



PAM Assist Guide **Critical Incidents**

Some useful information that
you should know about managing the
impact of critical incidents at work

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the complete occupational health
and wellbeing provider



**PAM
Assist**

What is Critical Incident Stress Management?

Many people experience post-trauma symptoms after a critical incident, particularly for the first two weeks afterwards.

The reason is that it takes the brain roughly two weeks to start to process the information it has received in such an event.

Often we try to block the images and memories associated with the event when what we really NEED to do is talk about them.

Critical Incident Stress Management (CISM) is an effective debriefing procedure to help normalise the often overwhelming psychological, physiological and emotional responses to critical incidents.

We draw upon a longstanding and extensive experience of helping organisations and people impacted by traumatic events. Some of the events we have worked with have affected large numbers of people in companies and communities, such as terrorist attacks, pandemic concerns or environmental disasters; Others have been more localised, such as on-site fatalities, assaults when carrying out work duties, or employee suicide.

PAM Assist can offer a range of critical incident support services, including pre-incident support, acute crisis intervention and post-incident support. We have a robust process in place to manage high risk traumatic situations and critical incidents as well as day-to-day unexpected incidents, which is supported by an experienced UK and international network of specialist CISM personnel.

We recognise the impacts of critical incidents on employees' levels of distress and the impacts that it may have on being able to perform their role effectively or attend work. Our services are designed to enhance employees' natural resilience, and provide specialist support to minimise impacts of trauma and promote wellbeing and recovery.

Common reactions to trauma:

Events in life and at work affect different people in different ways. If an experience is difficult for someone, then they are worthy of support, no matter how others perceive the stressor. This could be a single, significant event or a build-up of events over time, and can have the effect of:

Intrusive thoughts: we might have images or videos of the event 'replaying' at different times in our head like when we're driving the car, or watching TV or sleeping.

Hypervigilance: we may become more edgy, nervous, irritable, or angry. Our startle response may increase

Avoidance: we may try and block the memories as they are unpleasant, or our alcohol consumption may increase, or we may try and avoid going to the scene

Low mood: we may feel guilty, or ask ourselves 'what if' we had done something different, we may feel low or tearful

The most important thing to remember is that these are **normal responses** within the first two weeks.

How we can help you

Services for coping with critical incidents

Our team of experienced trauma consultants, providing a comprehensive range of trauma response services for you to call on. Each of these are outlined in the below table.

Category	Help we provide
24/7 Telephone Support	As part of our standard telephonic EAP services, we offer immediate critical incident support via our trained in-house trauma practitioners. Managers with the authority to invoke critical incident support can access telephone support for immediate advice and recommendations regarding appropriate actions to support those affected.
On-site Support	Our extensive network of clinicians can be deployed to any location within 24 to 48 hours of an incident for on-site defusing and stress management. We provide a range of on-site critical incident services to support individuals and groups of employees. This includes a Critical Incident Stress Debriefing which is recommended to take place at least 72 hours after an incident occurring.
Aftercare	Specialist trauma focussed therapy can be provided by PAM (following an assessment) such as CBT and / or EMDR which is NICE Guideline recommended.

What is Critical Incident Stress Debriefing?

Critical Incident Stress Debriefing (CISD) is a specific, 7-phase, small group, supportive crisis intervention process. The CISD process is a supportive, crisis-focused discussion of a traumatic event combined with practical information to normalize group member reactions to a critical incident. A CISD attempts to enhance resistance to traumatic stress reactions, build resilience and facilitate both a recovery from traumatic stress and a return to normal, healthy functions.

Phases in the Critical Incident Stress Debriefing

Phase 1 – Introduction

In this phase, the team members introduce themselves and describe the process. They present guidelines for the conduct of the CISD and they motivate the participants to engage actively in the process. Participation in the discussion is voluntary and the team keeps the information discussed in the session confidential.

Phase 2 – Facts

The fact phase establishes a time line of events and allows the participants to begin to process what has happened and to listen to others' accounts. This has the effect of building a more complete picture of the event and enables the brain to start to place the incident in a time and space.

Phase 3 – Thoughts

The 'thought' phase allows the participants to start to explore their reactions to the event. A typical question addressed in this phase is "What was your first thought or your most prominent thought" Again we will go around the room to give everybody a chance to speak if they wish. If you do not wish to contribute something, you may remain silent. This will be the last time we go around the group.

Phase 4 – Reactions

The reaction phase is the heart of a Critical Incident Stress Debriefing. It focuses on the impact on the participants. A sense of anger, frustration, sadness, loss, confusion, and other emotions may emerge. The trigger question is "What is the very worst thing about this event for you personally?" The support team listens carefully and gently encourages group members to add something if they wish.

Phase 5 – Symptoms

Participants are asked "How has this experience shown up in your life?" or "What physical, emotional, or behavioural symptoms have you been dealing with since this event?" The CISM debriefing team will listen carefully for common symptoms associated with exposure to traumatic events. The CISM team will use the signs and symptoms presented by the participants as a starting point for the teaching phase.

Phase 6 – Teaching

The team conducting the Critical Incident Stress Debriefing normalizes the symptoms brought up by participants. They provide explanations of the participants' reactions and provide stress management information. Other pertinent topics may be addressed during the teaching phase as required. For instance, if the CISD was conducted because of a suicide of a colleague, the topic of suicide should be covered in the teaching phase.

Phase 7 – Re-entry

The participants may ask questions or make final statements. The CISD team summarizes what has been discussed in the CISD. Final explanations, information, action directives, guidance, and thoughts are presented to the group. Handouts may be distributed.

Follow-up

The Critical Incident Stress Debriefing is usually followed by refreshments to facilitate the beginning of follow-up services. The refreshments help to "anchor" the group while team members make contact with each of the participants. One-on-one sessions are frequent after the CISD ends.



Call PAM Assist in confidence on

0800 882 4102

PAM Assist is available to you 24/7 365 days a year for you to use as a SELF-REFERRAL service.

This means that:

- No reports go back to managers.
- You will speak to a fully qualified therapist or counsellor.

Contact us

Visit pamgroup.co.uk

Further information visit our website or contact us via one of the methods below:



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counselling@pamassist.co.uk



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