



What is a Critical Incident?

A critical incident is *any* event that has sufficient power to overwhelm a person's usually very effective abilities to cope. It could also be understood as any situation faced by emergency services personnel that causes them to experience unusually strong psycho-emotional reactions which have the potential to interfere with their ability to effectively function either at the scene or later. The stress triggered by such an incident is called critical incident stress (CIS).

Illustrations of calls which may produce sufficient stress to require debriefing:

Calls 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 / prolonged extrication
- Hostage situation direct involvement (with or without injuries)

Calls that may warrant debriefing:

- Significant events involving children
- Prolonged incident (especially if loss of life is involved)
- Event that attracts high media attention
- Event that is highly emotionally charged
- Death or serious injury to victims known to personnel
- Some police shootings

Key indications that a debriefing is necessary:

Changes in Behavior

- Sleep disturbances (nightmares, inability to sleep, need for excessive sleep)
- Avoidance behaviors
- Death preoccupation
- Confusion
- Acting out (socially unacceptable levels)
- Suicidal thoughts
- Excessive fear, anxiety or startle response

Regression

- One begins to see experienced personnel act like rookies

Continuation of symptoms

Intensification of symptoms

- A perception that things may seem to be getting worse
- What happened at work (duty shift, the hospital, etc) has crept into your home life

Group symptoms

- Mistakes or poor judgment exercised on calls following incident
- Group unusually preoccupied with incident or sequence of events
- Gross humor (worse than normal for an engine company / station house)
- Company that usually gets along well together *suddenly* does not
- Other notable changes in group performance, attitudes and / or behaviors
- Sustained *perception* of inability to carry out or accomplish assigned duties

Statistical Overview / Review

The International Critical Incident Stress Foundation reports that following a serious incident without CISM intervention:

- 3% of rescue personnel will have no appreciable symptoms
- 86% will have some symptoms within 24 hours of an incident
- 42% will still have some symptoms continuing 3-4 weeks post incident
- 22% will still have some symptoms lingering 6-7 weeks post incident

Personnel having symptoms after 3 weeks *should seriously consider* enlisting the professional help of a clinician/therapist who has demonstrated an ongoing sensitivity for working with these issues. Individuals continuing to have symptoms after 6 to 7 weeks *definitely need* supportive help.

Purpose of CISM (Critical Incident Stress Management):

To mitigate the impact of a horrible event

To accelerate normal recovery of normal people reacting to abnormal events

Who is the Team?

The Northern Illinois Critical Incident Stress Management Team is a select group of peer firefighters, paramedics, emergency room / flight nurses, EMS members, police officers, dispatchers, psychologists, social workers, counselors and chaplains who have received specialized training in a large variety of CISM procedures. We offer our services on a strictly voluntary basis to all fire departments, state and local police departments, hospital emergency room personnel, I-DOT, coast guard rescue and other emergency services personnel. A debriefing is led by a mental health professional, supplemented and strengthened by peers (firefighters, nurses, police). Our team has been utilized very aggressively since the late 80's and since 1996 has been called upon by fire/police departments and other emergency services on an average of once every 4.5 days! The Northern Illinois CISM Team continues to be one of the busiest teams in the United States.

Our team continues to be *dedicated to front line service personnel and their respective families* as they continue to serve the communities we all live in. The team covers a large 9-county region in Northern Illinois. Historically, members have been requested to provide services on a national level for commercial aviation crashes, the Oklahoma bombing, NYC twin towers/ground zero and larger hurricanes (Katrina). The team does not offer services to the general public.

Many team members continue to maintain direct relationship and membership with the International Critical Incident Stress Foundation (ICISF). This affiliation connects us to yet another organization that serves in a world wide leadership role by developing and disseminating crisis intervention, stress education and recovery programs to all affected by work related to stress, disaster and other traumatic events.

What we offer to you as we interact:

More immediate settings

The NICISM Team provides a simple yet effective method to help those emergency workers trying to cope with stressful experiences. The CISM process has long since proven that it promotes the continuation of productive careers while building healthy stress management behaviors. Team interventions remain focused on the psycho-education of the individual and group. Psychotherapy is therefore never a part of the process.

Focused on-going work of our team

The team is continuously active and provides Pre-Incident education, On-Scene Support, Debriefings, Defusings and One-On-One Support. The team also provides Family & Spousal Support as well as providing other resources through a variety of referral networks.

Where are we located?

We'll come to you! Together, we'll find a quiet, confidential and safe place for a meeting.