

# WYO CISM NET



October 2009

## *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

### FIRE UPDATE

Arnica Fire – Yellowstone September 35, 2009.



Fire crews work to contain the Station fire, burning in the San Gabriel Canyon, just outside Pasadena, California, USA, 03 September 2009. The Station Fire has burned over 150,000 acres, destroyed 64 homes, and is 28 per cent contained. EPA/MICHAL CZERWONKA

\*\*\*\*\*

**National Interagency Fire Center website:**  
[http://www.nifc.gov/fire\\_info/nfn.htm](http://www.nifc.gov/fire_info/nfn.htm)

\*\*\*\*\*

**UPCOMING Annual Conference – Cheyenne, WY – Nov 5-7, 2009**  
<http://8dmhi-conference-2009.eventbrite.com/>

\*\*\*\*\*

**Give An Hour**  
<http://www.giveanhour.org/skins/gah/home.aspx> 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.

## PSYCHOLOGICAL FIRST AID IN CRISIS RESPONSE - Part 2

Nearly every survivor of mass violence, critical incidents, or disasters experiences stress-related reactions in the immediate aftermath. Most recover. The emotional and psychological impact of disasters is not easily absorbed, and survivors may benefit from some immediate psychological support even under the best of conditions. However, it is no simple task to determine who should deliver what kind of support to whom and at what time. Disasters and wars are so dangerous and disruptive that it would be absurd to address people's psychological needs when their very lives are threatened. Moreover, even after the imminent threats have subsided, there continue to be imperative survival needs that must be given the utmost priority. Therefore, if immediate psychosocial support is to be supplied at all, it will most likely require an informal method of delivery that fits seamlessly with the provision of the most essential services (e.g., medical, nutritional, and sanitation) and must neither conflict with the priorities of the humanitarian operations nor the cultural values of the beneficiaries.

The role of mental health professionals in the aftermath of disaster and terrorism is growing in importance. Assessment and treatment of acute responses to traumatic stress has received much attention since the World Trade Center incident on September 11, 2001. Those events underscore the value of having a trained and ready mental health workforce. Training in psychological first aid, crisis intervention, and early interventions may well become a part of graduate and postgraduate training in clinical programs in psychology, psychiatry, and social work. The scope and the depth of the psychological impact coming from these events warrants such an investment of time and resources. Coordinated efforts that cross geographic, political, and social lines would be welcome additions to societal efforts to understand the impact of mass violence and to provide the best possible interventions directed at recovery. It is clear that most survivors of traumatic events are resilient and do recover. However, a significant minority of survivors may endure prolonged periods of distress. It is for these people that interventions should be developed with the hope of minimizing the impact of trauma exposure, limiting disability and dysfunction, and maximizing optimal emotional recovery (Keane and Piwowarczyk, 2006).

The terrorist attacks in New York on September 11, 2001, and the widespread fears of anthrax poisoning and spreading of smallpox that followed, raised the question of how health and behavioral health professionals might respond to casualties were similar events to occur elsewhere. International expertise and local experience are instructive in helping to outline the kind of psychological first aid service that should be made available to disaster casualties. Some of the particular topics about which interveners should be informed, essentials of their involvement, and conditions requiring specialist treatment should all be areas of major concern. Implementation of proposals for action requires discussion with the relevant professional societies, voluntary agencies, and the statutory bureaucracies that have responsibility for dealing with other aspects of trauma and social disruption.

ONLINE COURSES  
AVAILABLE FOR CONTINUING  
EDUCATION CREDIT:

The following courses are available online:

- **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
- **CRISIS INTERVENTION TRAINING FOR DISASTER WORKERS**  
[http://www.psychceu.com/CISM/cism\\_index.asp](http://www.psychceu.com/CISM/cism_index.asp) - 12 CEU
- **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 CEU

[8th Rocky Mountain  
Disaster Mental Health  
Conference](#)

*November 5-7, 2009 - Cheyenne, WY*

**CONFERENCE Brochure located at:**

<http://www.rmrinstitute.org/CYS-Brochure-2009-Conf.doc>

Brochure will be updated regularly.

<http://8dmhi-conference-2009.eventbrite.com/?ref=ebtn>



To help protect structures Yellowstone Park is using a metal pipe irrigation system and a high-volume pump first used on the 1988 fires. If you look closely at the photo above and squint your eyes a little, you can see a hint of the irrigation pipe leading from a pump on the lake shore. Arnica Fire-September 26, 2009.

**The following resources can be used and are very useful for Team Meeting Discussions and Practice Sessions:**

**NATURAL HAZARDS OBSERVER**

<http://www.colorado.edu/hazards/o/archives/2008/Jul08/JulyObserverweb.pdf>

**Cross-cultural Counseling In Disaster Settings - The Australasian Journal of Disaster and Trauma Studies**

This article reviews cross-cultural counseling, presents a review of a number of studies involving disaster victims and workers in other cultures and presents information about cross-cultural aspects of grief. It discusses some general methods and approaches that disaster mental health professionals should consider when contemplating providing disaster mental health services outside of their own culture. Emphasis is made that collaboration with providers and/or "culture-brokers" from the culture should be sought. <http://www.massey.ac.nz/~trauma/issues/1999-2/doherty.htm>

**Psychological First Aid: Field Operations Guide: For Disaster Mental Health Responders**

PFA is an evidence-informed modular approach for assisting people in the immediate aftermath of disaster and terrorism: to reduce initial distress, and to foster short and long-term adaptive functioning. It is for use by mental health specialists including first responders, incident command systems, primary and emergency health care providers, school crisis response teams, faith-based organizations, disaster relief organizations, Community Emergency Response Teams, Medical Reserve Corps, and the Citizens Corps in diverse settings. NOTE: Available in Chinese. [http://www.ncptsd.va.gov/ncmain/ncdocs/manuals/nc\\_manual\\_psyfirstaid.html](http://www.ncptsd.va.gov/ncmain/ncdocs/manuals/nc_manual_psyfirstaid.html)

**Psychological First Aid Competencies for Public Health Workers**

**Trainer:** Cindy Parker, MD, MPH, training specialist, Johns Hopkins Center for Public Health Preparedness, Johns Hopkins Bloomberg School of Public Health

**Description:** In this presentation, Dr. Parker examines the change in public health policies regarding psychological first aid after September 11, 2001.

[http://www.jhsph.edu/preparedness/training/online/dis\\_mtl\\_hlth\\_comp.html](http://www.jhsph.edu/preparedness/training/online/dis_mtl_hlth_comp.html)

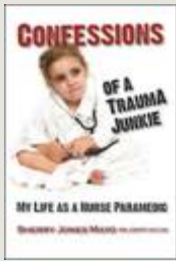
**Psychological First Aid**

The National Child Traumatic Stress Network and the National Center for PTSD are pleased to make the Second Edition of Psychological First Aid Field Operations Guide and accompanying handouts available. Psychological First Aid is an evidence-informed approach for assisting children, adolescents, adults, and families in the aftermath of disaster and terrorism. In addition to the English-language edition of Psychological First Aid, there are versions in Chinese, Japanese, and Spanish. [http://www.nctsnet.org/nccts/nav.do?pid=typ\\_terr\\_resources\\_pfa](http://www.nctsnet.org/nccts/nav.do?pid=typ_terr_resources_pfa)

**Nebraska Psychological First Aid Curriculum**

This training program is an adaptation of "Community-Based Psychological Support" developed by the International Federation of Red Cross and Red Crescent Societies. The purpose of the Nebraska psychological first aid program is to equip natural helpers to provide psychological support to survivors of critical events (e.g. disasters, conflicts, accidents, etc.). This training program is 8 hours long and designed to fit into the busy schedule of natural helpers and community responders. It is segmented into seven modules, each addressing critical skills that can make an immediate and lasting impact on a person's psychological health following a crisis. <http://www.disastermh.nebraska.edu/psychfirstaid.html>

*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](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.**

### Samoa Earthquake Triggers Tsunami

The toll in Samoa, where 47 people are confirmed dead, may rise to 100 as rescue teams reach isolated villages, Radio New Zealand reported, citing an estimate by the nation's Disaster Management Office. At least 19 people are dead in American Samoa, according to territory director of homeland security, Mike Sala. Tonga is checking reports of 10 deaths.



A boat from Malaloa Marina is seen on the edge of the main highway in the village of Fagatogo, in American Samoa on Tuesday, Sept. 29, 2009. More at:  
[http://www.huffingtonpost.com/2009/09/samoa-earthquake-triggers\\_n\\_303304.html](http://www.huffingtonpost.com/2009/09/samoa-earthquake-triggers_n_303304.html)

### The Medical Minute: Get geared up and warmed up for sports safety

Tuesday, August 25, 2009 By Susan E. Rzucidlo

Each year, more than 3.5 million children under the age of 15 are treated for sports injuries nationwide. Roughly half of these injuries are sustained in solo activities, but approximately one out of four participants in youth soccer, football, or baseball has been injured at least once.

In team sports, most injuries occur during practices, not games. Parents should insist that kids wear the same protective gear, do the same warm-ups, and take all the same precautions when they practice as when they're getting ready for a game.

When we think of sports injuries, we think of dramatic tackles or falls or being hit in the head, but young athletes are also at risk for strains and repetitive motion injuries. Coaches may recommend certain types of warm-ups, not just to make kids better athletes, but to keep them from getting hurt. Repetitive motion injuries account for nearly half of all sports injuries to students in grade six and above.

Safe Kids Dauphin County recommends these precautions for all children playing or practicing any individual or team sport:

- Before signing up for a sport, get a general physical exam.
- Warm up before games and practices.
- Always wear appropriate protective gear that is properly sized and adjusted during practices and games.
- Make sure responsible adults know and enforce the safety rules of the sport, are present to provide supervision, and are trained in first aid and CPR. Also, make sure the field is in safe condition.
- Never "play through" an injury. Get immediate help from a coach or trainer.
- Follow the rules. In most sports, they are based not only on sportsmanship but also safety.
- Stay hydrated. Drink plenty of water or sports drinks before and during the activity, and rest frequently during hot weather.

For more information about sports safety, call [Penn State Hershey Children's Hospital Injury Prevention Programs](http://www.pennstatehsc.edu/hospital/injury-prevention) and [Safe Kids Dauphin County](http://www.safekidsdauphin.org) at 717-531-7233.

*Susan Rzucidlo is coordinator of the Dauphin County Safe Kids Coalition, led by Penn State Hershey Children's Hospital, and the pediatric trauma program nurse manager at Children's Hospital.*

Contact Ann Guerrisi-Hawn [aguerrisihawn@hmc.psu.edu](mailto:aguerrisihawn@hmc.psu.edu) 717-531-8606

## 8<sup>th</sup> Disaster Mental Health Conference

November 5-7, 2009

Plains Hotel

Cheyenne, WY

## BEING THERE WHEN IT COUNTS

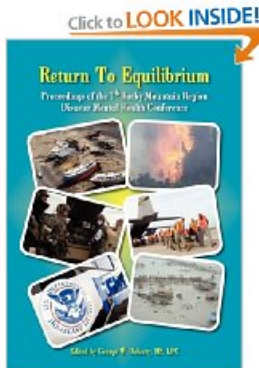
Lessons Learned:

Getting Past the Past and Moving Into The Future

*Role of Mental Health:*

The Economy, Disasters and Returning Military  
Brochure: <http://www.rmrinstitute.org/CYS-Brochure-2009-Conf.pdf>

Institute BOOKS AND  
PUBLISHED CONFERENCE  
PROCEEDINGS

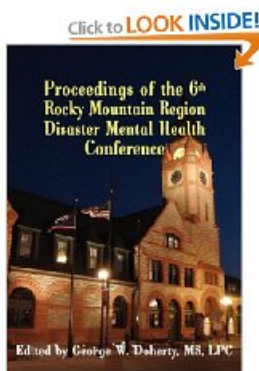


**RETURN TO EQUILIBRIUM:  
Disaster Mental Health and  
Returning Military and Families**  
- Proceedings of the 7th Rocky  
Mountain Disaster Mental Health  
Conference – Laramie, WY  
[http://www.rmrinstitute.org/ROCKY  
MOUNTAIN\\_REGION-books.pdf](http://www.rmrinstitute.org/ROCKY_MOUNTAIN_REGION-books.pdf)

**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 6<sup>th</sup> Rocky Mountain  
Region Disaster Mental Health  
Conference - Cheyenne, WY November  
8-10, 2007  
[http://www.amazon.com/Proceedings-  
Mountain-Region-Disaster-  
Conference/dp/1932690565/](http://www.amazon.com/Proceedings-Mountain-Region-Disaster-Conference/dp/1932690565/)

## CISM TEAM UPDATES

### SWEETWATER ASSIST CISM TEAM MEETING MINUTES

**Tues Sept. 15th 2009 5:30-8:00pm RSPD Training Room**

#### ATTENDING:

RSPD-Bob Cottrell, Steve Van Valkenburg, Jason Wright, Wauneta Lutes, Randy Hanson  
Family Dynamics- Renee Schroeder  
Sweetwater Co. Emergency Mgmt.- Judy Roderick  
SW-WRAP- Libby Bougere  
RS Evangelical Church - Rev. James Baker

#### TOPICS

- We discussed the upcoming 8th annual, Rocky Mountain Region Disaster Mental Health Institute conference in Cheyenne. Nov 5th -7th @ Plains Hotel Things appear to be coming together and it looks to be another good one.
- Randy went over the history of the team, our yearly goals and challenges. He also went over a lot of handouts and information accumulated over the years. Having a folder to keep these in and a “GO” folder with handouts for a debriefing for when the call comes for you. We talked of the 7 steps and the importance to sticking to the program, as it really works!!
- We also watched the video “CISM, Techniques of a debriefing” this was the second month in a row to show/watch this video. It was a good video to show the 7 steps and hoe a debriefing should go. An excellent example. Upon conclusion of the video, we did some questions and ans Wauneta)wers, as well as some networking.

**\*\* NEXT MEETING\*\***

**TUES OCT. 20TH 2009 :30 – 8:00pm @ RSPD Training Room**

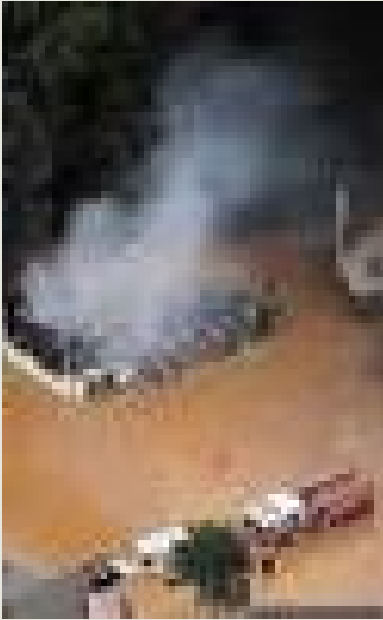
- Renee and Judy will be putting on presentations. Let’s try to make it for this special meeting
- Visit Yahoo Mail- Sweetwater\_Assist@ yahoo.com Password “rocksprings”

\* \* \* \* \*

### Campbell County CISM Team September 2009 activities

1. Finally had the yard party at the Harper’s. Inclement weather settled in, so we retired to the fellowship hall at Vineyard Christian Fellowship where Gordon pastors.
2. I don’t recall mentioning the following, so here’s an updated:
  - Gwen Reed has moved from EMT to Paramedic status.
  - Gordon Harper is now Chaplain to the Sheriff’s Office.
  - Cheryl King is now officially an EMT with CCMH.
3. No other activities. Been quiet, and we are thankful for that.

Respectfully Submitted,  
Bob W. Rudichar  
Team Coordinator  
10.01.09



Flooded Houses in Atlanta , Georgia  
September, 2009



FERRE DOLLAR/CNN



Tandicat, Indonesia's West Sumatra  
Province October 6, 2009

Debris and house. Health workers doused the Indonesian city of Padang with disinfectant to ward off disease outbreaks. Helicopters dropped aid to survivors 6 days after devastating earthquake. REUTERS/Dylan Martinez (INDONESIA ENVIRONMENT SOCIETY DISASTER)

### ATLANTA FLOODING

Torrential rains prompted flooding in and around metro Atlanta, Georgia, in September 2009. Waters began rising on September 20 and flooding peaked on September 21, 2009. Multiple fatalities were reported in the Sonny Perdue Atlanta metro area and throughout parts of Georgia and Alabama. Georgia Governor declared a state of disaster for several counties in the state, many of them in the Atlanta area.

### LATEST TYPHOON KILLS 16 IN NORTHERN PHILIPPINES – Manila

Typhoon Parma caused widespread flooding and landslides that buried at least two families in the Philippines, then hung threateningly off the coast Sunday drenching the country's north as well as Taiwan. At least 16 people died when Parma hit the main island of Luzon on Saturday, though the capital, Manila — still awash in floodwaters from a storm barely a week earlier — was spared a new disaster. In Benguet province, a family of five, including a 1-year-old boy, died when their home was buried in a landslide. Four also died in other provinces, most of them drowning after being swept away by floodwaters, officials said.

Parma headed northwest into the South China Sea after passing over the Philippines, but its movement slowed to about 6 miles per hour (10 kilometers per hour) and hooked back toward the country as it began to interact with Typhoon Melor, a storm over the north Pacific Ocean that is pushing west, said chief government forecaster Nathaniel Cruz. It was not expected to hit the Philippine coast again, but was likely to hover in an area around 60 miles (100 kilometers) away and could cause heavy rain for the next three days, Cruz said. The storm was close enough to Taiwan to cause heavy rain on the island, where troops were evacuating some villages and loading sandbags in preparation for possible flooding. In southern Taiwan, roads were clogged with military trucks and cars taking villagers away from their flood- and mudslide-prone mountain homes.

Typhoon Melor, formerly a super typhoon and still packing high Category-3 intensity as of Tuesday morning, EDT, is well on its way to a powerful strike upon mainland Japan. Tracking northward east of Okinawa on Tuesday, Melor is set to veer northeastward for a landfall upon the southern mainland between Osaka and Tokyo on Wednesday. Hurricane-strength winds, potentially of destructive Category-2 intensity, will lash the area of landfall, which is favored to be on or near the Kii Peninsula of southern Honshu. Although such a track would spare both Tokyo and Osaka the worst of Melor's damaging winds will happen in both metropolitan areas before the storm leaves Japan on Thursday. Perhaps a greater threat than that of wind, torrential rain will spread over much of the island nation. Hardest hit southern Japan along and near the direct storm path will be pummeled by rainfall of 10 to 15 inches, and rainfall could even top 20 inches locally. Excessive rain falling on sloping landscapes always raises the threat of mudslides. In this aspect, Melor will be no different, as Japan is a mountainous country. Storm tides along the southern coast, near the landfall of Melor, will reach 5 to 10 feet above normal

Airmen assigned to Pacific Air Forces left Andersen AFB, Guam, Oct. 5 for Padang, Indonesia, to provide medical care to those affected by the recent 7.6-magnitude earthquake. They are part of an Air Force Humanitarian Assistance Rapid Response Team that left on two C-17 Globemaster IIIs for Indonesia. HARRT, comprised of members from the 36th Wing at Andersen Air Force Base, Guam; 13th Air Force at Hickam AFB, Hawaii; 3rd Wing at Elmendorf AFB, Alaska; and the 374th Medical Group here, combines medical and contingency response experts.



A mother carries her child past destroyed mosque earthquake-ravaged village of Tandikat.. Helicopters dropped aid to survivors six days after a devastating earthquake. REUTERS/Dylan Martinez (INDONESIA ENVIRONMENT SOCIETY DISASTER) REUTERS/DYLAN MARTINEZ