



CISM OVERVIEW: THE WHAT

Peer Support is a frontline service providing a safety net using all six core components of the ICISF model of CISM Peer Support.



This safety net can improve the system by increasing **resistance** to the psychological effects of trauma and **resiliency** by equipping personnel with the skills to rebound from these effects and restore adaptive functioning. More public safety personnel will remain healthy, resulting in a reduction of lost time. A case example of an established peer support program demonstrates the cost savings in the first year (SCES, 2017).

A CISM peer support program positioned on the full continuum of care, linked to other supports and services, ensures that multiple access points can meet needs. CISM can complement the different forms of support and resources offered within an organization. CISM can also be an effective conduit for facilitating referrals to continued care for some individuals who otherwise would never accept treatment (Parad & Parad, 1968; 2016). Peer support can address social isolation and break down the stigma that interferes with the **recovery** process (PSACC, 2016).

CISM is a term that refers to a comprehensive, integrative, strategic planning system complete with a multitude of crisis intervention tactics. A wide array of crisis intervention techniques assures that the continuum of supports will address and meet the needs of most public safety personnel and limit any “falling through the cracks.” Organizations can tailor a CISM Peer Support Program to provide acute crisis intervention with individuals, interventions with small groups of those directly affected, or interventions with large groups of those indirectly affected.

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Effective CISM systems require:

1. Delivery of **resiliency** training to proactively boost psychological immunity.
2. Ongoing **assessment**, surveillance, and psychological triage.
3. Ongoing **strategic planning**.
4. Proficiency using various interventions (**individual, informational groups, and interactive groups**).

Peers support a person in crisis as they search for their inner coping strategies through simple tasks, quick contacts, innovative techniques, practical suggestions, and comfortable environments. Peers provide **proximal** peer-to-peer interactions, the **immediacy** of access to supports, and the **expectancy** of reasonable positive outcomes (Everly & Mitchell, 2016).

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CISM OVERVIEW: THE HOW

CISM Peer Support is **Comprehensive**. It covers the entire scope of a psychological crisis from pre-incident education, during the time of impact, to post-incident intervention and education, to the recovery/referral process. CISM **Integrates** within the overall continuum of care. It is not a stand-alone program or resource but rather works in concert with other existing supports and resources. Interventions are integrated within one another and are not used as stand-alone techniques since they all build on one another. CISM is **Systematic**. Each intervention is phase-sensitive and works with the timing of the incident and the effects of the exposure. CISM is a **Multi-Component** (Components 1-6) approach. It involves surveillance and assessment techniques to inform the peer team what interventions may be useful for the peer group. Some interventions can reach individuals affected. Other interventions can reach larger mixed groups and other interventions that can cover smaller groups like teams, crews, platoons, or task forces.

1. Peers start with building **resistance** through pre-incident education. Peers teach their colleagues how to recognize the signs and symptoms of distress in themselves and each other—giving information about stress management and how to access external resources and services available to them through their departments and communities.
2. When their colleagues experience a critical incident, the first thing peers do in response is to use their **surveillance** skills to assess the critical incident's impact on those involved. We are looking for signs and symptoms of distress and any change in the individual or group's usual activities, performance, or communication.
3. Once we have made a full **assessment**, we can formulate a **strategic plan** using the **5 Ts: Theme, Target, Type, Timing, and Team**. The strategic plan will answer what, where, why, when, and how of crisis intervention tactics.
4. Most interventions we use in Peer Support are **individual interventions** such as the **SAFER-R**. We start with individual interventions to **immediately** support those showing signs of need and help us gain a better assessment of the level of **impact** the event has had on those involved. The ongoing assessment will inform peers on appropriate next steps. Maybe an **informational group intervention**, such as a **CMB**, is required to fill in the gaps of information about the incident and remind personnel how to recognize the signs and symptoms of stress and how to cope with that stress effectively. A CMB aims to control the spread of rumours and mitigate stress reactions. Peers would continue with more individual interventions and assess the need for an **interactive group intervention** such as a **Defusing** or **CISD** to reduce stress reactions and restore group cohesion of a team or unit.

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International Critical Incident Stress Foundation - Canada, Inc.

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Finally, peers **follow up** with everyone they provide interventions to and assess whether those individuals have **recovered** adaptive functioning or require a **referral** to formal mental health or other continued care services appropriate for their specific needs.

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Canadian Institute of Public Safety Research and Treatment (CIPSRT)

Canadian Institute for Public Safety Research and Treatment (CIPSRT) Blue Paper, 2016

- CIPSRT is Canada's leading unbiased experts in the field of Public Safety Research and Evidence-Based Treatments for Public Safety Personnel <http://cipsrt-icrtsp.ca>
- Read Full publication:
https://www.justiceandsafety.ca/rsu_docs/blue_paper_full_web_final_production_aug_16_2016.pdf
- Published in 2016: Recommendations to Federal Government to inform drafting of BILL C-211
 - Consistent, coordinated model of Peer Support.
 - Warns against variations to the model.
 - ICISF CISM contains the required recommended criteria that Psychosocial Support Programs for PSP should include.
 - Found that most department's that report using the ICISF CISM model do not include all 6 core components required of the CISM model.

CIPSRT's Mental Disorder's in PSP Prevalence Study, 2018

- Public Safety Personnel (PSP) are defined as those who work in a field that due to the nature of their operational duties are exposed to critical incidents on the daily in order to protect the safety of others (Carleton, 2018).
- PSP are at increased risk for developing a psychological injury due to the nature of the work they do
 - 44.5% meet criteria for one or more mental disorders (Carleton, 2018).
- **Read Full Publication:**
<https://journals.sagepub.com/doi/pdf/10.1177/0706743717723825>

CIPSRT's Suicide Behaviours in PSP Study, 2018

- PSP rates are 3 times the general population
 - Municipal/Provincial Police reported lowest lifetime suicidal planning
 - EMS reported highest overall lifetime suicidal behaviour.
 - **Read Full Publication:** <https://psycnet.apa.org/fulltext/2018-05339-001.pdf>

CIPSRT's 2019 Study: Mental health training, attitudes toward support, and screening positive for mental disorders

- PSP report their first line of support is their spouse.
- PSP report their second line of support is their friends and colleagues (peers).

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- PSP report to least likely, if ever, access support through leadership or professional support including mental health professionals and Employee Assistance Programs.
- Therefore, PSP programs that leverage the natural peer-to-peer relationships within PSP work environments is an approach that is most likely to be utilized by frontline personnel, supported by current research and result in best outcomes.
- Psychosocial support training programs may also increase PSP's willingness to access professional supports when appropriate to do so, including mental health professionals and Employee Assistance Programs.
- **Read Full Publication:**
<https://www.tandfonline.com/doi/full/10.1080/16506073.2019.1575900>

CIPSRT's 2022 Study: Assessing the Perceptions and Impact of Critical Incident Stress Management Peer Support among Firefighters and Paramedics in Canada

- PSP perceived CISM as offering valuable and beneficial tools such as developing skills and coping strategies.
- High fidelity CISM programs offer mental health benefits to individuals.
- Compared to the national average mental disorder prevalence rate of their cohort they are 10% less likely to screen positive for 1 or more mental health disorder.
- **Read Full Publication:** <https://www.mdpi.com/1660-4601/19/9/4976>

Support For Crisis Intervention as a Gold Standard

- Reduces the need for more intensive psychiatric services (Langsley et al., 1971; Decker & Stubblebine, 1972).
- Mitigates acute distress (Bordow & Porritt, 1979; Bunn & Clarke, 1979; Campfield & Hills, 2001; Everly & Mitchell, 1999; Flannery et al., 2007; United Nations, 2010).
- Reduces the surge in alcohol use post-crisis (Deahl et al., 2000; Boscarino et al., 2005).
- ASAP-CISM reduces violence in healthcare settings (Flannery, 2001, 2008).
- CISM found to be superior to psychotherapy post disaster (Boscarino, et al., 2005; 2011).
- Post-Disaster (9/11), CISM associated with reduced risk for alcohol dependence, anxiety disorders, major depression, PTSD symptoms (Boscarino, et al., 2005; Everly, et al., 2006).

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The International Critical Incident Stress Foundation (ICISF)

The International Critical Incident Stress Foundation (ICISF) is a not-for profit organization founded by two of the leading experts in Resiliency, Disaster Mental Health, and Crisis Intervention for Public Safety Personnel (PSP); Dr. Jeff T. Mitchell and Dr. George Everly (www.icisf.org), for which ICISF-Canada is the sole Canadian partner representing best practices in this model and developing regional peer support networks across Canada.

The ICISF is a certifying body for training PSP in evidence-informed interventions for supporting their PSP colleagues who may become psychologically impacted by the exposures to potentially psychologically traumatic events throughout their daily operational duties.

The type of crisis intervention that has been purported to be most effective for PSP is peer support. A recent study out of CIPSRT in 2019 revealed that PSP are most likely to access supports through their spouses and friends and least likely to access supports through leadership or Employee Assistance Programs (Carleton, et. al., 2019). By training frontline first responders on how to recognize the signs and symptoms of distress and what to do when they recognize these signs is the first step to equipping PSP with the tools to start preventing the life-altering effects that the nature of their work has on their lives. The model of peer support the Founders of ICISF have developed is called Critical Incident Stress Management (CISM) and has a track record of over 30 years, used world-wide for many public safety agencies, institutions, organizations, governmental departments, healthcare, and the UN even has their own department of CISM Peer Support.

ICISF-CISM Peer Support Training

ICISF CISM Peer Support Basic Training includes two courses and is the bare minimum requirements for any peer to be able to provide peer support services to their colleagues:

1. "Assisting Individuals in Crisis"
2. "Group Crisis Intervention"

Core Courses:

ASSISTING INDIVIDUALS IN CRISIS

COURSE DESCRIPTION:

Crisis Intervention is NOT psychotherapy; rather, it is a specialized acute emergency mental health intervention which requires specialized training. As physical first aid is to surgery, crisis intervention is to psychotherapy. Thus, crisis intervention is sometimes called "emotional first aid". This program is designed to teach participants the fundamentals of, and a specific protocol for, individual crisis intervention. This course is designed for anyone who desires to increase

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their knowledge of individual (one-on-one) crisis intervention techniques in the fields of Business & Industry, Crisis Intervention, Disaster Response, Education, Emergency Services, Employee Assistance, Healthcare, Homeland Security, Mental Health, Military, Spiritual Care, and Traumatic Stress.

PROGRAM HIGHLIGHTS:

- Psychological crisis and psychological crisis intervention
- Resistance, resiliency, and recovery continuum
- Critical incident stress management
- Evidence-based practice
- Basic crisis communication techniques
- Common psychological and behavioural crisis reactions
- Putative and empirically derived mechanisms
- SAFER-Revised Model
- Suicide Intervention
- Risks of iatrogenic “harm”

GROUP CRISIS INTERVENTION

COURSE DESCRIPTION:

Designed to present the core elements of a comprehensive, systematic and multi-component crisis intervention curriculum, the Group Crisis Intervention course will prepare participants to understand a wide range of crisis intervention services. Fundamentals of Critical Incident Stress Management (CISM) will be outlined, and participants will leave with the knowledge and tools to provide several group crisis interventions, especially Crisis Management Briefings (CMB), Rest Information Transition Services (RITS) for disaster response, as well as Defusings and Critical Incident Stress Debriefings (CISD). The need for appropriate follow-up services and referrals when necessary will also be discussed.

This course is designed for anyone in the fields of Business & Industry Crisis Intervention, Disaster Response, Education, Emergency Services, Employee Assistance, Healthcare, Homeland Security, Mental Health, Military, Spiritual Care, and Traumatic Stress.

PROGRAM HIGHLIGHTS:

- Relevant research findings
- Relevant recommendations for practice

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- Incident assessment
- Strategic intervention planning
- “Resistance, resilience, and recovery” continuum
- Large group crisis interventions
- Small group crisis interventions
- Adverse outcome associated with crisis intervention
- Reducing risks
- Critical Incident Stress Debriefing (CISD)

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