

- Person is Safe.
- No need for crisis professionals.
- Offer support, CR Supervisors, Peer Support Team, (Department Counselor, Member Services, EAP, or Counseling through insurance all resources are on Firestrong.org.
- Assign person to check in with this member before next shift.
- Remember you can use Supervisor Referral to aid in accountability for them to seek help.

8 Functions of Member Services Crisis Care

Listen, Refer, and Support (Call for help early before things get big)

Assume Command

- Point of contact.
- Listen & Support. Non-Judgmental.
- Define issue and problem.

START

- Start thinking will you need support
- Second person to assist you
- Do you need to take truck out of service.
- Bring others in before it gets big

Evaluation / Size up

- Evaluate:
 - Member Condition
 - History of Behavior
- Red Flags at home. (Divorce, substance use)
- Danger to Self or Danger to Others (DTS/DTO).
 - -Do they have a Plan?
- Can this be de-escalated
- What does your gut say?
- Can this person be left alone. If ,YES go up.
- If NO continue flow chart.
- For-Cause Drug Test?

Communications

- If this person can not be left alone.
- Initiate phone contact with professionals.
- Don't work alone.
- Be open and transparent with the member on your concerns.
- Call: Support Numbers in top left corner
- Convince them to stay with you.
- DO NOT LEAVE THIS PERSON ALONE.

Deployment

- If resources are coming let the person know the plan, as appropriate.
- Do they need hospitalization.
- See if they have a peer they would like to call for support.
- What support do they already have in their life; spouse, therapist.

Strategy

- Develop an action plan with member and professionals.
- Is this Offensive (Need to act fast) Crisis mobile teams/Rescue to get member to a facility.
- Is this defensive (slow down operations) Talk the person into going to the facility.

• Organize the plan into sections.

- Who is going to take the person.
- Who will contact Shift Command.
- Do you need a move up truck as the crew may need some time to get their heads straight.
- Do you need somebody for the crew.
 Let professional and personnel know

- Review and revise strategy as needed.
- Hand operations over to Member Services and or Personnel.
- They will revise and work with ongoing treatment of member including paperwork, remand, or Referral therapist Dept. Counselor and then Alternative Assignment as needed.
- Member Services/Personnel will provide continuity of care working with Dept. Counselor.
- They will keep appropriate persons involved of progress as needed until discharge of member back into field as they are determined fit for duty.

Organization / Sectors

Review Evaluate Revise

Termination / Transfer

Assume Command: Point of Contact

Evaluate: Member Condition

Are they a Danger to Themselves or Others (DTS/DTO)

If they are not DTS or DTO go over resources and phone numbers

Think about Supervisor Referral

Communication: If they are DTS or DTO call professionals **Deployment**: Bring in others to help you before it gets Big

Do Not Leave this Person alone

Strategy: Make a plan with Professionals on where the best place is to take this member

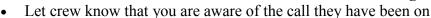
Organization / Sector: Who will transport the member, who will stay with the member?

Review, Evaluate, Revise: Member Services will continue with treatment and follow-up

Termination / Transfer: Members Services / Personnel will keep appropriate persons involved of progress and

"fit for duty" status





- Identify why you are calling. Ask them how they are doing. The biggest thing is to listen and let them tell you the story.
- Listen for information or cues on how they feel about what took place. If you sense anger or frustration at customer, parents, PD, hospital staff, or other members don't agree or disagree, just listen and tell them you hear and understand their frustration

High stress incident -HSI

- If you sense they are feeling good about how the call was handled, commend their actions if they were beneficial
- Try to ascertain if any of the crew members have personal circumstances that are similar to the HSI and remind them of FIRESTRONG.org to find resources and peers and/or advise them to go home.
- Tell crew that they know each other better than anyone and to look out for each other. If the call continues to carry with them in their thoughts, remind them to talk about it with other peers, trusted supervisors, family, and friends. Utilize FIRESTRONG.ORG for other helpful options. Emotions and stress are normal to experience in this type of job. Every call will affect everyone differently. It depends on what's going on in your life at this moment and what has gone on in your life prior to this moment.
- CR supervisors can assist in retrieving answers to questions crews may have about the incident by gathering info from CR crews that were on scene or PD detectives that worked the incidents. CR supervisors and member services staff available to have reach out respond and allocate peers for support services.
- It is normal to replay an incident over in your mind but if this starts to affect your ability to concentrate, sleep etc and is not diminishing over a couple of days then you should seek out the following resources. Once you reach out and talk through this incident or others that might be contributing to the reaction you will unload the stress. If you don't it will keep accumulating with each call or stressful situation you encounter at home or at work.

Physical distress: Headaches, Muscle spasms, Fatigue/exhaustion, Indigestion, nausea, vomiting

<u>Severe Physical distress:</u> Chest pain, Re-current headaches, Persistent Irregular heartbeats **Emotional distress:** Anxiety, Irritability, Anger, Mood swings, Depression, Grief

<u>Severe Emotional Distress:</u> Panic attacks, Overwhelming feelings, Persistent flat affect, Lack of emotional expression, Speaking in monotone voice, Absence or diminished facial expressions, Immobilizing depression

Behavioral Distress: Impulsiveness, Alcohol/Drug Use, Hyper startle, Sleep disturbance, Withdrawal, Family Discord

