

Indications for Support

Experienced Emergency Services Providers, Officers, and Command Staff recommend support services following these and other significant events.

- Line of Duty Death
- Line of Duty Injury
- Multi-Casualty Incident
- Use of Deadly Force
- Suicide of a First Responder
- Event Involving Children
- Knowing the Victim
- Excessive Media Interest
- Prolonged Incident
- Natural Disasters
- An Event That is Overwhelming From Any First Responder



Serving County Emergency Services Providers in the Counties of

Alleghany	Botetourt	Craig
Floyd	Franklin	Giles
Henry	Montgomery	Patrick
Pittsylvania	Pulaski	Roanoke

Serving Emergency Services Providers in the Cities of

Covington	Danville	Martinsville
Radford	Roanoke	Salem

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(24 hours a day)

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(click CISM)

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of Emergency Medical Services



SUPPORTING EMERGENCY SERVICES PROVIDERS



The Western Virginia Office of EMS (WVEMS) has specialized volunteer teams of trained dispatchers, firefighters, emergency medical technicians, medics, clinicians, and chaplains to support individuals or crews providing direct services in their communities. The purpose of this support is to minimize overwhelming reactions you may have to traumatic experiences. Our goal is to keep you safe physically, mentally, emotionally, and spiritually, so that you can return to your normal activities.

Emergency services personnel are special in many ways. You have special training and special equipment. In addition, you accept unique challenges, exposing yourself to situations that few people in non-emergency settings would even consider. It is not unusual for you to carry out extraordinary tasks that benefit the lives of your community members as well as others with whom you may come in direct contact. Yet, no matter how extraordinary your job is, how long it takes, or the number of people involved, you remain a normal human being. You are subject to the effects of exposure to excessive danger, destruction, and overwhelming human misery, grief, and death.



Services Provided

- Pre-incident Education/In-service including
 - Self-Care for the new EMT
 - Stress Management
- One-to-One Support for a peer in crisis
- Crisis Intervention including
 - Defusing: up to 12 hrs after an incident
 - Debriefing: 12-72 hrs post- incident
 - Crisis Management Briefing-also called a “Town Meeting” for entire crews or squads while an event is ongoing or after the event
- Rest-in-Transition Services for crews or units as they are demobilized
- Post Incident Follow-up
- Referrals to a higher level of care

Our CISM Team is trained in the International Critical Incident Stress Foundation’s (ICISF) Mitchell Model for crisis intervention. A peer, mental health provider, or chaplain may be called to assist you, based on your needs or the needs of your crew/unit.

We offer confidential, informal meetings on your turf. There are no cameras, notes, or records. Our members are covered under the Code of Virginia, Article 1 of Chapter 16 of Title 19.2-271.4. All responses are held in confidence unless a responder indicates harm to self or others.

The CISM meeting is not an investigation, operational debriefing, or after-action report. Your emotional well-being is important to us. We try to provide you with a safe, structured environment to discuss the incident. Talking about it with others who were on scene often helps you to release stress, restore your confidence and recover your emotional health. We like to refer to our services as helping you get back to a “new normal.”

Signs of Stress Reactions

- **Physical**-chills, fatigue and exhaustion, nausea, twitches, vomiting, headaches, grinding teeth, profuse sweating and/or difficulty breathing
- **Emotional**- crying or fearfulness, feeling numb, intensified or unfamiliar feelings, guilt, grief, panic, denial, anxiety, agitation, irritability, intense anger, emotional outbursts, overwhelmed feelings and/or emotional response
- **Behavioral**- withdrawal at work or home, inability to rest, change in social activity, change in speech patterns, loss or increase in appetite, increased alcohol consumption, change in social activity, intensified pacing, change in sleep patterns, fear of being alone in the dark; arguing or disobeying rules
- **Cognitive**- confusion, nightmares, uncertainty, hyper vigilance, suspiciousness, intrusive images, blaming someone, difficulty problem solving, poor concentration, disorientation and/or poor memory
- **Spiritual** – questioning “why,” change in beliefs about God or higher power, change in attendance at services or religious activities

These reactions are common among emergency services personnel and may occur immediately, or days after the incident. The important part to remember is that these are reactions you might expect. You may also experience other reactions not listed. If they continue after a period of four-six weeks, consider talking with a trained CISM peer about your reactions. Help is available.