



STRESS & CRITICAL INCIDENT STRESS MANAGEMENT

**Silver Cross EMSS
EMD CE
September 2011**

INTRODUCTION

- You, your callers, victims and their families can experience various degrees of stress in an emergency.
- Stress is the body's reaction to a change that requires a physical, mental or emotional adjustment or response.
 - Different things can be “stressors” to different people.
 - The more stressors that build up without a release, burnout can develop.

EMERGENCY



GENERAL ADAPTATION SYNDROME:

The body's response to stress

- Alarm response
- Reaction and resistance stage
- Recovery-
exhaustion



STRESS MANAGEMENT ON THE JOB

- Physiologic signs of stress
- Endocrine and nervous system produce fight or flight reaction releasing adrenaline
 - Increased respirations and heart rate
 - Increased blood pressure
 - Cool, clammy skin
 - Dilated pupils
 - Tensed muscles
 - Increased blood glucose level
 - Perspiration
 - Decreased blood flow to gastrointestinal tract, nausea or vomiting may result



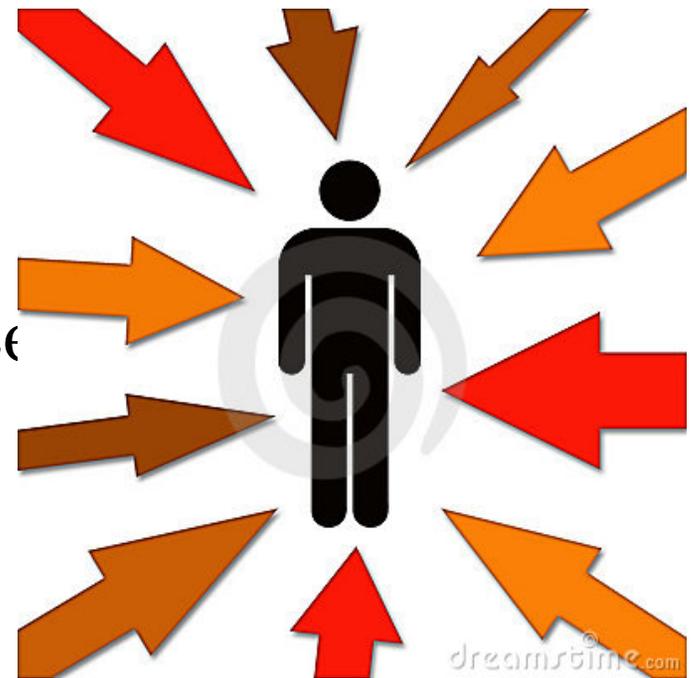
STRESS REACTIONS

- Acute stress reactions
 - Occur during a stressful situation
- Delayed stress reactions
 - Manifest after stressful event
- Cumulative stress reactions
 - Prolonged or excessive stress
- Post-traumatic stress disorder (PTSD) can develop
 - Re-experiencing an event making you unable to perform your duty
 - Critical incident stress management (CISM) was developed to decrease likelihood of PTSD.



PHYSICAL SYMPTOMS OF CUMULATIVE STRESS

- Nausea
- Tremors
- Profuse sweating
- Chest tightness
- Fast breathing or heart rate
- Sleep problems
- Fatigue visual difficulty
- Grinding teeth



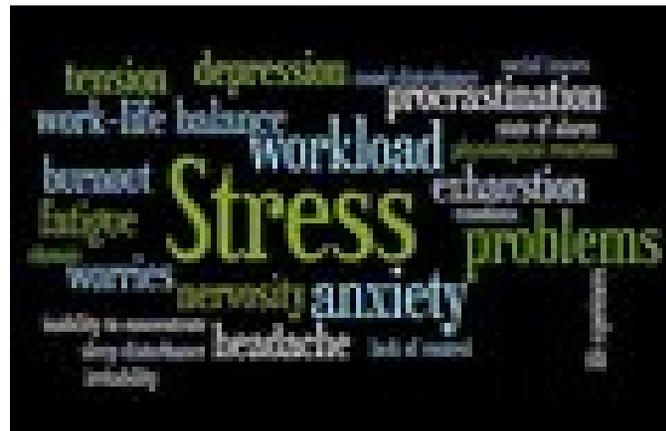
THINKING/COGNITIVE SYMPTOMS

- Difficulty making decisions
- Confusion, difficulty concentrating
- Memory problems
- Distressing dreams
- Increased/decreased alertness
- Overwhelmed by normal routines
- Difficulty problem solving



EMOTIONAL SYMPTOMS

- Fear, guilt and grief, anxiety
- Depression, feeling isolated
- Limited contact with others
- Intense anger, irritability
- Denial, agitation, apprehension
- Excessive worry for self and others



BEHAVIORAL SYMPTOMS

- Emotional outbursts
- Loss/increase of appetite
- Excessive alcohol and drug consumption
- Inability to rest/relax
- Antisocial actions, relationship difficulties
- Nonspecific body pains
- Pacing, hyper-alert to environment



BEHAVIOR SYMPTOMS

- Excessive fear or anxiety
- Sleep disturbances (nightmares, inability or excessive sleep)
- Death preoccupation
- Avoidance behaviors
- Confusion, memory loss
- Acting out (socially unacceptable behavior)
- Suicidal thoughts



BEHAVIORAL SYMPTOMS

- Experienced personnel act like rookies
- Group Symptomology
 - Poor judgment on calls following incident
 - Group is unusually preoccupied with incident
 - Gross humor
 - Inability to get along with others
 - Changes in attitude and behavior when acting as a member of the group



WARNING SIGNS OF STRESS

- Irritability toward coworkers, family, friends
- Inability to concentrate, indecisiveness
- Sleep difficulties
- Sadness, hopelessness, anxiety, or guilt
- Isolation
- Loss of appetite
- Loss of interest in sexual activities
- Loss of interest in work
- Increased use of alcohol
- Recreational drug use
- Physical symptoms such as chronic pain
 - Headache
 - Backache



HEAL THYSELF

What can you
do to relieve
stress?



STRATEGIES TO MANAGE STRESS

- Minimize or eliminate stressors.
- Change work hours.
- Change the work environment.
- Cut back on overtime.
- Change your attitude about the stressor.
- Talk about your feelings.
- Do not obsess over frustrations.
- Try to adopt relaxed, philosophical outlook.
- Seek professional counseling if needed.
 - Employee Assistance Program
 - Critical Incident Stress Management



STRATEGIES TO MANAGE STRESS

- Expand social support system.
- Sustain friends and interests (hobbies) outside emergency services.
- Minimize physical response to stress
 - Deep breathing
 - Periodic stretching
 - Regular exercise
 - Aroma therapy
 - Meditation or relaxation techniques
- Limit intake of caffeine, alcohol and tobacco use



STRESS MANAGEMENT

- Nutrition
 - Eat nutritious food
- Exercise and relaxation
 - Exercise regularly to promote fatigue for sleep
- Sleep
 - Regular and uninterrupted
- Disease prevention
 - Know family health history and adjust lifestyle
 - Immunizations and regular physicals
- Balancing work, family, and health



Source: Courtesy of USDA



COPING MECHANISMS

○ For Yourself

- Spend time with others
- Maintain a normal schedule, keep active
- Express feelings as you experience them
- Talk is a healing medicine
- Give yourself permission to feel and express your feelings about the incident to others
- Don't make major life changes or purchases
- Make small decisions to help you feel in control of your life
- Avoid overuse of drugs and alcohol
- Don't be afraid to seek help



COPING MECHANISMS

- For Family Members and Friends (co-workers)
 - Listen carefully to the individual's feelings
 - Help with everyday tasks
 - Avoid “curious” questions about the incident
 - Don't be afraid of silence about the event
 - Understand that each person's reaction to event is personal



CISM

- What is a Critical Incident?
 - A situation faced by emergency personnel that causes them to experience unusually strong emotional reactions which have the potential to interfere with their ability to function normally either on the job or later



CRITICAL INCIDENTS

- Situations that **always** warrant debriefing
 - Line of duty death
 - Serious line of duty injury
 - Suicide of one of our own
 - Disaster or major multi-casualty incident
 - Calls involving the death of a child
 - Any other situation that overwhelms you



CRITICAL INCIDENTS

- What **may** warrant a debriefing?
 - Events involving children
 - Events involving people we know
 - Prolonged incidents
 - Incidents which attract high media attention
 - Events which are highly emotionally charged
 - Prolonged search and rescue or extrication
 - Mistakes – whether real or perceived



CISM

- Don't be afraid to be the one to begin the process
- Don't be afraid of the process
- Realize and accept your limitations
- Give yourself permission to seek help
- The identification of the stress and its impact are in the eyes of the beholder



CISM

- What is the purpose of CISD
 - To accelerate normal recovery, for normal people, having normal reactions to abnormal events
- What do the services do?
 - Simple, effective method to help emergency workers trying to cope with a stressful experience
 - Promotes the continuation of productive careers while building healthy stress management behaviors
 - NOT psychotherapy
 - NOT a critique of an agency, call or incident
 - Will not solve departmental problems
 - Generally voluntary, but may be mandated by your agency



CISM

- What providers do they serve?
 - Fire Departments
 - Police Departments
 - Hospitals
 - Ambulance Services
 - Coast Guard
 - Dispatchers
 - Disaster Responders
 - Chaplains for Fire, Police, and Hospitals



CISM TEAM

- Who are members of a CISM Team
 - Psychologists, firefighters, paramedics, emergency room personnel, EMS directors, police officers, 911 dispatchers, social workers and chaplains
 - Special training and continuing education
 - Members of the team will not participate if they know the participants in the debriefing
 - Sessions led by mental health professional who is supplemented by your peers



MEETING GROUND RULES

- No breaks
- If you leave, you will be followed
- No notes or pagers
- No rank
- Off duty



CISM

- Who is included in a debriefing?
 - Only personnel directly involved in the incident
 - All those attending should be out of service or duty
 - Spouses and significant others can be provided a separate debriefing



DEBRIEFING/DEFUSING PROCESS

○ Introduction Phase

- Team is introduced
- Describe the process and rules
- Describes the specific event and why they were called



EXPLORATION/FACT PHASE

- **Everyone** participates in discussion in this phase
- Facts, thoughts and reactions are shared
- Symptoms are revealed
- All share what their role at the scene was and what happened from each person's point of view



THOUGHT PHASE

Team asks what each person's **FIRST** thought or most prominent thought was once the incident was over and they came off auto-pilot



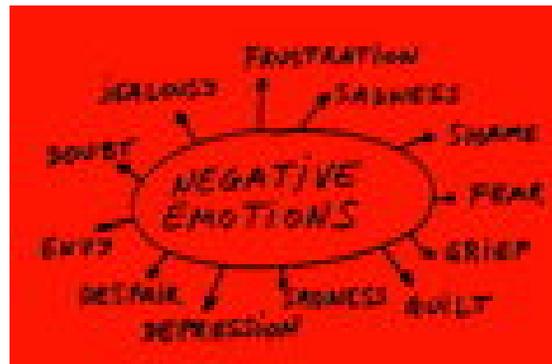
REACTION PHASE

- Team identifies what worse part of call was for each participant personally
- Identifies when each person thinks of incident, what picture comes to mind



SYMPTOM PHASE

- Team asks group to describe any cognitive, physical emotional or behavioral symptoms they experienced at the scene
- If session delayed or a follow-up
 - Participants are asked what they now feel and how that is different from the scene reactions



TEACHING PHASE

- Coping skills are discussed for the participant and their significant others and friends and colleagues
- Positive outcomes that may have come out of the tragedy are identified
- Those needing further assistance are identified and resources identified



RE-ENTRY PHASE

- Issues are clarified
- Questions answered
- Team makes summary comments and referrals for a follow-up as a group or individually



CISM

- When do we call?
 - Anytime emergency personnel have experienced an incident which causes them unusually strong emotional reactions
 - When emergency personnel coping mechanisms are overwhelmed in response to a particular traumatic event
 - The quicker the better!
 - The day of the incident or within 12 hours
 - Defusings are held during or immediately after the event
 - Debriefings are held 24 to 72 hours after an incident
 - Before those involved rethink the experience and misinterpret the experience's meaning



CISM STATISTICS

- International Critical Incident Stress Foundation reports:
 - 3% will have no symptoms
 - 86% have some symptoms within 24 hrs of incident
 - 42% still have some symptoms 3 weeks after the incident
 - 22% still have some symptoms 6 weeks after the incident



CISM STATISTICS

- Personnel having symptoms after 3 weeks post-incident should seek professional help
- Personnel having symptoms after 6 weeks need help



CISM

- What do we pay?
 - No fees
 - Donations are accepted
 - Group functions on donations and grant monies



CRITICAL INCIDENT STRESS MANAGEMENT

- Northern Illinois CISM
 - 1-800-225-CISD
 - Serves the following counties:
Cook, DuPage, Grundy, Kane,
Kankakee, Kendall, Lake,
McHenry and Will

<http://www.ni-cism.org/>

<http://icisf.org/>



WILL COUNTY CRITICAL INCIDENT STRESS DEBRIEFING TEAM CONTACTS:

- Will County Sherriff's Social Worker,
Bonnie McPhillips @
815-724-1878
- City of Joliet Police Department's Social
Worker,
Mardi Wunderlich @
815-724-3205



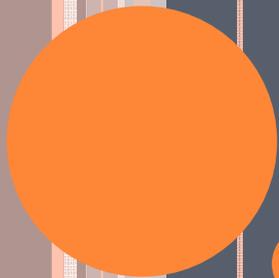
INTERESTING WEBSITES WITH MORE INFO

- <http://www.stressfree.com/>
- <http://www.headsets911.com/>
- <http://www.stress.org>

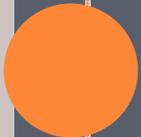


STRESS & CISM





COMING SOON



CHILDBIRTH



NOVEMBER 2011