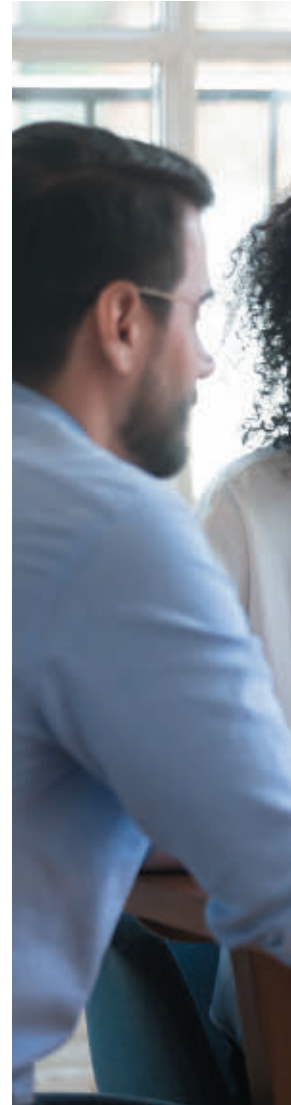


# HOW CAN WE COPE?

## DEALING WITH THE STRESS THAT FOLLOWS A CRITICAL INCIDENT

Agencies can use formal and informal methods to debrief employees following traumatic 9-1-1 calls.

By Holly Williams



**H**ave you ever wondered what critical incident stress management (CISM) is and why we use it in public safety? According to CISM International, CISM is “an intervention protocol developed specifically for dealing with traumatic events.” Trauma is often considered a deeply distressing or disturbing event that overwhelms an individual’s ability to cope, causes feelings of hopelessness, and diminishes their sense of self and their ability to feel the full range of emotions, according to [integratedlistening.com](http://integratedlistening.com). The most common types of CISM include debriefing, a planned interdepartmental discussion of a traumatic incident, and defusing, a meeting held shortly after an incident which may involve only supervisor and frontline telecommunicator. Other types of CISM include crisis management briefings and critical incident adjustment support. So how does trauma affect a public safety telecommunicator, and what is the need for CISM in our emergency communications center (ECCs)? We will look at the components of CISM and why it is an integral part of an ECC.



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Our agency has first-hand experience with CISM, and getting dispatch included in the conversation was challenging.

In Fall 2019, we received a call for a child who was not breathing. The parents refused to listen to the telecommunicator. Despite the telecommunicator pleading with them to stop their car and perform CPR, they continued driving to the fire station, which was not staffed at the time. The child passed away.

The telecommunicator struggled with this call. She called her husband to pick her up after work because she was so upset that she

couldn't drive home. As a newlywed trying to start a family of her own, many things went through her mind during this call, such as how could the parents not stop and try to help their child. She felt like she failed the child because she failed to get the caller to follow her instructions.

Initially, she did not want to go to the CISM debriefing. As the supervisor on duty during the call, I was eligible to go so I volunteered to go with her. My director stated that she would not pay me to go to the debriefing. But being a supervisor and their leader, I

**“The moderator started with the telecommunicators in the room and allowed them to talk about how they received the call, the challenges with the caller and obtaining information, and the response dispatched.”**

## The Structure of a Peer Support Team

In Orange County, Virginia, we have created two sections of the peer support team; one to help with the traumatic events and one to help celebrate ECC personnel for birthdays, work anniversaries and retirements. Those assigned to the peer support team to handle traumatic events are willing to respond to the center if activated for an emergency. They are a mixture of line employees and management who take advantage of training and resources. The other part of the peer support team tasked with being our celebration team engages all personnel as valued members of the ECC.

felt it was my responsibility to see that my teammate got the help she needed, so I went on my day off. Participating in larger CISM events with the other partner agencies can allow telecommunicators to talk out all the parts of the call and understand that they did their job to the best of their ability and relieve some of their stress. We need leaders to step up in these moments and care for their people. If our team is not healthy and happy, they are not productive at work.

The first step in CISM is determining that there is a need for some debriefing, which is usually the result of a traumatic event or tough call. The debriefing is an organized meeting to facilitate discussion about the incident. Often the debriefing will be referred to as a CISD or critical incident stress debriefing.

We should ensure that those who worked the incident are allowed to go to the CISD. Typically, only those who handled or responded to the event can attend the debriefing. Debriefings are informal and one person is responsible for leading the meeting. The leader is trained in CISM and may be a clinician or a peer from the public safety family. It is a confidential meeting, and most involved understand the importance of keeping what is shared confidential. We will not build credibility if we attend and then share what was discussed with others outside of the meeting. Our integrity is paramount in these situations so everyone can feel free to share how the call impacted them.

Without breaching that confidentiality, I can tell you that the last debriefing I attended focused on the response to the child who passed away in the car. The moderator started with the telecommunicators in the room and allowed them to talk about how they received the call, the challenges with the caller and obtaining information, and

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the response dispatched. Next, it moved to those who responded, from the law enforcement officers to the fire and EMS responders; each would give their story and the timeline of events.

At the end of this debriefing, everyone understood each partner's role in getting help, things that could have been done better, things that went smoothly and the outcomes of the situation. This simple debriefing allowed the telecommunicator to know that her role in this call was seamless, that she did her job that day and no matter what she did in this situation, the outcome would not have changed. The child was reported to have been beyond help when the 9-1-1 call was originally made, therefore the CPR instructions likely would not have changed the outcome.

Another type of intervention following a traumatic call is defusing, which is a smaller, shorter meeting usually done within a few hours of the event. As with the debriefings, these are confidential meetings and voluntary to attend.

Both types of meetings aim to ensure that our staff and teammates are physically and emotionally well following a difficult call. Our agency sent personnel to be certified in CISM and CISD so that we could have a

person on staff to help in these situations. Our CISM or peer support team is available to come in if the center has a tough call/traumatic event and talk to those on shift to see if they are OK and if anyone needs assistance. Sometimes, just running through the call with a person to look at all aspects is enough to have closure for those in dispatch.

Crisis management briefings are large group interventions designed to present facts regarding the incident. These briefings include a controlled discussion, as well as a question and answer session to deal with the employee's stress or provide available resources. Critical incident adjustment support (CIAS) is another avenue that may be available when assistance is needed for an individual, a family or any group to cope with the aftermath of an incident and overcome the impact of the incident. In this scenario, the incident may not be related to a 9-1-1 call but could be the unexpected loss of a coworker or other internal incident that impacts the ECC.

In a 2022 survey I conducted that included over 200 respondents from 40 states, the data showed that when a tough call happens, 68% of telecommunicators must continue to work and take the next call. Only 25% of telecommunicators were allowed to take a short break. In that same survey, over 84% of telecommunicators stated they had felt stress directly related to the job. These are alarmingly high numbers for our telecommunicators, and we must do better at finding a way to ensure that we are taking care of our personnel.

During a recent Monday night football game, a player went into cardiac arrest on the field and was aggressively worked on to give him the best chance for survival, highlighting the lifesaving actions of first responders and public safety personnel nationwide. The football teams were so distraught over what they witnessed that they didn't finish the game. Public safety telecommunicators often have calls for someone in cardiac arrest where we give the caller emergency medical dispatch (EMD) instructions. Yet telecommunicators are on to the very next call, often not knowing the outcome of our efforts. This highlights the need for ECCs to have CISM or peer support teams trained in CISM.

Often the telecommunicator views stress as part of the job, and we tend to use alcohol, caffeine, tobacco and dark humor to deal with the things we hear daily. Is it

healthy for telecommunicators to use alcohol or excessive amounts of caffeine to cope with the stress of the job we do? No. Having the CISM or peer support teams talk it out with that telecommunicator would be more beneficial to any center. That said, we need more resources than CISM and peer support teams to have the happy and healthy telecommunicators who can provide the best customer service to each caller. For example, it is vital that training supervisors see the signs of stress in their team members so

that they can activate the CISM team when needed. And it is not always necessary to hold a large debriefing; often, a one-on-one session could help a telecommunicator struggling to process a call. Helping the team understand that it was not their emergency and that they did their job to the best of their ability is a simple start for supervisors and leadership. Organizing a peer support team will benefit your ECC.

It is incumbent upon leaders to recognize the signs and the need for intervention

essential to taking care of and retaining our telecommunicators. Changing the culture in our centers may help our telecommunicators feel valued and open enough to come to a supervisor or leader and say, “I am not OK, and I need help.” Together we can end the stigma around not being OK and take traumatic events seriously. ●

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## CDE EXAM #65177

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| <ol style="list-style-type: none"> <li>1. CISM stands for Critical Incident Stress Means?             <ol style="list-style-type: none"> <li>a. True</li> <li>b. False</li> </ol> </li> <li>2. Trauma is often considered _____.             <ol style="list-style-type: none"> <li>a. An injury caused by someone</li> <li>b. A deeply distressing or disturbing event that overwhelms an individual’s ability to cope</li> <li>c. A stressful event that makes it difficult to focus at work</li> <li>d. All of the above</li> </ol> </li> <li>3. Statistics from the survey conducted showed that _____% of telecommunicators have experienced stress directly related to the job.             <ol style="list-style-type: none"> <li>a. 75%</li> <li>b. 25%</li> <li>c. 68%</li> <li>d. 84%</li> </ol> </li> <li>4. Types of CISM include debriefing, a planned interdepartmental discussion of a traumatic incident,</li> </ol> | <ol style="list-style-type: none"> <li>and defusing, a meeting held shortly after an incident which may involve only supervisor and frontline telecommunicator. Other types of CISM include crisis management briefings and critical incident adjustment support.             <ol style="list-style-type: none"> <li>a. True</li> <li>b. False</li> </ol> </li> <li>5. Members assigned to peer support teams should be available to respond in the event the team is activated.             <ol style="list-style-type: none"> <li>a. True</li> <li>b. False</li> </ol> </li> <li>6. Crisis management briefings are large group interventions designed to present facts regarding the incident, have brief controlled discussion, and a question-and-answer session.             <ol style="list-style-type: none"> <li>a. True</li> <li>b. False</li> </ol> </li> </ol> | <ol style="list-style-type: none"> <li>7. Organizing or forming a _____ is a helpful tool that will benefit your center.             <ol style="list-style-type: none"> <li>a. CISM</li> <li>b. Debriefing</li> <li>c. CISD</li> <li>d. Peer support team</li> </ol> </li> <li>8. A debriefing is an organized meeting to facilitate a debate about the incident that occurred.             <ol style="list-style-type: none"> <li>a. True</li> <li>b. False</li> </ol> </li> <li>9. Supervisors should leave recognition of stress among employees to the professionals.             <ol style="list-style-type: none"> <li>a. True</li> <li>b. False</li> </ol> </li> <li>10. _____ is paramount in a CISM situation so that those in attendance can be vulnerable and share how they were impacted.             <ol style="list-style-type: none"> <li>a. Compassion</li> <li>b. Honesty</li> <li>c. Understanding</li> <li>d. Integrity</li> </ol> </li> </ol> |
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