I.S.M. Program Coordinator only **ONE** contact person from the station in order to avoid any confusion.

- 6.5 The team leader will call the contact person of the station to gather any additional information and to confirm the time and place of the defusing or debriefing.
- 6.6 After the debriefing, the team leader is responsible for contacting the station within 48 hours to assess the effectiveness of the defusing or debriefing and to follow-up on any referrals that were made.

7. **CONFIDENTIALITY**

- 7.1 All debriefing sessions are held in the **strictest** confidence.
- 7.2 All participants must agree to keep the names of persons participating in the session and the content of the session confidential.
- 7.3 Press persons are never permitted to attend a M.C.I.S.M. session.