

# WYO CISM NET



AUGUST, 2010

## *A Newsletter For Critical Incident Responders In Wyoming*

WYO CISM NET and Rocky Mountain Region Disaster Mental Health Institute, Box 786, Laramie, WY 82073-0786 <http://www.rmrinstitute.org> [rockymountain@mail2emergency.com](mailto:rockymountain@mail2emergency.com) 307-399-4818

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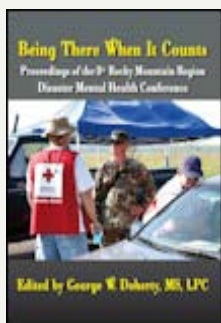
• **RETURN TO EQUILIBRIUM: Disaster Mental Health**  
[http://www.psychceu.com/Doherty/Equilibrium\\_index.asp](http://www.psychceu.com/Doherty/Equilibrium_index.asp) - 4 CEU

• **RETURN TO EQUILIBRIUM: Returning Military And Families**  
[http://www.psychceu.com/Doherty/Equilibrium\\_index.asp](http://www.psychceu.com/Doherty/Equilibrium_index.asp) - 8 CEU

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**8TH Rocky Mountain Disaster Mental Health Conference Proceedings: November, 2009 – Cheyenne, Wyoming**  
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## RESILIENCE AND VULNERABILITY IN CRITICAL SITUATIONS

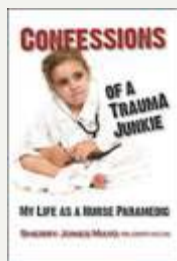
Resilience can be defined as the capacity of a group or organization to withstand loss or damage or to recover from the impact of an emergency or disaster. Vulnerability is a broad measure of the susceptibility to suffer loss or damage. The higher the resilience, the less likely damage may be, and the faster and more effective recovery is likely to be. Conversely, the higher vulnerability is, the more exposed to loss and damage is the household, community or organization. A resilience and vulnerability profile is an integral element of effective planning in the management of consequences to a community in an emergency or disaster. With such a profile, it is possible to:

- identify the strengths of particular areas, communities or groups in terms of such things as resources, skills, networks and community agencies. These strengths and local capabilities may be used, and be further developed, to minimize the negative consequences of an emergency or disaster through being used to support prevention activities or by supporting recovery activities.
- identify vulnerabilities of particular areas, communities or groups so that these can be managed in terms of prevention and preparedness activities, response activities and recovery programs. By identifying the risks and vulnerabilities prior to events, it will give local managers the opportunity to plan to avoid or to minimize the negative consequences of emergencies and disasters.

Resilience and vulnerability assessment is but one aspect of community profiling and local emergency management planning. In general, the following suggested guidelines could be useful for local community or governmental agencies:

1. ensure that in an emergency management context that they can identify individuals, families and groups who may be at greatest risk or most threatened by hazards.
2. ensure that needs which may arise after emergencies can be planned for, either in terms of prevention, in terms of priority attention in life threatening situations or in terms of assistance to support recovery from an emergency or disaster.
3. identify local and community strengths - these may include resources, skills, information and networks which can be used to develop and sustain resilience.
4. ensure that in the context of wide area and other types of emergencies and disasters, local government and agencies can work to ensure that communities and individuals have access to information which will assist their levels of resilience should the physical, social and commercial infrastructure and arrangements be temporarily disrupted.

## Take a Ride in the back of the ambulance...



### Confession's Website

[http://sherryjonesmayo.com/Confessions\\_of\\_a\\_Trauma\\_Junkie/Confessions.html](http://sherryjonesmayo.com/Confessions_of_a_Trauma_Junkie/Confessions.html)

Share the innermost feelings of emergency services workers as they encounter trauma, tragedy, redemption, and even a little humor. Sherry Jones Mayo has been an Emergency Medical Technician, Emergency Room Nurse, and an on-scene critical incident debriefer for Hurricane Katrina.

Most people who have observed or experienced physical, mental or emotional crisis have single perspectives. This book allows readers to stand on both sides of the gurney; it details a progression from innocence to enlightened caregiver to burnout, glimpsing into each stage personally and professionally. Sherry was a Keynote Speaker at the 6<sup>th</sup> Rocky Mountain Region Disaster Mental Health Institute Conference in Cheyenne November 6-8, 2007.

[http://sherryjonesmayo.com/Confessions\\_of\\_a\\_Trauma\\_Junkie/Endorsements.html](http://sherryjonesmayo.com/Confessions_of_a_Trauma_Junkie/Endorsements.html)

### GIVE AN HOUR

<http://www.giveanhour.org/skins/gah/home.aspx>

is asking mental health professionals nationwide to literally give an hour of their time Give an Hour each week to provide free mental health services to military personnel and their families. Target population is the U.S. troops and families who are being affected by the current military conflicts in Afghanistan and Iraq.

### Links to Red Cross for Haiti Assistance:

<http://www.wyomingredcross.org/>

<http://www.redcross.org/>

<http://www.redcross.org/en/givehere/>

5. support municipal emergency management processes and provide support and advice for municipalities in emergency management planning.

Resilience and vulnerability assessment is a process that is a necessary component of effective emergency management planning. However, it is unlikely that any assessment, or community audit, will capture every potential need or identify every person who, in some circumstance, may be exposed to a risk or to the possibility of some loss. This suggests that following an emergency or disaster it will be necessary to scan the affected area, through information campaigns, outreach programs, letter box drops, and other methods, to identify people who require assistance. Any resilience and vulnerability analysis needs to be conducted with sensitivity and proper regard for people's privacy. This includes their right not to provide information. Additionally, due regard must be paid to the legal and other requirements of maintaining appropriate standards of confidentiality when dealing with information from the public. This information can be used as guidelines to assist planning by community members, emergency managers, etc. engaged in emergency prevention or response or recovery activities. It can be used by emergency managers from any level of community or organizational level as well. Conducting a resilience and vulnerability analysis is not an end in itself. The purpose behind such activity is to highlight issues, needs and concerns and to work to effect a change - to improve resilience and/or to reduce vulnerability.

### Issues

In terms of individual, group and community issues which support resilience and reduce vulnerability, there are some relevant broad principles to consider:

- We are aware from the experience of many events that the affected community(s) will expect to contribute to their own recovery. If denied an opportunity, they may establish their own structures and processes to achieve that end. It is paramount, therefore, to support community involvement. Successful management of the consequences is not possible without community commitment and involvement.
- It is useful to set out community issues in these terms because it places them in a management and operational framework. Issues of resilience, vulnerability and need are expressed in terms in which they can be operationalized and dealt with in a practical way.
- These issues are a broad characterization of the types of assistance and support that individuals and groups may require after a significant emergency or disaster. They are a way of thinking about service provision in management and operational terms rather than simply in terms of the particular assistance measure.

### Information

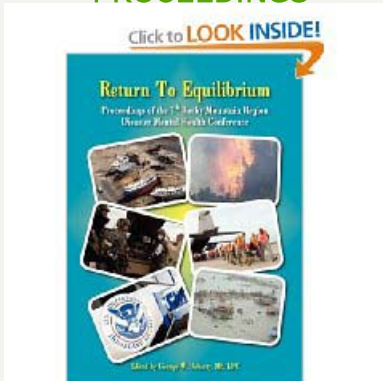
- Information and advice about assistance measures and how to access them, including eligibility conditions and application procedures.
- The normal biopsychosocial reactions which can be expected and how they can deal and cope with these reactions in themselves, members of their family and their community.
- How to make sense of the event in terms of its cause and fitting it into their "view" of the world.

### Resources

- Financial assistance where eligible to help restore losses. This may include, where appropriate, grants, loans, and insurance.
- Physical goods such as temporary accommodation, essential household items, temporary public transport, tools, etc.

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### Institute BOOKS AND PUBLISHED CONFERENCE PROCEEDINGS



#### RETURN TO EQUILIBRIUM: Disaster Mental Health and Returning Military and Families

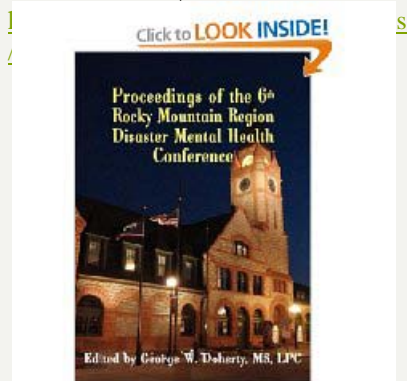
- Proceedings of the 7th Rocky Mountain Disaster Mental Health Conference – Laramie, WY

<http://www.rmrinstitute.org/ROCKY MOUNTAIN REGION-books.pdf>

#### ORDER AND PURCHASE BOOKS online

<http://www.rmrinstitute.org/books.htm>

**Taking Charge In Troubled Times** Proceedings of the 5th Rocky Mountain Region Disaster Mental Health Conference Casper, WY November 8-11, 2006



#### From Crisis to Recovery: Resilience and Strategic Planning For the Future -

Proceedings of the 6th Rocky Mountain Region Disaster Mental Health Conference - Cheyenne, WY November 8-10, 2007

<http://www.amazon.com/Proceeings-Mountain-Region-Disaster-Conference/dp/1932690565/>

### Management Capacity

- Time and opportunity e.g. to undertake recovery activities.
- Physical capacity e.g. which may include the support of other people, machinery, or other support where there is a particular need.
- Access to services e.g. through establishing support systems, locating service centers close to affected areas or access in terms of translator, interpreter, or other language and media services.
- Expertise e.g. access to specialist services such as tradesmen, financial counselors, and other professional services.

### Support

- Personal support e.g. outreach services, personal advisors and counselors, specialist support services, advocates and gatekeepers.
- Community support e.g. community development officers, etc.

### Involvement

- Consultation in developing and implementing assistance and recovery programs.
- Encouragement in making a contribution to policy and program development.
- Engagement in monitoring and auditing the progress of recovery.

### Vulnerable Groups

Below is a list of groups of people who may have special needs following an event. It is not an exhaustive list. However, these are groups traditionally accepted as being vulnerable. It is important to understand that the aged, for example, are not vulnerable because they are aged. They may be vulnerable because they may have reduced mobility or be frail - impediments that some young people share. These vulnerabilities may be countered in part by strengths and other capabilities. For example, the aged may have greater life experience to draw from, they may have a wide network of family and friends, or they may have a personal strength drawn from many years of battling through life. These groups are generalizations. They are broad groupings of possible needs. More importantly, however, they are an indication that there may be a potential need or vulnerability which needs to be addressed in emergency management planning.

The listing below is directed at individuals or small groups. There may be larger socioeconomic categories or groups whose potential or actual strengths and weaknesses should be assessed. Farmers and ranchers, small businesses, local groups or associations may all have special and significant needs that separate them in some clear way from other members of their community. Communities and agencies may be vulnerable to loss and damage from emergencies or disasters. A similar process of assessing elements of vulnerability and resilience and evaluating capability can be undertaken for communities and agencies as is undertaken for assessing the vulnerability and resilience of individuals, families, households, and groups.

It is important to emphasize in the vulnerability assessment that vulnerabilities and needs may change over time. Needs may be significantly less in terms of numbers of people and the urgency of the need after a few hours than after days or weeks. For example, the loss of a water supply may be trivial for an hour or two, but for much longer than that it has the potential to affect the whole population in a critical way. Time of year may also be an important factor in assessing vulnerability and, hence, potential. Loss of heating in summer is less significant than it is in winter. Likewise, loss of refrigeration in winter may be less critical than in summer.

## Busy Wildfire Season Predicted for Wyoming

National fire officials say northwest Wyoming could see more wildfires this summer after a season of light snowfall. The National Interagency Fire Center said the light winter in the region means drier fuels in the summer that could increase wildfire potential. The center said fire danger last year was minimized throughout most of the country by heavier moisture [http://www.nifc.gov/fire\\_info/nfn.htm](http://www.nifc.gov/fire_info/nfn.htm)

Wearing a protective mask a man looks on while walking on Moscow's Red Square, Monday, Aug. 9, 2010. Deaths in Moscow have doubled to an average of 700 people a day as the Russian capital is engulfed by smog.



Prime Minister Vladimir Putin climbed into a firefighting plane Tuesday and dumped water on two of the hundreds of wildfires sweeping through western Russia and cloaking Moscow in a suffocating smog. Putin has been a very visible leader in the battle against the fires, which have caused billions of dollars in damage and help left thousands homeless in the past two weeks. He has demanded that soldiers overstretched firefighting brigades and has walked through smoldering villages, residents and consoling promising them new homes by fall.



## VULNERABLE GROUPS

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1. Aged (particularly the frail) - In terms of mobility and physical capacity.
  2. Very young - In terms of managing their own lives and recovery and in terms of understanding the event.
  3. Disabled (mental and physical) - In terms of managing their own recovery and in getting access to information and resources.
  4. Poor people with limited resources to meet essential needs - In terms of having the financial and physical resources to achieve recovery or to protect themselves against loss through, for example, insurance.
  5. Non-English Speakers - In terms of understanding the potential risks and in gaining access to information.
  6. Socially isolated - In terms of having family or friends that can provide personal and physical support.
  7. Physically isolated - In terms of having easy, cheap and fast access to resources or in terms of being able to call upon resistance from other members of the community or from agencies.
  8. Seriously ill - In terms of already being in need and having a very low capacity to carry out protective or recovery activity.
  9. People dependent on technology based life support systems. - In terms of being dependent on systems over which they have no control.
  10. Large families - In terms of complex family needs and dynamics and increased costs for prevention and recovery.
  11. Single parent families - In terms of having to manage a range of demands with limited support.
  12. Workers at risk from machinery/equipment failure - In terms of potential severity of injury.
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13. People with limited coping capacity. - In terms of low or reduced capacity to manage life events.
  14. People with inadequate accommodation - In terms of being already in difficult circumstances and with existing high levels of need and support.
  15. Those on holiday and traveling (particularly campers and motor home travelers). - In terms of being absent from their own communities and resources.
  16. Tourists from overseas - In terms of being in an unfamiliar environment with little knowledge of how to access resources and support.
  17. People with marginal coping capacity - People with limited personal capacity to deal with stress and disruption, with limited economic resources or who have previously experienced significant stress, trauma, or loss in their lives may be tipped over the margins of successful life management or day to day coping by loss, damage or threat to life, safety, property or income caused by an emergency or disaster.
  18. People affected by an emergency - In terms of needs (medical, psychological, material, etc.) generated by the event.

Once the vulnerability assessment has been undertaken, the results will identify special needs which can be directly addressed as part of the local emergency management process. The results of the assessment should directly inform the process of planning, prevention and preparedness and may be made available to individuals, groups, communities and agencies to assist them with their local activity.

## The Chaplain's Corner July 2010

### "What to do?!"

At present, I have a total of 34 volunteer chaplains and abiders working out of the pastoral care department at this hospital. We often find ourselves stepping into situations of crisis of varying degrees. It may entail offering a word of encouragement to a patient facing a surgery with an uncertain outcome, or sitting with a distraught family member just informed of their loved one's untimely death. Occasionally, at our quarterly trainings, during an on-call pager exchange brief/debrief on a Monday morning, or during a casual office visit, a chaplain will ask the question, "What do you say when....?" Or, "How do you handle....?" Obviously, potential answers to those questions are legion.

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Coming into crisis intervention from a background of pastoral ministry for a number of years, I've faced a lot of people and families facing some sort of crisis. I've always tried to couch my terms and expressions from a Biblical perspective but all too often have found myself trying "to fix" the problem. I would leave the encounter feeling I had directed the person or persons down an appropriate path of recovery when in reality they were left sitting there with the same feelings of confusion and discouragement as before I "helped" them. Eventually, I came to realize I had failed miserably in assisting them to deal with the crisis in a rational way so they could get a grip on unbridled emotions and hopefully continue on the way to a normal recovery, all with the Lord's help, of course.

Since then, I stepped into the arena of critical incident stress management and found a wonderful way of blending traditional intervention techniques with faith principles. The training received over the years has, in fact, honed and polished my approach to assisting our patients, family members and staff. I believe this was truly a God-send and I find it so much easier to enter into a crisis situation because now I have a structured approach that is time-proven, familiar and non-invasive.

The method I find myself using the most is the SAFER-R model of one-to-one intervention. It lends itself readily to varying circumstances and divergent levels of crisis. I use it repetitively in dealing with a distraught patient, a grieving staff member, sometimes in a group setting like cardiac rehab out-patients, on an elevator encouraging a nurse with only about 45 seconds of contact, in an emergency room gathering of family members, ad infinitum.

In the next edition, I will expand on my perspective in utilizing this invaluable tool.

Chaplain Bob W. Rudichar



## TEAM UPDATES

**Sweetwater Assist  
CISM team Meeting Minutes  
Tues July 20<sup>th</sup> 2010 5:30-7:30p  
@ The golf course picnic area**

### Attending:

You know who came – and who didn't

### Topics:

This months' meeting was our annual "TEAM BUILDER" picnic.

We had approx 12 people show up this year, and as always we had a good time, good food, and good networking.

The weather cooperated this year, and was perfect !!

We discussed the recent classes we sponsored at the Fire Dist 1 Headquarters, It was good to have George here again, and a pleasure to have Bob Rudichar down from Gillette to teach this year. We also talked about some events of the past years, as well as some current events.

"THANK YOU" to all that came and participated !!!

This month Randy has updated the new G-mail account. If you remember our old yahoo account got "hacked". The new account has George's audio interviews in it, a couple power points, a couple articles, forms and registrations. If you get a chance "check it out"!! The account is: [swcism@gmail.com](mailto:swcism@gmail.com) and the password is "rockspring307". If you have any questions or problems let me know as this is where we will be trying to maintain an information access to the team members.

**\*\*\*\* Next Meeting \*\*\*\*  
Tues Aug. 16<sup>th</sup> 2010  
5:30p-7:00p  
@ The RS Police Dept Training Room**

Hopefully summer is winding down and we can have a good turnout and meeting/training