

WYO CISM NET



October 2008

A Newsletter For Critical Incident Responders In Wyoming

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DON'T FORGET TO VOTE!!

Proceedings of the 5th Rocky Mountain Region Disaster Mental Health Conference (Paperback)

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

Kindle Page:

<http://www.amazon.com/Proceedings-Mountain-Disaster-Conference-RMRDMHI/dp/B000ZMOVIE>

Proceedings of the 6th Rocky Mountain Region Disaster Mental Health Conference

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

7th Annual Rocky Mountain Region Disaster Mental Health Conference

November 6-8, 2008.
Laramie, WY
Hampton Inn

Traumatic Stress, Self-Awareness, and Self-Care

It is important to remember that no matter how effective someone's coping skills may be, there are events, that can easily overwhelm those skills. This is true for each of us as individuals and each of us as members of our larger responder organization's teams. Stress reactions are common, normal reactions to any unusual and highly stressful situations.

People can experience several types of stress:

1. Anticipatory stress - concerns over the future ("What if...?", "Am I ready for this?", and "Here we go!");
2. Situational stress - the concerns of the moment (newness, uniqueness, and magnitude);
3. Chronic stress - worry over time ("I thought this would end sooner!" and "I miss my family"); and
4. Residual stress - unresolved issues from previous incidents.

The intensity of each person's reaction to stress can be modified by several factors:

1. Duration - longer exposure to any stressful event usually makes it more severe;
2. Multiplicity - the more stresses there are, the greater the potential reaction;
3. Situational importance - greater importance of the event means greater reaction;
4. Individual's evaluation of the stress - how threatening is the situation and how prepared am I to cope with the consequences (we each have our own psychological Achilles' heel);
5. Reminders that trigger vivid memories (press coverage, trials/law suits, and similar incidents); and
6. Stress tolerance - general ability to tolerate plus benefits of stress inoculation.

There are three categories of reactions to traumatic stress - thoughts, feelings, and behaviors. Here are a few examples of each:

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

The following course is 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

12 CE Hours

Thoughts

- Recurring dreams or nightmares about the disaster.
- Reconstructing the events surrounding the disaster in your mind in an effort to make it come out differently.
- Difficulty concentrating or remembering things.
- Questioning your spiritual or religious beliefs.
- Repeated thoughts or memories of the disaster, or of loved ones who died in the disaster, which are hard to stop.

Feelings

- Feeling numb, withdrawn, or disconnected.
- Experiencing fear and anxiety when things remind you of the disaster, particularly sights, sounds, and smells.
- Feeling a lack of involvement or enjoyment in everyday activities.
- Feeling depressed, blue, or down much of the time
- Feeling bursts of anger, or intense irritability
- Feeling a sense of emptiness or hopelessness about the future.

Behaviors

- Being overprotective of your and your family's safety.
- Isolating yourself from others.
- Becoming very alert at times and startling easily.
- Having problems getting to sleep or staying asleep.
- Avoiding activities that remind you of the disaster, avoiding places or people that bring back memories.
- Having increased conflict with family members.
- Keeping excessively busy to avoid thinking about the disaster and what has happened to you or others.
- Being tearful or crying for no apparent reason.

Basic Self-Care

No matter how good your coping skills or how many disasters you have worked or experienced, there will come times when some aspect of an operation breaks through your defenses and makes you vulnerable to traumatic stress. It is clear in the research literature that there are relatively simple things that can be done to improve your resilience to stress. While this is true in any disaster, it is especially true in aviation disaster, and a higher level of self-care is required.

Shifts (stick to them) - With the exception of the first day or two, be certain that you stick to the shift assigned hours.

Breaks (take them) - A reasonable time frame is 10 - 15 minutes every two hours. More may be needed. Get away from the maelstrom for a few moments.

Diet - A healthy and balanced diet can significantly improve your ability to cope with high levels of stress. Beware of caffeine and alcohol. Both can significantly impair your ability to function. If you need caffeine to continue to function in this supercharged environment, you just aren't getting enough sleep. Beware of too much junk food. Too much sugar can cause sugar lows in addition to the famous sugar highs.

Support - Be sure you don't isolate yourself. Talk about things other than the operation with colleagues on your team. Talk with your family back home. Call colleagues that understand what you're going through.



Spring Flood - Cedar Rapids, IA

Days off - Common practice for relief operations is one day off in every seven. The high intensity and stress of aviation disasters may create a need for more frequent time off. This should be considered on a case-by-case basis and not held against any individual requesting additional time off.

But you probably knew all of that before reading this article. It seems almost too basic. Self-care and stress management cannot possibly be that simple, can they? The answer is a resounding **"YES"** - these basic elements are consistently found to be the most effective components of effective self-care.

Shingle Mill Wildland Fire

Closures are no longer in effect at this time for the Shingle Mill Fire. Forest users are urged to use extreme caution while hunting in the vicinity of the fire, beware of the following hazards: falling snags and trees, rolling rocks and logs, and hot spots that may have caused sink holes. Caution signs along with a map of the fire perimeter are posted at access points into the area. Visitors should contact the Kemmerer Ranger District for updated information. Fire Danger Rating on the Bridger-Teton National Forest is low. For further information on this, go to:

<http://www.inciweb.org/incident/1544/>



RETURN TO EQUILIBRIUM

When a disaster or other critical incident occurs, people are traumatized at different levels, mostly dependent upon how directly affected they are. Much effort and much discussion revolves around returning to normal. However, "normal" has changed. It is a concept with many different meanings. It tends to be a term that is very difficult to define and, consequently implement. What was "normal" before can never be the same again. What can happen and what is constructive, and more easily defined is a "Return to Equilibrium". This involves integrating the event, its effects and its meanings into one's life and recognizing it as now part of one's life. Taking that and building a new balance in life can bring one into a new and enriched life. To use a concrete example, it is quite akin to taking an old-fashioned balance and adding or subtracting to one side or another in order to gain a balanced scale. Experience in life changes each of us whether the experience is good or bad. Integrating that experience into our life creates that new balance. It is a changed normality that results from the new balance and a return to equilibrium.

Returning to Equilibrium following a major hurricane or other natural event is different from Returning to Equilibrium following a man-made traumatic event, critical incident, terrorism event or war. However, in all cases, re-establishing a balance in life that integrates the event as part of one's life and moving forward into the future in a constructive manner is what develops our new "normality". Such a "Return to Equilibrium" is a goal of recovery.

Returning To Equilibrium is the overall theme of the Conference and Pre-conference Workshops. The conference has two Tracks: Working with our Returning Military Veterans and Disaster Mental Health. The Conference and the Workshops offer Continuing Education and POST Credit applied for. Both combined, you can earn up to 26.5 Hours.

Pre-Conference Workshops: Run Concurrently Pre-Conference Workshops are Co-sponsored by Peak Wellness Center in Laramie. Both Workshops will take place at Peak Wellness Center. One-day Workshops: 8 CE Hours each

Wednesday November 5, 2008

Conference begins at 8 AM on Thursday November 6, 2008 and runs until 6 PM on Saturday November 8, 2008. For registration links and information on how to register and pay online, go to: <http://www.rmrinstitute.org> The Conference Agenda is available at: <http://laramie-dmh--conference-2008.eventbrite.com> or <http://www.rmrinstitute.org/Flier-1.doc>



BOOK

["Crisis Intervention Training for Disaster Workers: An Introduction"](#)

Published by the Rocky Mountain Disaster Mental Health Institute Press (an imprint of Loving Healing Press, Ann Arbor, MI). The book can be ordered through Amazon.com by going to: <http://www.amazon.com/exec/obid/ASIN/1932690425>

If ordering in bulk to use as an instructor or for a college or university course, please contact the Institute for details (307-399-4818) or email: rockymountain@mail2emergency.com

WYOMING CISM TEAM UPDATES

.SWEETWATER ASSIST: SEPT MEETING MINUTES
TUES SEPT 16TH 2008 5-8pm @ RSPD Training Room

ATTENDING:

SW counseling- Steve Sorenson
Emergency Mgmt- Judy Roderick
RSFD- Ben Fausett, Ron Atkins
SW Mem Hosp- Lisa Blackwell
Family Dynamics- Jill Johnson, Renee Schroeder
RSPD- Wauneta Lutes, Randy Hanson
Trinity Lutheran Church-Scott Shields

TOPICS:

Wauneta wants to remind EVERYONE to get copies of Any & All of their Certificates for CISM to her so she can include them in our book. This helps with any credibility issues, and is a good central place to keep these for all members of the team.

It also lets us know needs of the team for any future trainings we may need. THANKS

We again discussed the recent debriefs we recently did.

It was brought up that we may want to be aware of some general considerations like "locations", "uniforms", "time of day", etc. and possible alternatives to these issues.

It was brought up that there maybe some territorial issues with departments on the location of a debriefing. That maybe we should look at an early evening debrief if the people are off work @ 5pm, rather than in the early afternoon. It was also brought up if clergy should wear uniform to this or street cloths, as well as police/ fire etc.

Does this comfort, or make people uneasy for the debrief ??

Steve did an EXCELLENT presentation on the 7 steps to a debrief. He made a power point presentation and CD of it. He did a great job in delivering the information. It was about 20-30 minutes long and was very informative!! I have asked that he put it on our E-mail site if any one is interested in using or viewing it. (I highly recommend it)

Our e-mail site is: Yahoo.com (email), go to "sweetwater_assist" and the password is "rocksprings" (one word) To access all our team info. Next meeting Renee and Jill were asked to come up with a presentation on the "Symptom Phase"& "Teaching Phase"- it should be good. **NEXT MEETING**

TUES OCT. 21ST 2008 5-8pm @ RSPD Training Room
HOPE TO SEE YOU THERE !!!!!!!

Campbell County CISM Team: September activities

1. Monthly meeting was on Monday, September 8. Twelve were in attendance were Kay Holm (Social Worker), Rod Warne

(Asst Fire Chief/retired LEO), Charlie Messenheimer (firefighter/Peer Coordinator), Gwen Reed (firefighter/EMT), Ken Maston (EMT), Cheryl King (secretary/EMT), Gordon Harper (chaplain/Training Coordinator), Scott Lindblom (firefighter/Finance Coordinator), Dorie Beck (counselor/LPC) and Bob Rudichar (chaplain/Team Coordinator. Guests from Campbell County Memorial Hospital (CCMH) were V.P. of Plant Operations, Correy Fedie, and Patient and Guest Services Manager, Mary Barks. Discussion covered clarifications on CCMH sponsorship (usage of company vehicles for Team deployment outside of Gillette—including fuel; limited liability insurance for volunteers); need for licensed counselors to be sent on deployments to keep with Team policy and ICISF standards and procedures; pre-incident presentations; team uniform (we now have a cap!); new MOU's; updated handouts and WYOCISMNET evaluation forms to incorporate Team logo; and a deployment kit containing post-intervention handouts, Kleenex boxes, evaluation forms, mints and other pertinent items to take on a team call-out.

2. CISM pre-incident educational presentations by:
 - a. Gwen Reed & Ken Maston at EMS home base (GEMSTAR) incorporating CISM with its wellness training.
 - b. Rod Warne at the Wyoming Law Enforcement Academy in Douglas, Wyoming.
 - c. Bob Rudichar with new nurse hires at CCMH. (All future CISM presentations regarding new nurse hires and certified nursing assistant students will be done at the new Herbert A. & Dorothy P. Carter Health Science Education Center on the Gillette College Campus.) Team members are soliciting opportunities for presentations at other community services.
3. The CISM Group Crisis Intervention course has been rescheduled for January 16/17 at the new Gillette Fire Department Station #1. \$100 for first timers. \$45 for those who have taken the course before and want to audit the new information.
4. Further development on pre-incident education PowerPoint presentations and brochures. Entity specific materials now incorporate the following:
 - a) Firefighters
 - b) Emergency Medical Services
 - c) Crisis Response Team (Gillette Police Department's Victim Assistance)
 - d) New Nurse Orientation
 - e) Certified Nursing Assistant
 - f) Gillette Senior Center
 - g) HEART (Healthcare Emergency Action Response Team—the in-house hospital CISM intervention project)—A *Crisis Support Component of the Campbell County CISM Team*

Respectfully Submitted: Bob W. Rudichar, Campbell County Team Coordinator