

Critical Incident Stress Debriefing Information Sheet

Definition: Critical incident

Critical incident is most often used to describe a potentially psychologically traumatic event experienced by public safety personnel (PSP) that evokes strong emotional reactions. This may occur when a person is overwhelmed by the scope, severity, personal connection to, or degree of exposure to an event. The term is often used interchangeably with potentially psychologically traumatic event (PPTE) / psychologically traumatic stressor (PTS) / traumatic event / traumatic injury.1

Description: Critical Incident Stress Management (CISM)/Debriefing (CISD)

CISM is a highly structured, professionally recognized intervention protocol implemented immediately after a critical incident as psychological first aid and may include CISD to facilitate the sharing of experiences, emotions, learning, and identification of symptoms requiring further treatment. 2

Events that may require CISD can include:

- Line of Duty Deaths
- Serious Line of Duty injuries
- Suicide
- Disasters
- Child mortality
- Significant events where the victims are relatives or friends of personnel
- Events that attract excessive media attention
- Events that seriously threaten the lives of personnel
- Any event that has significant emotional power to overwhelm usual coping mechanisms³

Defusing - a 3-phase, structured small group discussion provided within hours of a crisis for purposes of assessment, triaging, and acute symptom mitigation.⁴ These phases are often active and loosely guided by a peer or mental health professional and followed by an assessment of the need for CISD.3

Debriefing - a very structured and active 7-phase group discussion of the critical incident, reactions, and coping strategies, guided by a trained leader or mental health professional. Followed by closure, or the assessment of individuals who might need referral for additional support. Common ground rules include voluntary participation, no note taking or recording devices, not used as an operational critique or investigation of events, and not a "blame" session. ³





CISD seven-step model 3,5

7-Step Critical Incident Stress Debrief Process

- **Introduction:** Setting the stage and explaining the process.
 - Fact Phase: Discussing the facts of the incident and assessing the impacts.
 - Thought Phase: Sharing initial thoughts about the incident and identifying any immediate safety issues.
 - **Reaction Phase:** Exploring emotional reactions and providing validation of reactions.
 - **Symptom Phase:** Identifying stress symptoms including any emotional, cognitive, and physical impacts and assessing for maladaptive behavioural responses.
 - **Advising Phase:** Providing information on stress responses and coping mechanisms and connections to community and mental health resources as needed.
 - Re-entry Phase: Summarizing and closing the session.

Summary: Current literature on CISD

- CISD protocols are common in public safety organizations and usually take place within a group setting ⁶. Trained facilitators provide support to workers to help process stressful or traumatic events after they occur 7.
- While there is supportive evidence for the effectiveness of CISD and psychological first aid, there are mixed results for CISD. Some CISD evaluations found positive outcomes 8-10, while others conclude unsustained, negative or no effects 6,11.
- Formalized approaches such as CISD and Trauma Risk Management (TRIM) may be more effective due to the focus on stigma reduction and embedded support from management within the program framework ⁶.
- For some individuals, participating in CISD immediately following a critical incident has the potential to worsen psychological outcomes by increasing levels of distress and interfering with normal coping responses, as such, impeding the potential for posttraumatic growth ¹².
- The amount of quality outcome intervention studies examining CISD studies is too insufficient to inform decisive recommendations 11,13.





Key Recommendations: Given the mixed data on CISD interventions, public safety organizations should be cautious or refrain from mandating employee participation, continuously evaluate CISM program effects and keep up to date with current research on CISM best practices.

References

- 1. Heber A, Testa V, Groll D, et al. Glossary of terms: A shared understanding of the common terms used to describe psychological trauma, version 3.0. Health Promot Chronic Dis Prev Can. 2023;43(10-11):S1— S999. doi:10.24095/hpcdp.43.10/11.09
- 2. Canadian Institute for Public Safety Research and Treatment. A Mental Health Programming Framework for Public Safety Personnel. Final Report to Ontario Ministry of Solicitor General; 2023.
- 3. New Zealand Search and Rescue. Critical Incident Stress Debriefing. Available at: https://nzsar.govt.nz/assets/Downloadable-Files/Critical-Incident-Stress-Debriefing.pdf
- A Primer on Critical Incident Stress Management (CISM). International Critical Incident Stress 4. Foundation. Accessed September 10, 2024. https://icisf.org/a-primer-on-critical-incident-stressmanagement-cism/.
- 5. Davis JA. Providing Critical Incident Stress Debriefing (CISD) to Individuals and Communities in Situational Crisis. American Academy of Experts in Traumatic Stress. 1998. Available from: http://www.aaets.org/article54.htm.
- 6. Richins MT, Gauntlett L, Tehrani N, et al. Early Post-trauma Interventions in Organizations: A Scoping Review. Front Psychol. 2020;11. doi:10.3389/fpsyg.2020.01176
- 7. Jones S, Agud K, McSweeney J. Barriers and Facilitators to Seeking Mental Health Care Among First Responders: "Removing the Darkness." J Am Psychiatr Nurses Assoc. 2020;26(1):43-54. doi:10.1177/1078390319871997
- 8. Antony J, Brar R, Khan PA, et al. Interventions for the prevention and management of occupational stress injury in first responders: A rapid overview of reviews. Syst Rev. 2020;9(1). doi:10.1186/s13643-020-01367-w
- 9. Bahji A, Di Nota PM, Groll D, Carleton RN, Anderson GS. Psychological interventions for post-traumatic stress injuries among public safety personnel: a systematic review and meta-analysis. Syst Rev. 2022;11(1). doi:10.1186/s13643-022-02112-1
- 10. Claringbold G, Robinson N, Anglim J, Kavadas V, Walker A, Forsyth L. A systematic review of well-being interventions and initiatives for Australian and New Zealand emergency service workers. Aust J Psychol. 2022;74. https://api.semanticscholar.org/CorpusID:252974484
- 11. Anderson GS, Di Nota PM, Groll D, Carleton RN. Peer support and crisis-focused psychological interventions designed to mitigate post-traumatic stress injuries among public safety and frontline healthcare personnel: A systematic review. Int J Environ Res Public Health. 2020;17(20):1-20. doi:10.3390/ijerph17207645
- 12. Sutton A, Polaschek DLL. Evaluating Return-to-Work Programmes after Critical Incidents: a Review of the Evidence. J Police Crim Psychol. 2022;37(3):726-735. doi:10.1007/s11896-022-09536-4
- 13. Corthésy-Blondin L, Genest C, Dargis L, Bardon C, Mishara BL. Reducing the impacts of exposure to potentially traumatic events on the mental health of public safety personnel: A rapid systematic scoping review. *Psychol Serv*. Published online 2022. doi:10.1037/ser0000572

