This document contains information relative to the Incident Command System (ICS) component of the National Incident Management System (NIMS). This is the same Incident Command System developed by FIRESCOPE. Additional information and documentation can be obtained from the following source:

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INTRODUCTION

The Critical Incident Peer Support Team (CIPS) is a team of highly respected, trusted, and qualified personnel assigned to a significant All-Hazard incident to support the mental health and welfare of the first responder’s engaged on the incident. This team is ordered by the Incident Commander (IC) or Incident Management Team (IMT) and reports directly to the Liaison Officer (LOFR) or the Incident Commander at the IC’s discretion. Team members are assembled at the time of request and shall be composed of qualified personnel to match the type of critical incident. A CIPS team consists of a Critical Incident Stress Lead (CISL), Critical Incident Stress Management (CISM) members, and Critical Incident Clinician (CICL). The CISL will assess the need for and reporting time necessary for the CICL and may or may not have Critical Incident Stress Chaplain(s) (CISC) or Critical Incident Stress K9(s) (CISK) as part of the team. This team may consist of qualified personnel from other agencies. CIPS is based on the idea of people helping people, with the same or similar commonalities (firefighters helping firefighters) and is built on trust, respect, and mutual understanding. CIPS personnel assist individuals by way of listening and discussing their reactions and concerns during or after a critical incident. CIPS then refers them to the appropriate level of continuing care. A CICL shall be part of those discussions as an initially higher level of care, on or after the incident. CIPS is not psychotherapy or counseling but stabilization. CIPS is not a tool to critique or investigate a traumatic event.
MODULAR DEVELOPMENT

Initial Response Organization:

The Incident Commander(s) (IC) manages all initial response resources as well as all Command and General Staff Responsibilities. A possibility, concern, specific event, or policy may indicate the need for a Critical Incident Peer Support Team (CIPS) notification or activation based on incident circumstances. (CIPS) notification may be limited to notification or activation of an agency’s team based on the incident or future needs of agencies involved. Critical Incident Stress Lead (CISL) or a designee Critical Incident Stress Management (CISM) member shall contact the Liaison Officer, or the IC if a Liaison Officer is not assigned, to determine the needs at a minimum and what type of activation is warranted. A CIPS team follow up may be warranted and or Critical Incident Clinician (CICL) referral as needed. When a Critical Incident Peer Support Team is established, the Liaison Officer or the IC shall assure that CIPS Team information be listed in the Incident Action Plan.

Initial Response Organization Chart

```
Incident Commander (IC)

Critical Incident Peer Support (CIPS)
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Reinforced Response Organization:

In addition to the initial response, the responsible agencies have met and established a Unified Command. They have established a Critical Incident Peer Support Team (CIPS) with a Critical Incident Peer Support Lead (CISL) to manage all behavioral health activities based on the incident and future needs. The (CISL) reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion. Critical Incident Stress Management (CISM) positions are filled based on incident needs and future needs. Activation for a Critical Incident Clinician (CICL) is based on the incident and future requirements, if not part of the CIPS team. Additional expertise such as Critical Incident Stress Chaplain(s) (CISC) or Critical Incident Stress K9(s) (CISK) teams are considered for the incident and future needs. (CIPS) team and or (CICL) follow up after the incident may be required based on the needs of individuals due to the incident complexity.

Reinforced Response Organizational Chart
Multi Division/Group Response Organization:

The Incident Commanders (IC) have activated multiple divisions/groups. The incident has assigned an incident Critical Incident Stress Lead (CISL) managing multiple Critical Incident Peer Support Teams (CIPS). The (CICL) reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion. Each (CIPS) may have an assistant (CISL) position for that team. Critical Incident Stress Management (CISM) positions are filled to meet the needs and duration of the incident. Critical Incident Clinician (CICL) or multiple clinicians are utilized based on incident complexity and duration. Critical Incident Stress Chaplain(s) (CISC) and Critical Incident Stress K9(s) (CISK) teams are utilized based on incident needs and complexity. The incident shall consider the long-term needs of incident individuals, due to the incident complexity and duration.

Multi Division/Group Organizational Chart
**Multi-Branch Response Organization:**

The Incident Commander(s) (IC) has activated multiple branches. This organization Chart reflects the possibility to use of Multiple CIPS Teams in various functional or geographic areas of an incident. The incident has an incident Critical Incident Stress Lead (CISL) managing multiple Critical Incident Peer Support Teams (CIPS). The (CICL) reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion. Each (CIPS) has an assistant (CISL) position for that individual (CIPS) team. Critical Incident Stress Management (CISM) positions are filled to meet the needs and duration of the incident. Multiple Critical Incident Clinician(s) (CICL) are utilized based on incident complexity and duration. Critical Incident Stress Chaplain(s) (CISC) and Critical Incident Stress K9(s) (CISK) are utilized based on incident needs and complexity. The incident shall consider long-term needs of incident individuals, due to the incident complexity and duration.

![Multi Branch Organizational Chart](chart.png)
CRITICAL INCIDENT PEER SUPPORT TEAM (CIPS)

Critical Incident Peer Support Team (CIPS) is a team of qualified people that are assembled to assist first responders after a critical incident. The CIPS Critical Incident Stress Lead (CISL) reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion. The CIPS team is organized to meet the specific needs of the incident. A CIPS team consists of a Critical Incident Stress Lead (CISL), Critical Incident Stress Management (CISM) members, Critical Incident Clinician(s) (CICL), Critical Incident Stress Chaplain(s) (CISC) and Critical Incident Stress Canine team(s) (CISK). A CIPS team can expand and contract as necessary, depending on the incident dynamics. A CIPS team must have, at the minimum, a qualified CISL, and a qualified CISM. CICL position shall be filled if any form of debriefings are utilized and if a CICL, a higher level of care, is warranted. Chaplains (CISC) are utilized if a faith-based response is requested. Some CISC who are also qualified CISM members can fill those roles as necessary. Crisis Incident Stress K9 (CISK) teams are a valuable tool if utilized based on incident current and or future needs.

CHECKLIST USE: The checklist presented below is considered a minimum requirement for this position. Users of this manual may augment this list as necessary.

A. Review Common Responsibilities (pages 1-2)
B. The Incident Commander recognizes the need or potential need for a CIPS team notification or activation based on:
   a. Type of call
   b. The potential impact on first responders (now and future impact potential)
   c. Significant event
   d. Any other example that the Incident Commander feels is necessary to warrant the need for a CIPS team
C. Reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion on the behavioral health expectations/needs. This shall be performed by the CIPS Critical Incident Stress Lead (CISL).
D. Locate or designate an area away from the incident that can be utilized for incident personnel. Basic comfort needs should be met initially. Food, water, a place to decompress, etc. Utilization of a space that would allow individuals to speak privately with CIPS members if needed. Somewhere that is away from the scene and that the individuals can let their guard down and feel secure if needed.
E. Team members, once requested, shall communicate with the CISL on their time frames. Logistical considerations should be considered based on the team member’s response times.
F. Ensure that both the incident and group objectives are identified and understood.
G. CIPS members work together as a team to meet the Incident Commander and team expectations set forth.
H. Effectively communicates with individuals seeking help, with team members and adjoining forces on the incident.
I. Provides active listening skills to individuals and maintains a safe environment as needed to those they are helping.
J. Develops an action plan for those who require one for their care.
K. Discusses and assists individuals with the implementation of action plans as needed.
L. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).
M. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident and with follow up.
N. Develop a plan to provide confidential follow up with individuals for any future behavioral health needs.
O. Have the knowledge to participate in the following:
   a. Defusing. Assisting or leading a defusing.
   b. Debriefing. Assist or leading a Debriefing.
   c. Any other task that requires behavioral health assistance, either assisting or leading.

P. Team members will be able to recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for the team member, the individuals, and others.
Q. Organize and support assigned resources CICL(s), CISC(s), CISK(s) teams.
R. Provide situational awareness and safety as a team for non-fire personnel as needed.
S. Coordinate activities with adjacent team members as needed — review assignments with additional teams for coordination of efforts and any additional needs required.
T. Be able to properly document daily activities on the ICS-214 to the lead regarding contacts made and report any additional needs on the ICS-213.
U. Maintain radio communications with Division/Group Supervisors when in the field, traveling in and out of divisions.
V. All media contacts must be made through coordination between the CISL and Public Information Officer (PIO).
W. Act in a professional manner as an Agency Representative.
X. Utilize proper demobilization procedures for team members when transitioning from the incident.
Y. Maintains all qualifications and certifications as required for the position.
Z. Follow all required policies and directives as applicable.
AA. Follow all state and federal behavioral health laws as applicable.

CRITICAL INCIDENT STRESS LEAD (CISL)

Critical Incident Stress Lead (CISL) reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion. The CISL is the lead for the Critical Incident Peer Support Group (CIPS). The CISL is responsible for the implementation of all information in the Incident Action Plan dealing with behavioral health. The CISL is responsible for the assignment of resources within the CIPS Team, reporting on the progress of CIPS operations and the status of resources within the team(s).
The CISL directs the overall operations of the Critical Incident Peer Support Team. A CISL task book will be developed for future implementation.

CHECKLIST USE: The checklist presented below is considered a minimum requirement for this position. Users of this manual may augment this list as necessary.

A. Review Common Responsibilities (Page 1-2).
B. Reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion on the incident’s behavioral health expectations/needs.
C. Order required personnel for the incident based on current and anticipated needs.
D. Identify personnel and specialty types needed for the incident and duration of the incident. Determine staffing needs after the Operational phase of the incident.
E. Utilization of Critical Incident Clinician(s) (CICL) as required for higher behavioral health care stabilization as needed.
F. Establish a work location that has adequate space for the team and a space to ensure confidentiality as needed.
G. Ensure that both the incident and group objectives are identified and understood.
I. Utilize standard and best practices care for the incident needs.
J. Provide active listening skills to individuals and maintain a safe environment as needed to those being assisted.
K. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).
L. Maintain transparency with individuals and groups seeking behavioral health assistance during and following the incident.
M. Develop a plan to provide confidential follow up with individuals for any future behavioral health needs.
N. Have the knowledge and ability to lead in the following:
   a. Defusing. Assisting or leading a defusing.
   b. Crisis Management Briefing. Assisting or leading a Crisis Management briefing.
   c. Debriefing. Assist or leading a Debriefing.
   d. Any other task that requires behavioral health assistance, either assisting or leading.
O. Recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for the team member, the individuals, and others.
P. Supervise Critical Incident Peer Support Team(s) (CIPS) during the incident.
Q. Ensure an individual's confidentiality is adhered to during incidents and during follow-up care as needed.
R. Ensure proper span of control.
S. Ensure the CIPS team works in pairs and has at least one member qualified as a CISM.
T. Ensure the development and implementation of the Behavioral Health page(s) for
the Incident Action Plan and coordinate with the Medical Group Leader (MEDL)
to include information on the Medical Plan ICS 206.
U. Attend meetings and briefings as required. Anticipate speaking at morning
Operational Briefings.
V. Be able to provide daily logs to the lead regarding contacts made and report any
additional needs.
W. Prepare an after-action summary of all contacts and general actions on the
incident and consider additional needs that may arise after the incident.
X. Prepare evaluations for CIPS members as needed.
  In coordination with the PIO, act as team lead for media relations as needed.
  Ensure incident and agency policies are adhered to, and that team members are
  aware of policies, procedures, and directions.
Y. Provide a CIPS team debriefing before demobilization or as needed due to
incident complexity and or duration. Utilize a CICL(s) as needed.
Z. Utilize proper demobilization procedures for team members when transitioning
from the incident.
AA. Maintain all qualifications and certifications as required for the position.
BB. Follow all required policies and directives as applicable.
CC. Follow all state and federal behavioral health laws as applicable.

CRITICAL INCIDENT STRESS MANAGEMENT (CISM)

Critical Incident Stress Management (CISM) members report to the Critical Incident
Stress Team Lead (CISL). CISM members are part of the Critical Incident Peer Support
Team (CIPS). The CISM members are responsible for the operational aspects of the
CIPS team on the incident. This position should work in pairs with another CISM, CISC,
CISK team, or a CISL. At least one member of a two-person team shall be qualified.
CISM should never be used as a replacement for a professional behavioral health
clinician. The primary focus of CISM is based on listening, assessing, stabilization of
individual(s), and referrals to incident clinicians or agency procedures for behavioral
health. A CISM task book will be developed for future implementation.

CHECKLIST USE: The checklist presented below is a minimum requirement for this
position. Users of this manual may augment this list as necessary.

A. Review Common Responsibilities (Page 1-2)
B. Works as a member of the Critical Incident Peer Support Team (CIPS)
C. Provide active listening skills to individuals and maintain a safe environment as
   needed to those they are helping.
D. Utilization of Critical Incident Clinician (CICL) as required for higher behavioral
   health care stabilization as needed.
E. Effectively communicates with individuals seeking help, with team members
   and adjoining forces on the incident.
F. Develop an action plan for those who require one for their care.
G. Discuss and assist individuals with the implementation of action plans as
   needed.
H. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).

I. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident and with follow up.

J. Develop a plan to provide confidential follow up with individuals for any future behavioral health needs.

K. Maintain the knowledge to participate in the following:
   a. Defusing. Assisting or leading a defusing.
   b. Crisis Management Briefing. Assisting or leading a Crisis Management briefing.
   c. Debriefing. Assist or leading a Debriefing.
   d. Any other task that requires behavioral health assistance, either assisting or leading.

L. Recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for the team members, the individuals, and others.

M. Organize and support assigned resources (CICL(s), CISC(s), CISK(s) teams.

N. Work as a team member in pairs. One member must be CISM qualified.

O. Provide situational awareness and safety as a team for non-fire personnel as needed.

P. Coordinate activities with adjacent team members as needed — review assignments with the additional team for coordination of efforts and any additional needs required.

Q. Communicate with the Critical Incident Stress Lead (CISL) or designee while in the field or after completing a task. Provide daily generic contact information to the lead at the end of each day and any additional needs that may be required.

R. Maintain radio communications with Division/Group Supervisors when in the field, traveling in and out of divisions.

S. Provide the point of contact information for any media related questions (Incident PIO) and be familiar with media policy, team lead, or incident direction.

T. Act in a professional manner as an Agency representative

U. Utilize proper demobilization procedures for team members when transitioning from the incident.

V. Maintain all qualifications and certifications as required for the position.

W. Follow all required policies and directives as applicable.

X. Follow all state and federal behavioral health laws as applicable.

**CRITICAL INCIDENT CLINICIAN (CICL)**

Critical Incident Clinician (CICL) is a licensed Mental Health Professional that is culturally competent to the fire service and first responder culture. The CICL works as a member of the Critical Incident Peer Support Team (CIPS) and under the supervision of the Critical Incident Stress Team Lead (CISL). The CICL is the higher level of care on the incident for the CIPS team. The CICL is utilized on the incident to provide stabilization of individuals only.
Future long-term care assistance and local referrals for individuals will be provided. CICL(s) shall be utilized in any briefings and should be considered for any other formal group discussions as needed. CICL(s) should be available to assist in individual one on one sessions as needed. A secure, confidential location shall be made available on established incidents for CICL utilization to conduct one on one stabilization of individuals as needed. CICL(s) not assigned to a CIPS team must have a payment mechanism in place either through established contracts, agreements, policies, or vendor lists. A CICL vetting process is recommended for future consideration and implementation. A CICL designator for the local, state, and federal ordering systems and a task book is recommended for future consideration and implementation.

**CHECKLIST USE:** The checklist presented below is a minimum requirement for this position. Users of this manual may augment this list as necessary.

A. Review Common Responsibilities (Page 1-2)  
B. Works as a member of the Critical Incident Peer Support Team (CIPS)  
C. Report to the CISL  
D. Effectively communicates with individuals seeking help, with team members and adjoining forces on the incident.  
E. Develops an action plan for those who require one for their immediate and follow up care.  
F. Discusses and assists individuals with the implementation of action plans as needed.  
G. Maintain a current license to practice as a mental health provider.  
H. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).  
I. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident and with follow up.  
J. Develop a plan to provide confidential follow up with individuals for any future behavioral health needs.  
K. Have the knowledge to participate as necessary in the following:  
L. Defusing, Crisis Management Briefings, Debriefings.  
   a. Understand the ICS model and the chain of command.  
   b. Be prepared to speak at morning briefings regarding mental health issues.  
   c. Aid in providing educational information to be added to the IAP.  
M. Work as a team member in pairs. One member must be CISM qualified.  
N. Work along with team members if the CICL is a member of a non-life safety position while maintaining situational awareness. Proper Safety gear must be obtained for field operations.  
O. Communicate with the Critical Incident Stress Lead (CISL) or designee while in the field or after completing a task. Provide daily generic contact information to the lead at the end of each day and any additional needs that may be required.  
P. Maintain communications and accountability to CISL and local supervisor at all times. Clinicians will be partnered with sworn personal assigned to the incident any time traveling within the incident perimeter and when in the field, traveling in an out of divisions.
Q. Provide the point of contact information for any media related questions (Incident PIO) and be familiar with media policy, team lead, or incident direction.
R. Act in a professional manner as a representative of the incident.
S. Utilize proper demobilization procedures for team members and yourself when transitioning from the incident.
T. Maintain all qualifications and state license requirements as required for the position.
U. Follow all required policies and directives as applicable.
V. Follow all state and federal behavioral health laws as applicable.

CRITICAL INCIDENT STRESS CHAPLAIN (CISC)

Critical Incident Stress Chaplains (CISC) are non-denominational Chaplains who provide faith-based care when requested to individuals on the incident. The CISC works as a member of the Critical Incident Peer Support Team (CIPS) and under the supervision of the Critical Incident Stress Team Lead (CISL). CISC(s) may also have Critical Incident Stress Management (CISM) qualifications and may be utilized in dual roles as required. Recommend that the CISC be trained as a CISM. A CISC designator for the local, state, and federal ordering systems and a task book is recommended for future consideration and implementation.

CHECKLIST USE: The checklist presented below is a minimum requirement for this position. Users of this manual may augment this list as necessary.

A. Review Common Responsibilities (Page 1-2)
B. Work as a member of the Critical Incident Peer Support Team (CIPS)
C. Effectively communicate with individuals seeking help, with team members and adjoining forces on the incident.
D. Develop an action plan for those who require one for their care.
E. Discuss and assist individuals with the implementation of action plans as needed.
F. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).
G. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident and with follow up.
H. Develop a plan to provide confidential follow up with individuals for any future behavioral health needs.
I. Provide faith-based care to individuals as requested. All faiths shall be considered for an individual's needs.
J. Maintain the knowledge to participate in the following:
   a. Defusing. Assisting or leading a defusing if qualified.
   b. Crisis Management Briefing. Assisting or leading a Crisis Management briefing if qualified.
   c. Debriefing. Assist or leading a Debriefing if qualified.
   d. Any other task that requires behavioral health assistance, either assisting or leading.
K. Recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for yourself, the individuals, and others if qualified.

L. Work along with team members if the CISC is a member of a non-life safety position while maintaining situational awareness. Proper safety gear must be obtained for field operations.

M. Coordinate activities with adjacent team members as needed — review assignments with the additional team for coordination of efforts and any additional needs required.

N. Work as a team member in pairs. One member must be CISM qualified.

O. Communicate with the Critical Incident Stress Lead (CISL) or designee while in the field or after completing a task. Provide daily generic contact information to the lead at the end of each day and any additional needs that may be required.

P. Maintain radio communications with Division/Group Supervisors when in the field, traveling in an out of divisions.

Q. Provide the point of contact information for any media related questions (Incident PIO) and be familiar with media policy, team lead, or incident direction.

R. Act in a professional manner as an Agency/Incident representative.

S. Utilize proper demobilization procedures for team members when transitioning from the incident.

T. Maintain all qualifications and certifications as required for the position.

U. Follow all required policies and directives as applicable.

V. Follow all state and federal behavioral health laws as applicable.

CRITICAL INCIDENT STRESS K9 (CISK)

Critical Incident Stress K9 (CISK) and handlers are trained to respond to intense and emotional situations. Teams should hold a Therapy Dog (complex rating) and or Animal-Assisted Crisis Response (AACR) certification(s) and be considered certified as a crisis response canine. The CISK works as a member of the Critical Incident Peer Support Team (CIPS) and under the supervision of the Critical Incident Stress Team Lead (CISL). CISK(s) not assigned to a CIPS team must have a request in place either through established contracts, agreements, policies, or vendor lists. It is recommended that the CISK handler be trained as a CISM. Crisis Response Canine non-profit organizations have been utilized on large scale incidents with great success. A CISK designator for the local, state, and federal ordering systems and a task book is recommended for future consideration and implementation. Utilization of the current national crisis response canine certification process shall be considered as acceptable training and standard until additional training or standards are recognized and or required.

CHECKLIST USE: The checklist presented below is a minimum requirement for this position. Users of this manual may augment this list as necessary.

A. Review Common Responsibilities (Page 1-2)

B. Works as a member of the Critical Incident Peer Support Team (CIPS)

C. Effectively communicates with individuals seeking help, with team members and adjoining forces on the incident.
D. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).
E. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident and with follow up.
F. Assist with developing a plan to provide confidential follow up with individuals for any future behavioral health needs.
G. CISK teams must be able to tolerate, adapt, and cope with stress and changing environments.
H. CISK handlers must be able to recognize stress in their dogs through understanding and awareness, implementation of skills for preventing and managing the stress, and the development of healthy mechanisms to cope with stress.
I. Handlers must recognize the dog’s behavior encompassing an understanding of canine body language.
J. CISK teams provide all the necessary equipment required for the incident and must be proficient in usage.
K. Handlers will respect individuals’ personal space unless requested by the individual or approached by the individual.
L. Handlers will recognize and respect the individual's wishes if they decline the CISK services.
M. Handlers are the advocate for their dog and will always put that into consideration on incidents. If something is questionable, the handler will make notification to the proper designee and disengage as required.
N. Maintain the knowledge to participate in the following:
   a. Defusing. Assisting a defusing if qualified.
   c. Debriefing. Assist a Debriefing if qualified.
   d. Any other task that requires behavioral health assistance either assisting or leading
CISK teams should be able to assist in the above examples if qualified to do so as a CISM.
O. Recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for yourself, the individuals, and others if qualified.
P. Work along with team members if the CISK is a member of a non-life safety position while maintaining situational awareness. Proper safety gear must be obtained for field operations.
Q. Coordinate activities with adjacent team members as needed — review assignments with the additional team for coordination of efforts and any additional needs required.
R. Work as a team member in pairs. One member of the pair must be CISM qualified.
S. Logistical needs for the dogs will be provided for by the handler unless a contract, agreement, policy, or procedure is in place.
T. A proper rest/work cycle will be communicated to the CISL or designee daily during the incident.
U. Maintain radio communications with Division/Group Supervisors when in the field, traveling in and out of divisions.
V. Provide the point of contact information for any media related questions (Incident PIO) and be familiar with media policy, team lead, or incident direction.
W. Act in a professional manner as an Agency/Incident Representative
X. Utilize proper demobilization procedures for team members when transitioning from the incident.
Y. Maintain all qualifications and certifications as required for the position.
Z. Follow all required policies and directives as applicable.
AA. Follow all state and federal behavioral health laws as applicable.
APPENDICES

APPENDIX 1

TERMINOLOGY

**Animal-assisted crisis response (AACR):** Teams are specially trained, evaluated and credentialed dog teams who have at least 12 visits providing animal-assisted therapy in various settings. These caring comfort dogs demonstrate healing qualities to assist responders in facilitating crisis intervention.

**Critical Incident:** is not defined by the event itself; it is defined by the individuals and/or the organization's reaction to what occurred. A critical incident is any unexpected, traumatic event that affects an individual's feelings of personal safety, their ability to perform daily activities, and their ability to concentrate on their normal job duties. Simply put, a critical incident is a traumatic event (or perceived life-threatening event) that has enough power to overwhelm an individual's or organization's ability to cope. Examples, but not limited to:
- Line of Duty Death
- Off Duty Death (in some instances)
- The suicide of a co-worker or colleague
- Aviation accident
- Entrapment
- Burn-Over
- Shooting
- Serious accident or injury
- Shelter Deployment
- Exposure to fatalities and injuries
- Disaster recovery work
- A significant event involving children
- Acts of Terrorism
- Threats of Violence and to personal safety
- Events charged with profound emotions

**Crisis Intervention:** temporary, active, and supportive entry into the life of individuals or groups during a period of extreme distress.

**Crisis Management Briefing:** is a large, homogeneous group intervention used before, during, and after a crisis to present facts, facilitate a brief, controlled discussion, Q & A, and info on stress survival skills and/or other available support services. May be repeated as situation changes.
Critical Incident Peer Support Team (CIPS): is a team of qualified people that are assembled to assist first responders after a critical incident. The CIPS reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC’s discretion. CIPS team is organized to meet the needs of the specific event. A CIPS team will have a qualified Critical Incident Stress Team Lead (CISL).

Critical Incident Stress Chaplain (CISC): is a non-denominational faith-based qualified peer supporter that responds to a critical incident and works within the Critical Incident Peer Support Group. CICS members should also have required training in behavioral health. CISC members work under the CISL.

Critical Incident Clinician (CICL): is a licensed Mental Health Professional that has been qualified to work as a member of the Critical Incident Peer Support Group. CICL members work under the CISL. Qualified licensed clinicians are; Licensed Marriage and Family Therapists (MFT), Clinical Social Workers (LSW), Licensed Professional Clinical Counselors (LPC), fall under the jurisdiction of the Board of Behavioral Sciences (BBS), Psychologists fall under the authority of the Board of Psychology (BOP). State requirements for a licensed Mental Health Provider are as follows;

- Licensed PhD or PsyD
- Board of Psychology, www.psychology.ca.gov
- Must earn Doctorate Degree: PhD or PsyD
- Successfully Complete Number of Supervision Hours (for specifics refer to psychology.ca.gov)
- Research Requirement (many programs require completion of a dissertation-research in the field.)
- Pass National Examination
- Pass State Examination
  - OR
- Marriage and Family Therapist (MFT), Licensed Social Worker (LSW) and Licensed Professional Counselor (LPC)
  Board of Behavioral Sciences, www.bbs.ca.gov
- Must earn Master’s Degree
- Successfully Complete Number of Supervision Hours (for specifics refer to bbs.ca.gov)
- Pass National Examination
- Pass State Examination

Critical Incident Stress K9 (CISK): is a canine and handler trained in crisis response work. The dog and handler will be qualified to work as a member of the Critical Incident Peer Support Group. CISK members should also have required training in behavioral health. CISK dogs and handlers work under the CISL.

Critical Incident Stress Management (CISM): is a qualified peer supporter that responds to a critical incident and works within the Critical Incident Peer Support Team. CISM members work under the CISL.
Critical Incident Stress Team Lead (CISL): is a qualified peer supporter that has extensive training and experience that leads the Critical Incident Peer Support Team (CIPS) and reports to the Liaison or the Incident Commander at the IC’s discretion. The lead organizes and directs the CIPS team operations on the incident.

Culturally Competent Clinician: Culture is defined as patterns of human behavior that are part of a racial, ethnic, religious, or social group. Behaviors can include thoughts, language, customs, beliefs, and institutions. For example, first responders would be considered a culture characterized by how they communicate, worldviews, belief system, language, traditions, and values that differ drastically from mainstream population.

Cultural competence is an acknowledgement and incorporation of, on the part of clinicians and healthcare systems, the importance of culture, the assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge, and the adaptation of services to meet culturally unique needs.

Debriefing: is a proactive intervention involving a group meeting or discussion about a particularly distressing critical incident. Based on core principles of crisis intervention, a Critical Incident Stress Debriefing (CISD) is designed to mitigate the impact of a critical incident and to assist the persons in recovery from the stress associated with the event. The CISD is facilitated by a specially trained team that includes Mental Health Professional(s) and peer support personnel. Ideally, it is conducted between 24 and 72 hours after the incident but may be held later under exceptional circumstances.

Defusing: is an intervention that is a shorter, less formal version of a debriefing. It generally lasts from 30 to 60 minutes but may go longer and is best conducted within one to four hours after a critical incident. It is not usually conducted more than 12 hours after the incident. Like a debriefing, it is a confidential and voluntary opportunity to learn about stress, share reactions to an incident, and vent emotions. The main purpose is to stabilize people affected by the incident so that they can return to their normal routines without unusual stress. Where appropriate, a formal debriefing also is required.

International Association of Fire Fighters (IAFF): The IAFF Foundation's mission is to support members and their families in their time of need, promote fire and burn prevention, advocate for firefighter health and safety, and provide public education on how to prevent and recover from traumatic events.

International Critical Incident Stress Foundation (ICISF): The mission of the International Critical Incident Stress Foundation is to provide leadership, education, training, consultation, and support services in comprehensive crisis intervention and disaster behavioral health services to the emergency response professions, other organizations, and communities worldwide.
**K9:** The term K9 is the accepted verbiage for a “working” class dog.

**Psychological Distress:** Unpleasant feelings or emotions that impact your level of functioning like, sadness, anxiety and distractions. Symptoms of mental illness are manifestations of unmanaged psychological distress

**Psychological Trauma:** This is a person's emotional response to a critical incident such as suffering life-threatening danger, injury, or abuse, witnessing the death of others, or losing a colleague in the line of duty. Experiencing a traumatic incident does not mean someone is impaired or will develop Post-Traumatic Stress Disorder (PTSD). Such an experience simply means that the event occurred, is now part of a person's sensory memory, and needs to be processed and integrated.

**Therapy Dog:** A therapy dog is a dog that is trained to provide affection, comfort, and support to people in hospitals, retirement homes, nursing homes, schools, libraries, hospices and/or disaster areas
POSITION REQUIREMENTS

Critical Incident Stress Lead (CISL)

REQUIRED TRAINING*
1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. Intermediate ICS (I-300)
4. Advanced ICS (I-400)
5. NIMS: An Introduction (IS-700)
6. NRF: An Introduction (IS-800)
7. ICISF Advanced Group Crisis (Two Day Course) *
   and
ICISF Suicide Prevention, Intervention and Postvention course *
   and
IAFF Basic Peer Support Class (Two Day Course)*

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE
2. Qualified Critical Incident Peer Supporter (CISM).
3. **2 quality assignments shadowing a qualified Critical Incident Stress Lead.

PHYSICAL FITNESS LEVEL
• Light

OTHER POSITION ASSIGNMENTS THAT MAINTAIN CURRENCY
• Critical Incident Peer Support (CISM)

RECOMMENDED TRAINING WHICH SUPPORTS DEVELOPMENT OF KNOWLEDGE
• Any position or discipline training endorsed by IAFF or ICISF.

* Both ICISF and IAFF required training will be completed by 01/01/2024. A moratorium will be in place until 01/01/2024 for individuals with some, but not all the ICISF or IAFF required classes. Individuals shall be allowed to be placed into their ordering systems before all required classes are completed or until required by 01/01/2024.
** Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on the complexity of the assignment.

Critical Incident Stress Management (CISM)

REQUIRED TRAINING
1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. NIMS: An Introduction (IS-700)
4. NRF An Introduction (IS-800)
5. ICISF Assisting Individuals in Crisis (Two-Day Course)
6. ICISF Group Crisis Intervention (Two-Day Course)
   or
   ICISF Assisting Individuals in Crisis & Group Crisis Intervention (Three-Day Course)
   or
   IAFF Basic Peer Support Class

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE
2. Two quality assignments shadowing a qualified CISM*

PHYSICAL FITNESS LEVEL
- Light

RECOMMENDED TRAINING WHICH SUPPORTS DEVELOPMENT OF KNOWLEDGE
1. Intermediate ICS (I-300)
2. Advanced ICS (I-400)
3. ICISF Suicide Prevention, Intervention, and Postvention (Two-Day course)
4. Any position or discipline training endorsed by IAFF or ICISF.

* Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on the complexity of the assignment.
Critical Incident Clinician (CICL)
*Future Resource Ordering System Addition and Task Book Required*

REQUIRED TRAINING
1. Introduction to ICS(I-100) **
2. Basic ICS (I-200) **
3. NIMS: An Introduction (IS-700) **
4. NRF An Introduction (IS-800) **
5. ICISF Group Crisis Intervention (Two-Day Course)
   or
   ICISF Assisting Individuals in Crisis & Group Crisis Intervention (Three-Day)

REQUIRED EXPERIENCE, CERTIFICATIONS OR LICENSE
REPLACE WITH MYNDA’s INFORMATION PROVIDED
1. Documentation of 1 year working directly with Public Safety (within the last three years).
2. Two quality assignments shadowing a ROSS qualified CICL***

PHYSICAL FITNESS LEVEL
- Light

MAINTAIN CURRENCY
1. Respond to at least one incident every three years.
2. Current counseling license.

RECOMMENDED TRAINING WHICH SUPPORTS DEVELOPMENT OF KNOWLEDGE
1. Firefighter Training (S-130)
2. IAFF Peer Support Awareness Online Course
3. IAFF Peer Support Operational (Two Day Course)

   Any position or discipline training endorsed by IAFF or ICISF.

ENDORSEMENT BY INCIDENT KIND DISCIPLINE
- Letter of recommendation from public safety agency that you have directly worked within the last three years.

HISTORICAL RECOGNITION
1. Submit a letter from an IC or supervising individual (fire personnel) of an incident you responded to (type 1 or 2).
2. Must be entered into the current resource ordering system as an individual, not group, organization, or association.

*Position will need to be created, added into a Resource Ordering system, and a task book built.

**All courses required within the past three years.

***Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on the complexity of the assignment.

Critical Incident Stress Chaplain (CISC)

REQUIRED TRAINING
1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. NIMS: An Introduction (IS-700)
4. NRF An Introduction (IS-800)
5. Federation of Fire Chaplain Basic Chaplain 40-hour course
6. ICISF Assisting Individuals in Crisis (Two-Day Course)
7. ICISF Group Crisis Intervention (Two-Day Course)
   or
   ICISF Assisting Individuals in Crisis & Group Crisis Intervention (Three-Day Course)
   or
   IAFF Basic Peer Support Class

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE
1. Chaplain (Licensed Minister)
   or
   Associate Chaplain (Non-Licensed or Lay Minister)
3. Two quality assignments shadowing a qualified CISC **

PHYSICAL FITNESS LEVEL
• Light

RECOMMENDED TRAINING WHICH SUPPORTS DEVELOPMENT OF KNOWLEDGE
1. ICISF Suicide Prevention, Intervention and Postvention course highly desirable
2. Any position or discipline training endorsed by IAFF or ICISF.
* Position will need to be created, added into a Resource Ordering system, and a task book built.

**Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on the complexity of the task.

Critical Incident Stress K9 (CISK)

REQUIRED TRAINING
1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. NIMS: An Introduction (IS-700)
4. NRF An Introduction (IS-800)
5. Nationally Recognized Facility Dog requirements
6. Emotional First Aid Course
7. Pet First Aid (Basic)
8. ICISF Assisting Individuals in Crisis (Two-Day Course)
9. ICISF Group Crisis Intervention (Two-Day Course)
   or
   ICISF Assisting Individuals in Crisis & Group Crisis Intervention (Three-Day Course)
   or
   IAFF Basic Peer Support Class

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE
1. Nationally recognized Therapy Dog (complex rating)
   and/or
   Animal Assisted Crisis Response (AACR) certification
3. Two quality assignments shadowing a qualified CISK **

PHYSICAL FITNESS LEVEL
- Light

RECOMMENDED TRAINING WHICH SUPPORTS DEVELOPMENT OF KNOWLEDGE
1. ICISF Suicide Prevention, Intervention and Postvention course highly desirable.
2. Any position or discipline training endorsed by IAFF or ICISF
* Position will need to be created, added into a Resource Ordering system, and a task book built.

** Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on the complexity of the task.