



Detecting Early Warning Symptoms of Stress in the Public Safety Telecommunicator

APCO candidate ANS 3.111.1-202X

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FOREWORD

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EXECUTIVE SUMMARY

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131 On behalf of the Public Safety Industry as well as our colleagues throughout telecommunications, the APCO
132 Detecting Early Warning Symptoms of Public Safety Telecommunicator Stress Working Group created this
133 standard with the goal and intention of addressing, recognizing, and managing stress associated with this
134 profession. The Working Group consisted of professionals in a variety of positions within the Emergency
135 Communications Center (ECC) as well as those in the private sector with a vested interest in this topic.

136 Public Safety Telecommunicators (PSTs) know their job takes a toll. Research, specific to the Public Safety
137 Industry, illustrates the connection between duty-related trauma and PTSD symptoms (Troxell, 2008; Pierce &
138 Lilly, 2021), the impact of compassion fatigue and emotional labor (Tracy 1988; Goold, 2010), and the physical
139 results of working in the profession (Lilly et al., 2015).¹ Several studies explore the link between 9-1-1 work and
140 compassion fatigue, burnout, and PTSD. In each study, a connection is identified between the challenging and
141 traumatic nature of the 9-1-1 workload and its effects on the telecommunicator. Additionally, the studies reflect
142 the biggest cause of PST stress may not be only the 9-1-1 calls, but include shift work, lack of managerial
143 support, and other organizational issues.

144 The effects of prolonged exposure to PST stress appear, first, as early warning symptoms. This standard
145 identifies symptoms enabling the PST to engage in positive actions hopefully before choosing to leave the public
146 safety industry.

147 In 2017 APCO International published the Broadband Implications for the PSAP Analyzing the Future of
148 Emergency Communications, also known as Project 43 (P43). P43 sought to better prepare the 9-1-1 industry for
149 advancements in technology that would fundamentally change the nature of the 9-1-1 work. Addressing these
150 issues directly, P43 concluded training PSTs to effectively recognize and manage stress in themselves and their
151 colleagues is immediately essential, and becomes increasingly important for tomorrow, especially with the
152 implementation of Next Generation 9-1-1 (NG911) broadband technologies. NG911 introduces a host of novel
153 factors, including a flood of new data streams, bringing additional stressors to the PST daily workload.

154 Recommendations were made in P43 for PSAPs to “place a greater emphasis on stress management training”,
155 especially in anticipation of these increased sources of stress”. Stakeholders were advised to “identify lessons
156 learned in other sectors and evaluate PST stress and the efficacy of strategies and interventions to prevent or
157 mitigate stress.” The intention would be to ensure any new training standards and programs were informed by
158 existing experience and empirically driven.²

159 The above recommendations led to the formation of the Standards Development Committee (SDC) Working
160 Group Detecting Early Warning Symptoms of Stress in Public Safety Telecommunicators. The members of this
161 working group set the standard as identifying the problem, identifying the early warning symptoms of PST
162 stress, and finally offering strategies and resources for addressing PST stress.

163 This standard is intended to equip industry stakeholders, both individuals and agencies, with the tools and
164 perspectives necessary for a proactive approach to detecting and mitigating the stress related challenges of the
165 job of the Public Safety Telecommunicator.

¹ <https://www.watsonconsoles.com/blog/4-powerful-steps-for-less-stress-as-a-911-dispatcher>

² (APCO International, 2017)

Chapter One

The Importance of Addressing Public Safety Telecommunicator Stress

SCOPE

This section addresses the importance of focusing attention on the stress of Public Safety Telecommunicators.

1.1 Goal for Implementation

- 1.1.1. The agency should take action to prevent, eliminate and manage the long-term effects of stress. Addressing early warning symptoms and signs of PST stress is crucial because it impacts health, wellness, productivity, citizen safety, and overall customer service with the industry.
- 1.1.2. PSTs play an essential role in processing calls for service, responding to incidents in the field and listening to cries for help. The consistent exposure takes an emotional toll on the PST, which can “compromise professional functioning and diminish the quality of life.”³
- 1.1.3. Field responders (police, fire, EMS, and other emergency responders) are dependent, in part on the PST’s effectiveness. PSTs are the first line of contact for citizens requiring emergency and non-emergency aid. PSTs answer calls ranging from non-emergency requests for assistance to potentially life-threatening crises. The call handling process requires good call taking and interrogation techniques while simultaneously inputting information into one application, gathering information from other applications and systems, and using multiple computer screens.
- 1.1.4. When calls are delivered to the PST there is no indication as to the call type, or the complexity of the incident. The PST might process one life threatening call or transition from non-emergency to emergency, and vice versa. Citizen and responder safety require the transition to occur with ease.

1.2 Contributing Factors of a PST Stress

1.2.1. Lack of Recognition

The agency should identify ways to acknowledge and give recognition to PSTs, i.e., awards for life saves, managing a crisis effectively, service awards for attendance and tenure at agency. Recent studies (APCO Project Retain 2005 & 2018)³ show employee recognition functions as a buffer against PST stress and contributes to employee satisfaction. This same study indicates without

³ (APCO International, 2017)

197 recognition from management, immediate supervision, and the media, PSTs are more likely to
198 leave the job, thus negatively impacting center retention.

199 1.2.2. Inadequate/Expedited Initial Training

200 The agency shall provide adequate and expedited initial training to all new and tenured staff in
201 accordance with local and state requirements as well as industry standards. Research clearly
202 indicates PSTs who are well trained, well prepared, and well equipped for the position remain in
203 the industry. Currently, 27 states enforce mandated minimum training standards for PSTs.⁴ Other
204 states voluntarily observe minimum training standards or have no standard for PSTs. States can
205 vary on the training standards, from two weeks to several months before beginning to answer
206 emergency and/or non-emergency calls. Practical initial on-the-job training and regular
207 continuing education are necessary to establish a baseline level of knowledge to meet the daily
208 challenges of the job and the potential trauma caused by critical incidents.

209 1.2.3. Multiple Calls

210 PSTs are required to manage a constant onslaught of phone calls and radio traffic in addition to
211 other requests and duties i.e., teletype entries, verbal interaction, and general distractions in the
212 center, sometimes simultaneously. This call surge can be challenging thus adding to the tension
213 and stress of the PST.

214 1.2.4. Rapid Decision Making

215 The agency shall provide training for new and tenured staff in rapid decision-making skills. Rapid
216 decision making is required in almost all decisions made by the PST, sometimes with little to no
217 information available. Adding to their stress is not knowing if the decision made is the right one
218 or not.⁵

219 1.2.5. Hyper-vigilant World View

220 Because PSTs work in a hyper-vigilant environment, they must constantly and consistently work
221 non-emergency calls to emergency calls, often with little to no notice an emergency is coming in.
222 the uncertainty of what is coming in next, aggravates an already stressful environment. PSTs may
223 experience vicarious trauma, emotional labor, and compassion fatigue. A symptom of all these
224 things is hyper-vigilance, as well as the physical symptoms of hyper-vigilance including, but not
225 limited to, feeling on edge, inability to sit still and suddenly startled due to loud noise or other
226 unexpected sounds.⁶

227 1.2.6. Antiquated Systems/Rapidly Evolving Technologies

228 ECCs at times struggle with budget cycles, low or loss of funds when looking to update the CAD
229 systems, phone systems and other technology.

230

⁴ (Denise Amber Lee Foundation, n.d.)

⁵ (Meischke H, 2015)

⁶ (Marshall & Laorenza, 2018)

231 1.2.7. Low Control

232 The agency should engage the PSTs and other staff in making decisions regarding equipment
233 purchased, implementation of new policy and procedures. PSTs have truly little control over the
234 frequency and types of calls they field, potentially exposing them to trauma they were not
235 expecting nor prepared to manage. They have little input into their world, including developing
236 and using policy and procedures, choosing equipment, i.e., chairs, keyboards, lighting over
237 consoles etc., which can contribute to their stress level in a negative way.

238 1.2.8. Sedentary Nature of the Job

239 The agency should provide adequate break time during the assigned shift for all staff. PSTs are
240 often restricted to their console or the space near it. PSTs in many centers are not able to leave
241 their console during their shift for a variety of reasons, resulting in the PST being unable to step
242 away to decompress.

243 1.2.9 Difficult Interpersonal Communication

244 The agency shall provide crisis communication training to all telecommunicators. Calls coming
245 into the center with unfolding events with time constraints creates the need for concise and
246 direct communication with all involved stakeholders. In addition to the heightened emotions of
247 the callers increasing the stress of the PST, the intense nature of the circumstances the callers are
248 experiencing, their frustration is often directed at the PST, their first point of contact.

249 1.2.10 Lack of Professional Development ⁷

250 The agency should have in place a procedure for professional development of all staff. Agencies
251 may struggle to provide continuing education, supervisor, and leadership training due to
252 scheduling, funding, and lack of availability of such training. There can be limited opportunities to
253 seek formal education due to schedules. Without professional development one should not be
254 moved into new roles and may remain stagnate in their current role. Agencies should develop
255 employees making the decision to leave harder but also increasing their skill level and renewing
256 skills already learned.

257 1.2.11. Shift Work

258 The agency should outline steps to assist the staff in acclimating to shift work. In direct
259 opposition to the body's natural circadian rhythms, working nights and sleeping during the day
260 can result in sleep deprivation, lack of alertness, an inability to focus, weight gain and many other
261 maladies associated with the toll of shift work. ⁸

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⁷ (Burke T. W., 1995)

⁸ (UCLA Health, n.d.)

265 1.3 Stress and The Impact for the PST and the Emergency Communication Center

- 266 1.3.1. Individual wellness coupled with PST stress correlates with higher rates of depression, obesity,
267 and alcoholism, in addition to withdrawing from life outside work and the ECC.⁹
- 268 1.3.2. PST productivity can be linked to PSTs experiencing greater stress levels likely to process
269 workload less efficiently and effectively.
- 270 1.3.3. Citizen safety includes PSTs experiencing burnout and compassion fatigue and may experience
271 complacency or difficulty in remaining courteous when collaborating with citizens, resulting in
272 delays of service or disregarding citizen complaints.
- 273 1.3.4. Responder safety and an overly stressed PST who is distracted or stretched thin may miss a field
274 unit broadcast or dispatch units to the wrong location.
- 275 1.3.5. Customer service is difficult for a PST as they provide excellent customer service when they are
276 overburdened, stressed, angry and frustrated.¹⁰

277 1.4 Key Advantages of Early Detection

- 278 1.4.1. Early detection of stress may lead to increased PST retention rates. This may result in cost
279 savings for the agency related to hiring and training new employees, while maintaining the
280 institutional knowledge of experienced employees.
- 281 1.4.2. Early detection of PST stress can lead to better relations and improved service with the
282 community, field responders and other ECC employees.
- 283 1.4.3. Early detection of PST stress can increase individual awareness of the potential long-term effects
284 of PST stress. Enhancing one's personal awareness of the impact can lead a PST to take
285 proactive measures to mitigate the effects of the stress.
- 286 1.4.4. ECCs fostering an organizational culture that values employee wellness, decompression and
287 teamwork environment are more likely to have a stronger feeling of camaraderie, greater levels
288 of efficiency and high-performance metrics. This ultimately impacts agency reputation with field
289 responders, other ECCs and future recruiting efforts.

⁹ (Marshall & Laorenza, 2018)

¹⁰ (Figley, 1995)

Causes of Work-Related PST Stress

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Low salary/insufficient retirement benefits	Non-existent or shortened career path	Information overload
Workflow inconsistencies	Treatment received from co-workers during stressful events	Mental and physical exhaustion
Technology stress	Lack of time for exercise	High acuity-low frequency events
Traumatic and critical events/lack of closure on calls and no follow up	Staffing shortages/scheduling/shift work	Lack of appreciation and recognition
Inconsistent leadership styles	Poor organizational communication	Poor equipment and resources
Interaction with the media and public	Relationships with co-workers/responders/management	Quality assurance and performance evaluations
Line of duty death/injury	Caffeine consumption	Work environment i.e., noise, cleanliness, lighting, furniture
Call volume	Nature of the call or repeated types of calls i.e., suicide, family violence	Events involving family and friends

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Chapter Two

Public Safety Telecommunicator Stress

SCOPE

This chapter addresses the importance of recognizing and increasing awareness of PST stress as well as identifying the challenges associated with this profession

2.1 The Importance of Increasing Awareness of PST Stress

- 2.1.1. The agency shall prioritize individual and leadership awareness of the impact of stress on PSTs.
- 2.1.2. The agency shall incorporate detection of stress/mitigating factors into the initial training programing.
- 2.1.3. The agency shall identify cumulative stress indicators and should develop ways to minimize those indicators. Several recent studies have explored the mental and physical tool cumulative stress posed in a PST. Vicarious trauma, compassion fatigue and burnout resulting from exposure to others' suffering, manifesting as lower feelings of life satisfaction, depression, anxiety, weight gain or loss and other adverse health effects.
- 2.1.4. The agency should incorporate stress management into the initial and continued education training for all employees.

2.2 Identify the Challenges

- 2.2.1. Due to the nature of public safety dispatching, PSTs can be exposed to high acuity, traumatic events. While the PST is not physically on the scene of the incident, their involvement can still produce varying stress levels. The most recent update to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) now includes "experiencing repeated or extreme exposure to aversive details of the traumatic event(s)" ¹¹ as criteria for PTSD, indicating acknowledgment that indirect exposure to trauma still has the potential for impacts.
- 2.2.2. With little time to mentally prepare for a specific incident, PSTs rarely have the time to "get ready" for the next call. Also, PSTs are usually required to manage several different events simultaneously or, in the case of a 9-1-1 call taker, one call after another. In these ways PSTs can differ from their first responder counterparts on the scene. Police, fire, and medical personnel are usually dispatched out to an incident, giving them time to prepare for the incident. Due to the nature of being on scene physically, they are usually focused on one event at a time.

¹¹ (American Psychiatric Association, 2013)

- 343 2.2.3. The implementation of NG911 broadband technologies exposing the PSTs to images and videos
344 of traumatic events can increase stress levels in an ECC.¹²
- 345 2.2.4. The impact and consequences of ignoring stress in a PST can lead to numerous consequences
346 for the PST, agencies and the community served by this industry. There are numerous indicators
347 stress is having an impact on the PST. Several of these indicators include increasing difficult
348 processing information, inability to focus due to easily being distracted, misunderstanding
349 information and decrease in satisfaction in both work and life. Additionally, the following stress
350 signs and symptoms can lead to dire consequences.
- 351 2.2.4.1. Overall reduction in the operations of the ECC, leading to irritability. The added stress
352 from work can spill over into the family environment, adding to the stress and can be
353 enhanced due to lack of rest and other support. By not acknowledging and addressing
354 such indicators, the PST and their environment seems to be on a continuous wheel
355 spiraling the telecommunicator even further.
- 356 2.2.4.2. Because PSTs at times may struggle with focusing, concentrating, and become distracted
357 and inattentive, the need for beaks increases. If the need is not met, stress increases
358 and the PST becomes even more distracted.
- 359 2.2.4.3. Stress, especially if left unattended or not acknowledged, leads to health problems. It
360 can create malaise, which increases the changes of respiratory illnesses, such as
361 common cold, flue or other severe illnesses.
- 362 2.2.4.4. The job of a PST is sedentary. Poor posture while sitting or standing for long periods of
363 time or during high incident stress environments can lead to on-the-job injuries.
- 364 2.2.5. Definition of Public Safety Telecommunicator Stress
- 365 Working off the theory of “fight or flight response,” Hans Selye defined stress as the body’s
366 nonspecific response to any demand, whether caused by or resulting from pleasant or
367 unpleasant stimuli.¹³ The American Institute of Stress states most people consider the definition
368 of stress to be something that causes distress. However, stress is not always harmful since
369 increased stress results in increased productivity. A definition of stress should also embrace this
370 type of healthy stress, which may be ignored when you ask someone about their definition for
371 stress.
- 372 PST stress uniquely impacts 9-1-1 professionals. Caused by the many demands of the job PST
373 stress can be both good and bad. By mitigating the harmful effects of bad stress and utilizing the
374 positive effects of good stress, PSTs can overcome these challenges and prolong their careers.
- 375
- 376

¹² (Lilly, et al., 2019)

¹³ (Tan, 2018)

377 **2.3 Discussion of Public Safety Telecommunicator Stress**

378 2.3.1. APCO's Project 43 addresses PST stress stating the following:

379 2.3.1.1 The agency shall train personnel to use active coping as a stress management tool.¹⁴

380 2.3.1.2 The agency should conduct team-oriented stress management training.¹⁵

381 2.3.1.3. The agency shall train personnel to provide peer support, or at a minimum, to identify
382 stress and provide or assist with necessary peer counseling.¹⁶

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¹⁴ (APCO International, 2017)

¹⁵ (APCO International, 2017)

¹⁶ (APCO International, 2017)

Chapter Three

Early Warning Symptoms of Public Safety Telecommunicator Stress

SCOPE

This chapter outlines the various symptoms i.e., emotional, physical, cognitive, and behavioral PST stress.

3.1 Emotional

Irritability	Depression	Anxiety	Anger
Fear	Worry	Guilt	Mood Swings
Apathy	Cynicism	Detachment	Feeling Overwhelmed

3.2 Physical

Headaches	Fatigue/Tiredness	Frequent Illness	Muscle Pain
Change in Appetite	Change in Sleeping	Nervous/Fidgeting	Frequent Sweating
Gastrointestinal Discomfort	Chest Pain/Discomfort	Rapid Heart Rate	Heartburn
Dizziness/Lightheaded	Rash/Hives	Tunnel Vision	Muffled Hearing

402 3.3 Cognitive

403 Related to the ability to perceive and react, process, and understand, store and retrieve information,
404 make decisions, and produce appropriate responses.

405

Frequent Forgetfulness	Difficult Concentrating	Racing Thoughts	Disorganization
Confusion	Paranoia	Boredom	Increased Frustration
Loss of Motivation	Self-doubt	Disturbing Dreams/Nightmares	Insomnia
Self-isolation	Existential Despair	Intolerance	Loneliness

406

407 3.4 Behavioral

408 Related to persistent or repetitive behaviors that are unusual, disruptive inappropriate or cause
409 problems.

Frequent signing	Defensiveness	Increased Hostility	Nervous Habits
Obsessive/Compulsive	Rapid Speech	Stuttering	Inductiveness
Grinding Teeth	Social Isolation	Substance Abuse	Procrastination
Withdrawing from Responsibilities	Reduced Work Efficacy	Risky Behavior	Hyperactivity

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Strategies and Resources after Detection of Early Warning Symptoms of Stress

Scope

This chapter identifies the strategies and resources to combat stress at the individual and agency levels.

4.1 Carrying out Strategies and Resources

4.1.1 Individual Strategies

4.1.1.1. The agency shall provide strategies and resources to assist the PST in detecting the early warning symptoms and signs of stress. PSTs should remain vigilant and take time for self-reflection. Self-awareness can help the PST learn about themselves and where their needs for self-care lie. If the PST can understand the underlying cause of stress, they can act without realizing how it is impacting their overall well-being. By understanding how to recognize this stress and learning to cope with it, the PST will experience an overall sense of well-being on the job and in their personal life.

4.1.1.2. The agency shall assist the PST in making note of early warning symptoms they are experiencing. If necessary or desired the agency shall require the PST speak with a co-worker, supervisor or professional if experiencing PSTD.

4.1.1.2.1. Be honest with yourself and your feelings.

4.1.1.2.2. Keep track of your feelings in a journal or personal blog.

4.1.1.2.3. Peer Assessment

4.1.1.2.4. Reach out using your Employee Assistance Program (EAP)

4.1.1.2.5. Utilize peer support and wellness support

4.1.1.2.6. Participate in Critical Incident Stress Management and debriefings

4.1.1.2.7. See agency provided policies/procedures or Human Resources departments for agency specific EAP programs.

4.2 Agency Strategies

4.2.1 The agency shall provide comprehensive training on stress reduction and mental health during the initial basic training, during and after a critical incident, promotional events and during annual evaluations.

- 441 4.2.2. The agency shall establish mental health resources including training Peer Support Groups,
442 Chaplain services, and CISM/CISD.
- 443 4.2.3. The agency shall train ECC staff to serve in the roles outlined in the department guidelines and
444 standard operating procedures.
- 445 4.2.4. The agency should establish regular methods for soliciting feedback from staff members. This
446 could include team meetings, team building exercises and other opportunities to establish
447 positive workplace culture.
- 448 4.2.5. The agency should use any interactions with staff (quarterly performance reviews, quality
449 assurance checks, ongoing one-on-one conversations) to monitor staff members for early
450 warning symptoms of stress.
- 451 4.2.6. The agency shall establish clear guidelines and procedures for communicating or reporting
452 mental health concerns within the agency.
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ACRONYMS AND ABBREVIATIONS

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474 **ANS** American National Standards

475 **ANSI** American National Standards Institute

476 **APCO** Association of Public Safety Communications Officials

477 **ASD** Acute Stress Disorder

478 **CAD** Computer Aided Dispatch

479 **CIS** Critical Incident Stress

480 **DSM-5™** Diagnostic and Statistical Manual of Mental Disorders, 5th Edition

481 **EAP** Employee Assistance Program

482 **ECC** Emergency Communications Center (formerly PSAP)

483 **NG911** Next Generation 9-1-1

484 **NIOSH** National Institute for Occupational Safety and Health

485 **PSAP** Public Safety Answering Point (currently ECC)

486 **PST** Public Safety Telecommunicator

487 **SDC** Standards Development Committee

488 **SOP** Standard Operating Procedures

489 **STS** Secondary Traumatic Stress

490 **STSD** Secondary Traumatic Stress Disorder

491

GLOSSARY

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494 **ACUTE STRESS DISORDER (ASD):** Occurs when an individual has experienced psychological distress following
 495 exposure to a traumatic or stressful event and exhibits re-experiencing, avoidance, increased arousal, and at least
 496 three out of five dissociative symptoms. ASD is distinguished from PTSD because the symptom pattern is restricted
 497 to a duration of two day to one month following exposure to the traumatic event. ¹⁷

498 **ACUTE TRAUMATIC STRESS:** Exposure to actual or threatened death, serious injury, or other significantly
 499 traumatic or stressful event(s). Exposure may occur in one or more ways i.e., witnessing, in person, the event(s),
 500 learning the incident(s) occurred to a friend or family member, repeated or extreme exposure to aversive details
 501 of the event(s). ¹⁸

502 **BURNOUT:** Occurs as a result of constant or repeated emotional stress associated with an intense involvement
 503 with people over long periods of time. ¹⁹ Burnout is often attributed to frustration, powerlessness, and an inability
 504 to achieve work goals. Signs of burnout include deteriorating job performance, low job satisfaction, increased
 505 cynicism regarding the organization and a perceived lack of support from supervisors and managers within the
 506 organization. ²⁰

507 **CHRONIC STRESS:** When your stressful feelings from work and home combine to hit you at all sides. As the most
 508 dangerous form of stress, chronic stress leads to a slow breakdown of all the body's systems.

509 **COMPASSION FATIGUE:** The emotional residue or strain of exposure to working with those suffering from the
 510 consequences of traumatic events. Compassion fatigue can occur due to a single exposure or can be due to
 511 cumulative level of trauma. It does involve both Secondary Traumatic Stress Disorder (STSD) and a condition
 512 commonly referred to as Burnout. This term is often uses as a synonym for Secondary Traumatic Stress (STS).²¹

513 **CRITICAL INCIDENT STRESS (CIS):** Causing vicarious trauma or STS, this occurs when faced with an incident that
 514 overwhelms your ability to cope with what has happened, i.e., high priority calls, officer emergencies and other
 515 traumatic situations.

516 **DELAYED STRESS:** This is the stress you try to stuff away and deal with later. Maybe someone says something that
 517 triggers you, but the effect is not felt until later when you are sitting at home trying to relax after a long day.
 518 Muscle tension is often caused by delayed stress.

519 **OCCUPATIONAL STRESS:** Stress caused by the job itself. The challenge of difficult calls, the sudden officer
 520 emergency, the long hours, etc.,

521 **POST TRAUMATIC STRESS DISORDER (PTSD):** Occurs when an individual has experienced psychological distress
 522 following exposure to a traumatic or stressful event and exhibits re-experiencing, avoidance, increased arousal

¹⁷ (National Child Traumatic Stress Network, Secondary Traumatic Stress Committee, 2011)

¹⁸ See cite 10 above.

¹⁹ (Rigden, 2017)

²⁰ See cite 12 above.

²¹ (Burke T. W., 1995)

523 and at least three out of five dissociative symptoms. PTSD is diagnosed after an individual has exhibited persistent
524 symptoms for greater than one month.²²

525 **SECONDARY TRAUMATIC STRESS DISORDER (STSD):** A subcomponent of compassion fatigue this occurs when an
526 individual has experiences psychological distress following exposure to details of a traumatic or stressful event
527 experienced by another person. STSD occurred when the individual’s stress results in symptoms associated with
528 PTSD. Symptoms of STSD are nearly identical to PTSD. The difference being the traumatic event was experienced
529 by another person.²³

530 **SHALL:** Within the context of this standard, “shall” indicates a mandatory requirement.

531 **SHOULD:** Within the context of this standard, “should” indicates a recommendation.

532 **SUBTHRESHOLD PTSD:** Occurs when an individual has experienced psychological distress following exposure to a
533 traumatic or stressful event and exhibits two or more symptoms meeting the diagnostic criteria of PTSD but does
534 not meet the full criteria for PTSD. According to the DSM-5TM, subthreshold presentation of PTSD is more common
535 than full PTSD especially later in life.²⁴

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²² See cite 10 above.

²³ (Goold, 2009)

²⁴ (Hendrika Meischke, 2015)

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