



CISM OVERVIEW: THE HOW

CISM Peer Support is Comprehensive in that it covers the entire scope of a critical incident and a psychological crisis, from pre-incident education before impact occurs to during a time of impact and post-incident intervention to the recovery/referral process. CISM is Integrated in that these interventions are not stand-alone techniques but build upon one another. CISM is Systematic in that the interventions are phase-sensitive and work with the timing of the incident and the effects of the exposure. CISM is a Multi-Component (Components 1-6) approach involving interventions for individuals, other interventions for large mixed groups and other interventions for smaller groups like teams, crews or units.

1. We start with building resistance through pre-incident education, teaching personnel to recognize the signs and symptoms of stress, the scientific strategies for coping and how to access external resources and services available through the organization and local communities.
2. The first thing we do when personnel experience a critical incident is to use our surveillance skills to assess the impact the critical incident has on those involved. Peers look for signs and symptoms of distress and dysfunction and any change in cohesion, performance, or communication.
3. Once peers make a full assessment, they formulate a strategic plan using the 5 Ts: Theme, Target, Type, Timing, and Team, which will answer crisis intervention tactics' what, where, why, when, and how.
4. Most frequent interventions in Peer Support are Individual interventions such as the SAFER-R. We often start with individual interventions to immediately provide support to those showing signs of need and help us better assess the level of impact the event has had on those involved by providing information that will help us determine the appropriate next steps.
5. For example, an informational group process, such as a CMB, may help fill in the gaps in factual information about the incident. Peers remind personnel to recognize the signs and symptoms of stress and implement a stress management plan. CMBs control the spread of rumours and mitigate stress reactions. Afterwards, we would continue with individual interventions and assess the need for an interactive group intervention, such as a defusing or CISD, to mitigate stress reactions and restore the group to cohesive functioning.
6. Finally, we would follow up with those we provided interventions and assess whether they have returned to adaptive functioning or require a referral to formal mental health or other external support services appropriate for their needs.