

SUBJECT: TRAUMA RESPONSE IN THE WORKPLACE

Background: The City of Madison is committed to carrying out a diverse range of complex programs, policies, and missions. Our employees are our most valuable resource in fulfilling these responsibilities. We recognize that employees may be exposed to events that are outside their regular duties or functions that can have the potential to be markedly distressing.

Policy: The City of Madison is dedicated to maintaining and promoting an Employee Assistance Program (EAP) that provides trauma-informed support and referrals to resources aimed at enhancing employee well-being. In line with this commitment, the City offers access to critical incident stress management services or also known as trauma response services, ensuring that employees impacted by traumatic events receive compassionate care, guidance, and the resources they need to heal and thrive.

Guidelines: The City of Madison utilizes the services of trained and experienced Trauma providers for individual and group CISM/Trauma response.

Definitions:

Assessment - A review of the circumstances of a critical incident, employee involvement and subsequent support needs to determine appropriate response and follow-up.

Defusing - An initial small group or individual response to a critical incident that is often conducted within 12 hours of a crisis event by the CISM/Trauma Provider. Defusing is designed to provide an initial forum for ventilation, support and information exchange. It provides an opportunity for assessment and is sometimes followed by a Critical Incident Stress Debriefing.

Debriefing (CISD) - A structured, group crisis intervention facilitated by the CISM/Trauma Provider to facilitate psychological closure and reconstruction. It is a group discussion where participants are encouraged, but not required, to discuss the critical incident and their reactions to the incident. Suggestions are provided for coping and stress management.

CISM/Trauma Provider - A select group of mental health professionals that are contracted with to provide Trauma Response services in connection to critical incidents. These services may include, but not be limited to, assessment, defusing, debriefing, follow up and outreach to affected family members/significant others in the employee's household.

Definition of a Critical Incident:

A critical incident is a situation experienced by a person that may cause them to experience unusually strong emotional reactions that have the potential to interfere with ability to function during the incident, immediately following the incident or later. A situation does not have to be a major disaster to be classified as a critical incident.

The following are examples of critical incidents:

1. Serious injury or death of a member(s) of the public while the employee(s) is performing regular duties or functions. Special attention should be given to incidents that involve a child(ren), a family member, friend, neighbor, or where an association to these can occur.

2. Serious injury or death of an employee(s) on or off duty.
3. The suicide or homicide of an employee.
4. An event associated with prolonged and extraordinary input in rescue efforts.
5. Any incident that could be considered a serious physical or psychological threat to an employee while on duty.
6. Any incident in which there is unusual media coverage.
7. A series of incidents that may have cumulative effects.
8. Any abnormal event in which circumstances are so unusual or so distressing as to produce immediate or delayed emotional reactions that surpass normal coping mechanisms.

Characteristic symptoms following a Critical Incident may include:

1. Being unable to talk about the event and the feelings associated with it.
2. Feeling detached and withdrawn - keeping emotional distance from family and friends.
3. Avoiding recreational or work activities that are reminders of the incident.
4. Experiencing recurring and intruding memories and feelings about the incident. This may occur during sleep.
5. Feeling preoccupied and experiencing impaired memory and concentration, and having difficulty completing tasks.
6. Feeling hyper-alert, startling easily, having difficulty sleeping.

While the symptoms described above may be associated with various emotional challenges, experiencing them after a psychologically traumatic event is a common and normal response. However, if these symptoms persist for several weeks, it is important for the individual to seek assessment from a mental health professional to ensure they receive the appropriate care and support.

Goal of Debriefing:

A debriefing is not a counseling or therapy session but rather, it is a session in which the normal recovery process to abnormal events is facilitated or supported through individual or group processes. The process in which individuals, who have been exposed to an abnormal event, share their experiences has generally been found to be helpful. Myths or attitudes that individuals should be able to "tough it out" have been found to be less helpful and are more likely to lead to abnormal responses or prolonged recovery to such events.

A debriefing may involve a one-on-one contact between an employee and the Debriefing, a group of employees similarly involved from the same City department and the Debriefing, or a group of employees from several City departments, and possibly outside agencies when several employees are involved in the same incident.

The determination of what constitutes a critical incident may be made by the CISM/Trauma Provider, EAP staff and the department supervisor or designated department contact person who has direct knowledge about the event. Number of people involved, level of involvement, duration, intensity, degree, suddenness of event, level of loss, and injuries or death are all factors to be considered.

It should be noted that the decision to provide a debriefing is based on the event, not on the perceived ability or inability of those involved in the incident to cope. The referral of an employee(s) to a debriefing is in no way a judgment of that individual's ability to cope with the incident. Referrals are made for all individuals known to be involved in the event regardless of individual responses to the event.

Critical incident debriefings usually occur between 24-72 hours of the critical incident but this timeframe is flexible based in the incident and the needs of the involved parties.

Importance of response:

It is important that all departments respond to a critical incident and that employees involved in the incident receive the referral or offer of these services in a timely manner. The number one factor in an employee's ability to recover from a critical incident is the amount of support that they perceive from the organization. When an employee believes they have experienced a critical incident for which no referral or offer of services has been made, they may request services through their supervisor, or the Employee Assistance Program (both internal and external).

Referral Procedures

The referral procedures are as follows:

Any employee who has direct involvement in or knowledge of an incident and feels that a response would be helpful may contact a supervisor, a designated department contact person or the internal or external Employee Assistance Program to request CISM/Trauma services. An assessment will then be made to determine an appropriate response. The response will be coordinated by the following: the CISM/Trauma provider, EAP Staff and the affected department(s).

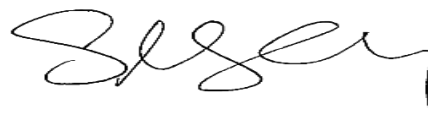
Follow-up: Follow-up contact or referral to other appropriate services will be provided by EAP staff or the CISM/Trauma Provider.

Pay Status: Attendance at a defusing or debriefing will be in pay status.

Confidentiality: All individual referrals and the content of a defusing or debriefing session shall remain strictly confidential. The only exception is when, under extraordinary circumstances, an employee is believed to be an imminent threat to the safety of themselves or others. Occurrence of a debriefing session, session content or mention of any of the participants to anyone outside of the session is prohibited. No report will be made to management and no formal documentation will be maintained. Individuals are free to discuss the event and their own feelings with others, but there shall be no discussion of the defusing/debriefing with anyone not in attendance.

Training: Training will be provided for all management, supervisory and lead worker personnel, designated department personnel in recognizing critical incidents, the policies and procedures for critical incident response and providing support to affected employees.

Note: Recognizing that critical incidents are frequently unique to and occur within different occupational work environments and that contact persons and procedural approaches to accessing services will vary, departments may, consistent with overall City policy, choose to develop separate departmental procedures to implement this policy.

A handwritten signature in black ink, appearing to read 'Satya Rhodes-Conway'.

Satya Rhodes-Conway
Mayor

Original APM dated 6/8/1994

(Revised 5/24/2019, 5/30/1997, 4/11/2008, 10/12/2016)

NOTE: This APM was previously titled "Critical Incident Stress Management (CISM)"