

# WYO CISM NET



March 2009

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

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### UPCOMING TRAININGS:

#### CISM Workshops and Others

June 15-19, 2009  
Rock Springs, WY

<http://www.rmrinstitute.org/rscism-registration.pdf>

### SELECTING AND TRAINING DISASTER MENTAL HEALTH STAFF

Skills and competencies that are required of disaster mental health workers are enough different from the typical inpatient/outpatient clinical practice to require more specialized selection and training. When a disaster strikes a community, having a cadre of specially trained mental health professionals who can be quickly mobilized, oriented, and deployed is critical. If the impacted area does not have this capacity, mutual aid agreements with those communities that have trained and experienced disaster mental health workers will be helpful in the chaotic times immediately following impact.



Photo by Carl Hayden, Salt Lake Tribune  
Courtesy of Utah State Historical Society

Evacuating the area after an earthquake may not be easy! Asplay of the Red Canyon fault scarp lifted a 10-foot wall across the road. 1959 Yellowstone Earthquake.

In the immediate response phase of disaster, an "action orientation" is important. Workers who do well with the pace of crisis intervention do well in this phase. Personnel who have worked in emergency services in a local mental health center or a hospital emergency room are frequently well-suited to this phase of disaster work.

Some people cannot and do not function well when exposed to the sights and sounds of physical trauma. These staff should obviously not be asked to provide mental health services at the scene of injuries or in first aid stations, hospital emergency rooms, or morgues. This does not mean that they cannot be on the disaster response team. There are many other roles that they can play. Involved personnel should openly discuss such issues during initial formation of the team so that individuals best suited to these roles can be pre-designated.

Long-term mental health recovery programs, covering the period from about one month to one year post-disaster, are different in nature and pace from the immediate response phase. Mass care shelters and disaster application centers (DACs) are closed or closing. Locating disaster survivors is more difficult. Mental health workers need to be adept and creative with outreach in the community.

Results of outreach and education efforts are often difficult to measure. Survivors do not traditionally seek out mental health service. There are few "clients" to treat and count. Clinically oriented staff who are accustomed to an office-based practice often question their usefulness and effectiveness. "Action-oriented" staff who thrived in the immediate response phase may not enjoy or function well in the longer-term recovery phase where patience, perseverance, and an ability to function without seeing immediate results are assets.

#### 8th Rocky Mountain Disaster Mental Health Conference

##### Plains Hotel

Cheyenne, WY

November 5-7, 2009

Check this site for Call For Papers

[http://www.rmrinstitute.org/Call\\_For\\_Papers-2009.pdf](http://www.rmrinstitute.org/Call_For_Papers-2009.pdf)

**ROLES AND RESPONSIBILITIES OF DISASTER MENTAL HEALTH WORKERS**

Disaster mental health roles and responsibilities are diverse. Thoughtful matching of worker skills and personalities to the specific assignment can help ensure success of mental health efforts.

1. *Outreach:* Working in neighborhoods, mass care shelters, disaster application centers, or other community settings requires workers who are adept at such non-traditional mental health approaches as "aggressive hanging out" and "over a cup of coffee" assessments and interventions.
2. *Public education:* Public education efforts require staff who are interested and effective in public speaking and working with the media. Development of fliers and brochures requires good writing skills.
3. *Community liaison:* Establishing and maintaining liaison with community leaders requires someone who understands and is effective in dealing with organizational dynamics and the political process. Working successfully in the "grass roots" community requires someone who understands the local culture, social network, formal and informal leadership, and is effective in establishing relationships at the neighborhood level. Liaison activities might include everything from attending grange or church gatherings, participating in neighborhood meetings, or providing disaster mental health consultation to government officials.
4. *Crisis counseling:* For most disaster survivors, prolonged psychotherapy is not necessary or appropriate. Crisis intervention, brief treatment, support groups, and practical assistance are most effective. Mental health staff must have knowledge and skills in these modalities.

**DISASTER MENTAL HEALTH WORKER QUALIFICATIONS**

Disaster mental health teams should be multi-disciplinary and multi-skilled. Staff should be experienced in triage, first aid, crisis intervention, and brief treatment. They should have knowledge of crisis, post-traumatic stress and grief reactions, and disaster psychology. Survivors are often reluctant to come to mental health centers for services. Therefore, staff must be able to provide services in non-traditional, community-based settings. Prior disaster mental health training and experience are highly recommended. In situations of mutual aid where licensed professionals cross state lines to provide assistance in disaster, licensing in the impacted state may be waived under the Good Samaritan law. This issue should be investigated in instances of cross-state mutual aid.

Staff should be well-acquainted with the functions and dynamics of the community's human service organizations and agencies (Farberow and Frederick, 1978). They should have experience in consultation and community education. Excellent communication, problem-solving, conflict resolution, and group process skills are needed, in addition to an ability to establish rapport quickly with people from diverse backgrounds.

Managers should pay careful attention to the state's scope of practice laws for various mental health professional disciplines. Individuals providing formal assessment and counseling which fall into the definition of psychotherapy should be appropriately licensed and insured for professional liability.

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U.S. Forest Service smoke jumpers were first into the area between Hebgen Dam and the landslide to check on campers, administer first aid, and relay rescue needs to the outside world. 1959 Yellowstone Earthquake.



**ONLINE COURSES AVAILABLE FOR CONTINUING EDUCATION CREDIT:**

The following courses are available online:

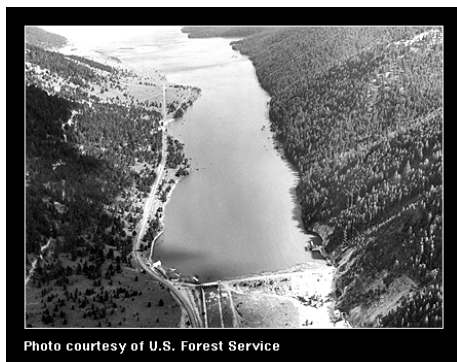
- *Crisis Intervention Training for Disaster Workers* You can preview the course and access where to sign up by going to: [http://www.psychceu.com/CISM/cism\\_index.asp](http://www.psychceu.com/CISM/cism_index.asp)  
12 CE Hours

- *From Crisis to Recovery: Strategic Planning for Response, Resilience and Recovery*  
[http://www.psychceu.com/Doherty/crisis\\_index.asp](http://www.psychceu.com/Doherty/crisis_index.asp) 12 CE

**Give An Hour**

<http://www.giveanhour.org>

Give an Hour is asking mental health professionals nationwide to literally give an hour of their time 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.



The Hebgen Lake Dam is an earth-fill, concrete core dam that was built on the Madison River in 1914. It survived the intense vibrations of the earthquake as well as the repeated waves (seiche) which overflowed from Hebgen Lake. These waves were caused by the sudden down-dropping and tilting of the lake bottom during the earthquake. Notice the newly-formed Hebgen fault scarp to the far left and the small landslide (upper third of photo) that dropped part of Highway 287 into Hebgen Lake. 1959 Yellowstone Earthquake.

## **SELECTING DISASTER MENTAL HEALTH STAFF**

Disaster mental health work is not for everyone. It is challenging and rewarding work which requires mental health professionals to be flexible and socially extroverted. Despite their altruism and sincere desire to help, *not all individuals are well-suited for disaster work*. Whether designating and training disaster staff prior to or during a disaster, the mental health manager should consider several selection issues.

Selection of professional or paraprofessional staff should consider the demographics of the disaster-affected population, including ethnicity and language; the personality characteristics and social skills of the staff member; the disaster phase; and the roles the worker may play in disaster response and recovery efforts. Workers who are selected for disaster response and recovery work should not be so severely impacted by the disaster that their responsibilities at home or their emotional reactions will interfere with participation in the program, or vice versa.

## **RESPONDERS**

Studies have shown that psychological effects are universally present to some degree in responders involved in a disaster or critical incident situation. Teams of responders on the spot in a disaster or critical incident or after one have psychological reactions that are in every way similar to those of the victims. Several researchers in this area make no distinction between the two groups. Their reactions vary with the magnitude of the event and the number of casualties. It is also important to consider that, in addition to their work with the victims, there are factors of occupational stress: the time factor, overload of responsibilities, physical demands, mental demands, emotional demands, the workplace, environmental factors, limited resources, and the high expectations on the part of the public and the responders themselves. Generally responders function well in spite of the responsibilities, dangers, and stress factors inherent in their work, but sometimes it happens that the intense stress of the event overcomes the defenses they have previously used.

Verbalization sessions after a disaster or critical incident, commonly called ventilation, antistress, psychological recovery, or debriefing sessions, are needed immediately after the event, because the greater the interval between the event and the session, the more chance there is that the responders will develop delayed or lasting reactions. It is preferable that the professional leading the sessions be someone from outside whose competence is recognized, given the emotionally charged nature of the sessions. Verbalization sessions on the event should be a service offered to all responders to a disaster or critical incident by their employer.

Whatever the age groups, the psychosocial intervention and activities seek to restore and increase feelings of security, trust and competence, also to promote self-esteem, autonomy self-affirmation and assimilation of the event.

## **Earthquake History In Wyoming**

The first earthquake known to originate in Wyoming occurred on June 25, 1894, near Casper. Dishes fell to the floor, and a number of people were thrown from their beds. The Platte River was thick with mud, apparently stirred up by the tremor. On November 14, 1897, another shock caused considerable damage to the Grand Central Hotel at Casper. A 2- to 4-inch crack extended from the third to the first story. Frightened citizens dashed into the streets. A moderate earthquake on July 25, 1910, shook houses and was felt in mine shafts at Rock Springs. On May 8, 1915, a shock was felt in the north-central part of Yellowstone National Park. Thirteen minor shocks were felt at Kelly during the March 23 - April 12, 1923, period. A strong earthquake with noticeable rumbling occurred at Big Horn on November 17, 1925. The tremor was felt in Johnson and Sheridan Counties, an area of approximately 7800 square kilometers. Mine props near Thermopolis were loosened during an earthquake on February 13, 1928, and later became tight. Bumping and trembling sensations were reported at Thermopolis; there were sounds noted before the shock was felt. The earthquake was also felt at Crosby, Gebo, Kirby, Owl Creek, and Worland. The felt area covered about 7800 km square.

For more history, go to: <http://earthquake.usgs.gov/regional/states/wyoming/history.php>



1959 site of West Yellowstone Earthquake. Measured 7.8 on scale

### BOOKS AND PUBLISHED CONFERENCE PROCEEDINGS

### JUST PUBLISHED:

#### **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.html>

#### **Taking Charge In Troubled Times**

Proceedings of the 5th Rocky Mountain Region Disaster Mental Health Conference Casper, WY November 8-11, 2006

<http://www.amazon.com/exec/obid=ASIN/1932690379/>

#### **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/Proceedings-Mountain-Region-Disaster-Conference/dp/1932690565/>

## WYOMING CISM TEAM UPDATES

### **SWEETWATER ASSIST - CISM TEAM MEETING MINUTES TUES FEB 17<sup>TH</sup> 2009 5:30-8:00pm At RSPD TRAINING ROOM**

#### **ATTENDING:**

**Daggett Co. Em. Mgmt-** Winston & Shirley Slaugh

**RSFD-** Ben Fausett, Ron Atkins

**RSPD-** Jason Wright, Randy Hanson

**Christ's Ministries-** Dennis Crofts

**Family Dynamics-** Renee Schroeder

**SW Co. Em. Mgmt-** Judy Roderick

#### **Topics:**

- Update on upcoming meetings and trainings.
- March – Mike from Sw Counseling has coordinated a class on “Depression- Beyond
- April – “Open House” again.
- All old and new friends are encouraged to come.
- May-
- June- WWCC Classes. Beginning and Group Classes. & George in town.
- July – “Team Builder” Picnic

We watched the video put out by the Mayflower CISM team in Colorado, “*Critical Incident Stress: Managing the Impact*”. It is a good video to help new people understand what the CISM team is to first responders, and a good review for the ones who have already been involved.

I learned that Steve Sorenson is leaving the Team & Community.. L I will be sad to see him go as he has been an active part of the team, and always there for us!! However, I hope him the best in his new endeavors in Utah. (Our loss will be their gain) !!

These minutes are coming early this month as Randy has training out of town for the first two weeks of March. AND..... On Sat. March 21<sup>st</sup> 2009 @ 5pm, at Santa Fe Trail Restaurant, Randy and Misty are getting MARRIED J They would like to invite everyone to the proceedings !! So if you can *PLEASE COME* and join in the festivities!!!

#### **PLEASE NOTE:**

**Due to the 17<sup>th</sup> being “ST. PAT’S DAY” \*\* NEXT MEETING MOVED BACK 1 WEEK\*\* To Tues March 24<sup>th</sup> 2009 5:30-8:00pm @ RSPD Training room**  
SW Counseling is presenting “*Depression-Beyond Blue*”

#### **Campbell County CISM Team**

1. Monthly meeting on Monday, February 2 with 12 in attendance. Had 3 counselors from CCSD in attendance with interest in joining the Team. Gordon lead training

2. On Tuesday, Feb 10, a 6-year old child was run over by a school bus. A defusing was scheduled for hospital staff. Activated our HEART intervention program and 17 staff members attended.

On Thursday, Feb 12, scheduled a subsequent PEGS (debriefing) meeting for HEART with 7 in attendance; another one for LEO’s with 5 in attendance; and a 1-to-1 intervention for a civilian who was first on scene who provided care to the victim. These three meetings took place concurrently and were facilitated in the CCMH complex. Several other unscheduled 1-to-1’s took place during the week of this crisis.



A plane drops retardant on the fire as it moves closer to homes between Fremont Lake and the town of Pinedale July 2007. Photo by Dave Bell.



### Spotter Plane

A spotter plane flies in showing the retardant plane the path for a drop. This is just north of Pinedale (July 2007). Photo by Dave Bell.



A firestorm raged for three days after the 1906 earthquake in San Francisco.

3. On Feb 13/14, Bob attended a Caregiver Retreat at The Ranch At Ucross sponsored by the Campbell County Senior center with 25 in attendance. A PowerPoint presentation was made on *Facts About CISM for Caregivers* and appropriate brochures in support of the subject were handed out. This was followed by a facilitated open discussion on caregivers and spiritual issues. The presentation, topic and subsequent stress-related interactions were well received and widely appreciated.

4. On Feb 24, Bob presented *Facts About CISM for Victim Advocates*. This PowerPoint presentation was for the civilian Crisis Response Team at the Gillette Police Department. There were 12 in attendance including and administrative officer. A good deal of discussion followed about the importance of self-care and watching out for each other's welfare.

Respectfully Submitted,  
Bob W. Rudichar  
Team Coordinator

### **NPS Fire & Aviation Management:** [www.nps.gov/fire](http://www.nps.gov/fire)

The NPS Fire & Aviation Management site provides information on wildland fire, structural fire, fire aviation, the National Fire Plan, fire jobs, and other fire related information. Through numerous links, the site allows users to access information such as Fire Stories (current projects implemented in National Parks), current national fire information, fire prevention and education materials, fire ecology and fire effects monitoring information, prescribed fire articles, etc.

### **National Interagency Fire Center (NIFC):** [www.nifc.gov](http://www.nifc.gov)

The NIFC site is an excellent source of information for current and archived wildland fire information. Also contained within the site are educational resources such as a communicator's guide to wildland fire, the Burning Issues interactive multimedia program, and various publications for homeowners and firefighters about the wildland/urban interface.

### **REMEMBERING THE PAST:**

#### **July, 2007 - Pole Creek Fire Burns near Pinedale; Homes evacuated.**

#### **FIREWISE Fremont County, WY:** <http://www.fremontcountyfirewise.com>

Fremont County Firewise is a cooperative agreement between Fremont County Fire Protection District and Wyoming State Forestry Division.

**San Francisco Earthquake** At 5:12 on the morning of April 18th, 1906, San Francisco was heavily damaged by a magnitude 7.9 earthquake. The raging firestorm that followed lasted three days, and consumed most of what remained. Of the city's 400,000 residents, more than 3,000 lost their lives; 225,000 lost their homes.

**West Yellowstone Earthquake 1959** On August 17, 1959 at 11:37pm, one of the largest earthquakes recorded in North America shook the area of West Yellowstone. The earthquake caused a gigantic tidal wave that rushed over the dam and into the narrow valley below. This 20 ft high wall of water travelled down Madison Canyon which was full of campers and vacationers. Further down the valley, half of a 7600ft mountain fell into the valley (44 million cubic yards of solid rock). House size boulders rolled into the campground. The rock avalanche created hurricane force wind to move up the narrow valley blowing away trees and vehicles. The avalanche also damned the river creating a new lake, Earthquake lake. Twenty eight people were killed. The earthquake was a 7.8 magnitude and was recorded by seismographs as far away as Hawaii! For photos, paste following in address:

<http://geology.csusb.edu/VTRIPS/YNP/Equake.htm>