



HUMBERSIDE FIRE AND RESCUE SERVICE

People and Development

Critical Incident Stress Management Policy

Owner	Executive Director of People and Development
Responsible Person	Head of Occupational Health & Wellbeing
Date written	February 2020
Date of last review	December 2023
Date of next review	December 2025
EIA Completed	August 2022

CONTENTS

1. [Introduction](#)
 - [Core Code of Ethics](#)
 - [National Guidance](#)
2. [Equality, Diversity and Inclusion](#)
3. [Aim and Objectives](#)
4. [Associated Documents](#)
 - [Equality Impact Assessment](#)
 - [Legal References](#)
 - [National Guidance](#)
5. [Scope](#)
6. [Health and Safety](#)
7. [Critical Incident Stress Management](#)
 - [Preparing Workers for a Possible Critical Incident](#)
 - [Critical Incident Stress Management \(Green Book Vicarious\)](#)
 - [Demobilisation – Rest, Information, Time Out](#)
 - [Debriefing](#)
 - [Service Critical Incident](#)
 - [Mandatory](#)
 - [Optional](#)
8. [Procedure](#)
 - [CISM Taskings](#)
 - [Scheme Coordinator](#)
 - [Confidentiality](#)
 - [Follow-up support](#)
9. [Employee Responsibilities](#)
10. [Appendix A: QR Code for Group CISM Support](#)
11. [Appendix B: QR Code for Individual CISM Support](#)

1. INTRODUCTION

Humberside Fire & Rescue Service (HFRS) recognises the role its employees undertake in helping support the health, safety and wellbeing of its communities and are therefore committed to helping establish protocols and policies that help promote positive mental wellbeing. This policy has been developed to help better support the mental wellbeing of HFRS staff who have been exposed to traumatic and/or stressful events or situations at work or at home which could have the potential to impact on their physical, cognitive, behavioural and emotional health.

Core Code of Ethics

HFRS has adopted the Core Code of Ethics for Fire and Rescue Services. The Service is committed to the ethical principles of the Code and strives to apply them in all we do, therefore, those principles are reflected in this Policy.

National Guidance

Any National Guidance which has been adopted by HFRS, will be reflected in this Policy.

2. EQUALITY, DIVERSITY AND INCLUSION

HFRS has a legal responsibility under the [Equality Act 2010](#), and a commitment, to ensure it does not discriminate either directly or indirectly in any of its functions and services or in its treatment of staff, in relation to race, sex, disability, sexual orientation, age, pregnancy and maternity, religion and belief, gender reassignment or marriage and civil partnership. It also has a duty to make reasonable adjustments for disabled applicants, employees and service users

3. AIM AND OBJECTIVES

This policy sets out the expectations, parameters and considerations for all employees, dealing with the welfare of operational and non-operational staff, following a 'critical incident'.

4. ASSOCIATED DOCUMENTS

- [Equality Impact Assessment](#)
- Legal References
There are no legal references in relation to this policy.
- National Guidance
There is no specific National Guidance in relation to this policy.
- [pdrPro eLearning](#)
- [Absence Management Policy](#)
- [CISM Debrief Contact Form](#)

5. SCOPE

For the purpose of this document the Service will define a **critical incident** as any situation that exposes an employee to experience an unusual event and natural emotional reactions, which have the potential to cause serious harm to the physical or mental health, safety or wellbeing of an individual within the workplace.

All staff should be aware of this policy and all managers and supervisors with responsibility for staff must be aware of the arrangements that can be put in place within the Service that will enable a process, ensuring effective management of those exposed to potentially traumatic events. Managers must know the process to escalate concerns should a higher level of support be required. This policy has been developed after careful consideration of the best available evidence, considering the nature of the workforce and characteristics of the organisation.

Whilst the majority of people exposed to potentially traumatic events recover without the need for complex interventions, there are those who can be severely affected.

6. HEALTH AND SAFETY

The Service recognises its moral and legal duty to consider the physical and psychological needs of the workforce, following exposure to potentially traumatic events related to the workplace.

It is essential that the Service identifies when its employees are at risk of traumatic exposure and employ a process of managing the risk and treating the outcomes when risk cannot be eliminated. A risk-based approach is designed to ensure the safe operation of employees within the Service.

Areas for improvement will be identified utilising a number of performance management matrices, more importantly improvements will be made in light of staff feedback.

7. CRITICAL INCIDENT STRESS MANAGEMENT (CISM)

A critical incident can be overwhelming and threatening and may lead to distress. This can be harmful when a person has demands and expectations that are out of keeping with their needs, abilities, skills and coping strategies. Distress can result in a decline in performance and in overall levels of wellbeing.

Involvement in, or exposure to, abnormal workplace incidents can lead a person to experience distress. It is normal to react emotionally to a critical incident. This may involve recurrent thoughts about the event, feeling uneasy or anxious, mood changes, restlessness, feeling tired and disturbed sleep.

The [Critical Incident Team](#) will consist of those who have undertaken defusing or debriefing training courses with an authorised trainer.

Hot debriefs will be the first response to any Service critical incident.

Critical incident debriefing will be a more in-depth response (if required) by fully trained critical incident debriefers.

Service Critical Incident

A Service Critical Incident is any situation faced by HFRS personnel that may cause them to experience an unusual event and natural emotional reactions, which could possibly affect their ability to function either at the scene/at work or later.

Within HFRS a critical incident will be deemed as any situation faced by staff that may cause them to experience unusually strong or persistent emotions which could possibly affect their ability to function either at the scene/at work/at home or later on.

Mandatory (this means the CISM team will make a mandatory offer; attendance is still voluntary but strongly recommended and encouraged):

- Serious injury or death of a colleague
- Death of a child
- Incident involving particularly traumatic injury/death
- Mass casualties/fatalities
- Major disaster or incident
- Civil disturbance - an incident which contains high levels of violence or aggression towards fire crews
- Where the involved person is known to the firefighter(s)/employee(s)

Optional: (depending on the individual circumstances and needs of the staff)

- Incident involving a fatality
- Where crews are exposed to a series of traumatic events over a short period of time
- In the case of Fire Control staff, where an operator has handled an unusual, difficult or traumatic call
- An incident which may entail excessive media interest
- An incident in which the manager or supervisor considers to be deemed 'critical'

This list is not exhaustive and it should be borne in mind that different individuals are often able to tolerate differing levels of traumatic exposure.

It is important to also note that a critical incident can also be declared in non-operational occurrences. A Head of Function should be the person responsible for declaring a critical incident within their remit, however any employee can request this via their Manager.

Critical Incident Stress Management Support

Critical incident stress management provides support to assist the recovery of normal individuals experiencing normal distress following exposure to abnormal events. It is based on a series of comprehensive and confidential strategies that aim to minimise any adverse emotional reaction the person may have.

Critical incident stress management strategies in the workplace include:

- Preparing workers for a possible critical incident in the workplace.
- Hot Debriefs & Informal/Structured Debriefs.
- Demobilisation (rest, information and time out – RIT) - carried out by the Officer in Charge (OIC) immediately post incident.
- Debriefing (powerful event group support) - carried out by trained defusing officer ideally within a week of the incident.
- One-on-one support sessions.
- Follow-up support.

Preparing Workers for a Possible Critical Incident in the Workplace

It is inevitable when working within the fire and rescue service, either operationally or in support roles, that there will be exposure to traumatic incidents either directly or indirectly. Preparation for this exposure takes place in two areas, new employees, and existing employees.

Operational staff, up to an including Station Manager (SM), and Control Room staff complete the CISM pdrPro course every 12 months, which contains information on building resilience and how to access support on an individual basis.

Hot Debriefs and Informal/Structured Debriefs

After an incident, there is usually a debrief at the scene (Hot Debrief) covering all aspects of the incident, including crew wellbeing. If the incident meets the criteria defined in policy as a critical incident, Fire Control will record the details and forward a referral to the CISM Coordination Team for action. There may be occasions when Fire Control will refer the incident with the potential for critical incident status.

Incident officers can ask for a CISM referral of any well-being needs identified during the incident or during the debrief.

On returning to the station, and depending on the nature of the incident, there may be further debriefs and discussions relating to the incident which may include crew welfare. An outcome of these discussions can result in a request for a CISM referral on the [Occupational Health & Wellbeing \(OH&W\) SharePoint site](#). Individuals are reminded that they can contact OH&W for individual support (self-referral) on any occasion of need.

Demobilisation (Rest, Information, Time Out)

Critical incidents may trigger a wide range of physical and psychological symptoms, including increased heart rate, high blood pressure and anxiety. Demobilisation (rest, information and time out) is a way of calming workers following a critical incident and ensuring that their immediate needs are met. A supervisor or manager who was not involved in the incident, or affected by it, carries out the demobilisation.

A demobilisation takes place before the end of a shift or before those involved in the incident disperse.

Strategies include:

- Summarise the incident, invite questions and discuss issues of concern.
- Show care and support, including the provision of Psychological First Aid, which may include some 'time out' from the rest of the crew.
- If appropriate, draw up a plan of action, taking into account the needs of the workers.
- Make short-term arrangements for work responsibilities if appropriate
- Offer information on debriefing and resources available through OH&W SharePoint site.

Debriefing (Group Peer Support)

The Critical Incident Debriefing Team is a group of HFRS volunteers specifically trained to conduct critical incident debriefs following the attendance of staff at a traumatic incident. All debriefers will have completed specialist training. A list of critical incident debriefers will be held by the Critical Incident Coordinator and Fire Control.

Critical Incident debriefing is effectively a structured meeting in a safe environment where the individual or the group who attended the incident will share their experiences and review the facts, feelings and reactions that they have experienced during or subsequent to an incident. It is not counselling nor is it a regurgitation of a hot debrief. Critical incident debriefing provides staff with a safe environment in which to talk. It is an aid to put events, thoughts, feelings and reactions in context.

Debriefing (group event support) is usually carried out within three to seven days of the critical incident, when people have had enough time to take in the experience (mental processing). It is a structured discussion aimed at putting an abnormal event into perspective. It offers workers clarity about the critical incident they have experienced and assists them to establish a process for recovery.

Trained debriefers help the staff to explore and understand a range of issues, including:

- The sequence of events
- The causes and consequences

- Each person's experience
- Any memories triggered by the incident
- Normal psychological reactions to critical incidents
- Methods to manage emotional responses resulting from a critical incident

8. PROCEDURE FOR CRITICAL INCIDENT DEBRIEFING

- Fire Control will be contacted by the Incident Commander who will declare a critical incident and will record this on the relevant incident log. If no incident log exists, then one will be created. After a critical incident has been declared, Fire Control will liaise with the CISM Team Coordinator who will contact the OiC to arrange the debriefing.
- Following the OIC submitting a CISM referral or an incident being logged being by control. The OIC will receive an email from a member of the CISM co-ordination team, offering support post incident. This will be via email offering CISM support to crews and making crews aware of wellbeing support options.
- Alternatively in the days following an incident the OiC, Crew Manager (CM) and Watch Manager (WM) can make a CISM referral ([Appendix A](#)) through the OH&W Portal. The CISM Coordinator will make the necessary arrangements for crew debriefing, following the support email process as per above.
- To meet individual needs, any person can make a Trauma Support Self-referral ([Appendix B](#)) through the OH&W portal if they feel that they are struggling to process an incident.
- Where it becomes apparent that an individual has attended three critical incidents in a six month period then the CISM Team Coordinator will contact the individual to ensure the welfare of the individual, arranging further support if deemed necessary. If a critical incident debrief is not required the CISM Team Coordinator will consider further interventions.

Where more than one station is involved in the incident then multiple defusing debriefing officers will be utilised to carry out CISM at each location. Following the declaration of a critical incident in the operational context, the Incident Commander should consider the validity of undertaking a hot debrief post-incident. By the nature of the incident there may be potential to provoke undue emotional stress in the immediate aftermath and therefore a hot debrief may be deferred due to sensitivities and arranged at an agreed date.

If a Critical Incident debrief is requested, the CISM Team Coordinator will arrange for a full incident debrief to be conducted. Once arrangements for the debrief are established, the CISM Team Coordinator will email Fire Control with the details of date/time and location. On completion of the debrief, the debriefing officer will complete the relevant electronic form as provided by the CISM Team Coordinator.

Fire Control or a Head of Function may request a critical incident debrief in the same way. The CISM Team Coordinator will arrange the date, time, venue and debriefers

for this and will aim to plan the debriefing within 5-10 days of the incident occurring, taking into account the practicalities of this regarding shift patterns and availability of relevant individuals.

The CISM Team Coordinator will:

- Provide details of the critical incident, together with a list of officers and appliances that attended the incident.
- Identify individuals who have attended the incident.
- Arrange a date, time and venue for the debriefing.
- Check that individuals are aware of the date and time of the debriefing.
- If known and relevant, inform the debriefers of the current status of the person(s) involved in the incident.

CISM Practitioners should allow approximately one hour for the debriefing but make themselves available at the end of the meeting to allow individuals to approach them with any further concerns.

CISM sessions should not consist of groups of more than six people. If the number is greater than six then either a second CISM session will be arranged on an alternative date, or an additional debriefing team will be sent to debrief the others. It is important that all possible disruptions during the meeting should be minimised. Therefore, when possible, the team should be taken off the run, and all mobile phones and pagers should be turned off.

Attendance/non attendees at the meeting will be recorded by the CISM Team Coordinator on the [CISM Debrief Contact Form](#) to ensure that all staff receive the necessary follow-up support from the Critical Incident Team / OH&W. Lists of attendees will remain within an occupational health database for monitoring, auditing and review purposes.

After a Critical Incident Hot Debrief has been conducted the CISM Practitioner will be contacted by the CISM Coordinator. FDS officers will also be contacted by the CISM Coordinator(s) to establish whether they need further support or indeed need debriefing themselves.

On completion of all electronic forms, attendance lists will be collated by the CISM coordinator.

CISM Taskings

Individuals who are attending CISM taskings as a co-ordinator or a practitioner whilst off duty can claim for their mileage using the casual car user form process. Individuals who are not on duty can also claim overtime whilst completing the CISM tasking. Overtime and Casual car user forms must be signed off by the individual's relevant chain of command. For any further information please contact the Wellbeing Manager.

CISM Team Coordinator

The Wellbeing Manager will act as the CISM Team Coordinator. OH&W will liaise with a nominated FDS Officer who will assist the coordinator as a point of contact and offer support for operational matters.

Confidentiality

Debriefing Officers will create a safe and confidential environment in which to undertake the process. However, it must be emphasised that confidentiality may be breached in circumstances where an individual is deemed to be a risk either to themselves or to other people.

Follow-up Support

Stress responses can develop over time and follow-up support may be required by some workers or groups. Perspectives may change after the first debriefing session and additional sessions may need to focus on new aspects of the incident or stress reactions.

It is also common for critical incidents to bring up a range of personal issues for workers. Short-term talking therapy may be required to prevent further difficulties. Where talking therapy sessions identify other or more complex needs, it may be important to refer a worker to an appropriate service for additional support.

At six weeks following attendance of a CISM Debrief, staff will be contacted on an individual basis to review their wellbeing. Further intervention support will be offered as necessary.

Where to get help:

- Your supervisor or manager
- Blue Light Champion
- Hub of Hope (national and local mental health support) Text HOPE to 85258
- [Individual Referral](#) through OH&W Portal
- Fire Fighters Charity
- Human Resources Manager or HRSP
- [Occupational Health & Wellbeing](#) (referral or resources on SharePoint portal)
- [CiC Employee Assistance](#)
- Your doctor

9. EMPLOYEES RESPONSIBILITIES

Whilst management has a responsibility for managing workplace pressures, individuals also have a duty of care to co-operate with their employer in minimising, so far as is reasonably practicable, work related stress. Any member of staff, who

**Occupational Health & Wellbeing
Critical Incident Stress Management Policy**

feels they are suffering from stress, identified from the Individual Stress Risk Assessment (ISRA Appendix F, Absence Management Policy) are encouraged to contact someone they feel comfortable with to discuss, which may include a colleague, manager, Blue Light Champion or respective Trade Union representative, with an aim of having an opportunity to resolve the problem.

If anyone requires any further information / guidance relating to this document please contact Occupational Health & Wellbeing

APPENDIX A: QR CODE FOR GROUP CISM SUPPORT

Critical Incident Stress Log



APPENDIX B: QR CODE FOR INDIVIDUAL CISM SUPPORT

Individual Support for Traumatic Incidents

