

“Firefighter Behavioral Health” Roll-Out:

Make Order Out of Chaos



Kathy Clay, fire marshal/battalion chief with Jackson Hole (Wyo.) Fire/EMS and a new IAWF board member, bridges the structural fire, wildland fire and emergency medical communities. *By Kathy Clay*



The more we work firelines and incidents together, the more we'll be able to sense when to “check in” and offer “Stress First Aid,” firefighter-to-firefighter.

Having recently written the critical incident management guideline for our fire/EMS combination department, it was my fortune to attend the National Fallen Firefighter Foundation (NFFF) roll out of Initiative 13 on firefighter behavioral health, held in Baltimore, Md., on March 1-2.

Representing the International Association of Wildland Fire as a new board member, my goal was to figure out how to weave the wildland firefighter into what I imagined was going to be a predominately structural firefighter conversation. Finishing a long day of travel, I jumped on the airport shuttle and struck up a conversation with a gal who joined me curbside.

Our chat revealed the thread I was seeking — she was Kim Lightley, the NFFF's Wildland Advocate, also attending the conference. She spoke of her home near Bend, Ore., her work with a pharmaceutical company, and then she quietly mentioned she was the only woman survivor of the Storm King Mountain Fire in 2004. I sat in stunned silence. Having studied this fire, I was in complete awe and understood the significance of her revelation.

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Tasked by NFFF in 2009 with the work to fulfill the mission of Initiative 13 — *Firefighters and their families must have access to counseling and psychological support* — a team of behavioral health specialists worked toward a simple and effective management tool to help firefighters and emergency responders with managing the stress of their work. Combining an evidence-based process with a research-based approach, the team concluded that the popular critical incident debriefing model was often doing more harm than good. The research of Dr. Richard Gist, Vickie Taylor and Dr. Patricia Watson leads to a remarkably simple and incredibly effective management response to stress. It begins with creating calm and order out of chaos. It begins with effective incident command.

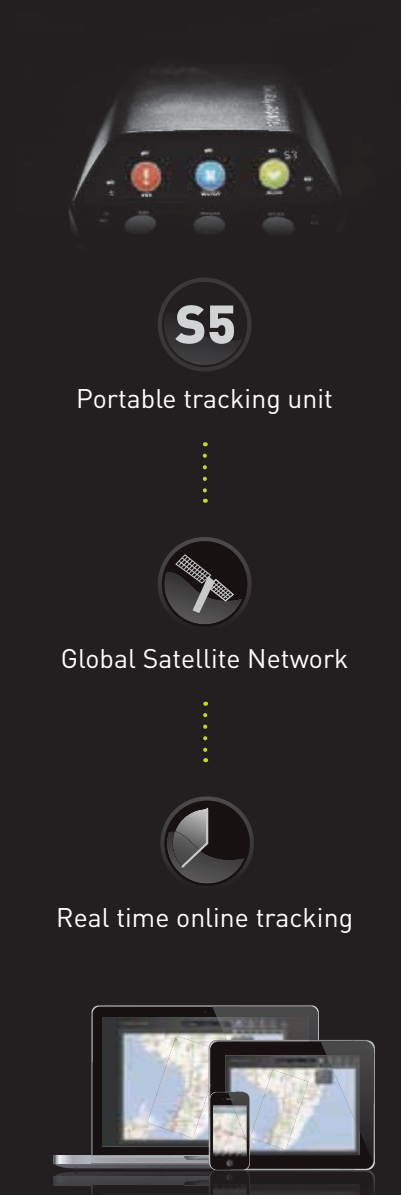
I had not expected this revelation.

Yet, upon contemplation and the recognition of the research findings, it makes sense that good ICS does make perfect sense. Studies show incidents that are managed using the ICS system have far fewer stress injuries afterward. Responders are less stressed and therefore suffer less stress throughout and beyond the time of the incident. Preventing chaos and promoting the restoration of calm can dramatically decrease the need for higher-order mental interventions in the future.

As with so many skills, ICS should be incorporated into every “incident,” from training to a dumpster fire to a larger event. In the fire house, at the vehicle rollover, on a family vacation — use your imagination. With ICS, everyone knows their job and boss, and accountability is reflected within the organizational chart.

Simple step Number Two is to commit passionately to what many of us already do, especially in the wildland arena: commit to after action reviews (AARs) each time, every time. This labor of repetition develops responders’ practice and commitment to understanding the rules and the purpose of the AAR. What happened? What did we do well? What could we improve next time? Consider AAR the “time out” for the incident, allowing for those involved a review, time of reflection and a chance to put the pieces together. And finally, who needs to know or how do we communicate this message to members to enhance organizational learning? The use of AAR provides responders with the ability to make sense out of the incident that just happened and the opportunity to project lessons learned out to the organization.

The next take-home point of the two-day session highlighted what some of us do pretty darn well already — taking care of our own. The Stress First Aid peer-modeled tool focuses on paying attention. Sounds simple, right? It means, folks, you need to know your people. You know what is going on in their lives. You have to care, you have to pay attention, you have to listen. Your people are not just beings who show up



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Firefighter Health

and pull a shift with you or arrive at the firehouse from home or work when the tones drop. You develop a sense of when things are not right and you check in with these folks. We do this best, firefighter to firefighter or EMT to EMT — i.e., like understands like.

Checking in may mean showing up at a buddy's house to help build the deck he's been working on, or going for a hike together, or just simply being together. If there is trouble and you recognize the signs, you will probably hear about the trouble by being patient and respectful. You will know how to "check in" because you will have spent the time listening to and knowing this person. Your being there for them may be all that is needed.

Some firefighters, admittedly, will need more than peer care. In order to determine the level of appropriate care, we were taught advantages of the new model for potentially traumatic events and the accompanying Trauma Screen-


ing Questionnaire, an effective method to determine the need for advanced intervention. When given to responders exposed to potentially traumatic events, the TSQ tool will help identify whether or not additional help should be activated. If a score of six or more questions are answered yes, referral to a behavioral health practitioner is indicated.

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Lightley has been very involved in helping the NFFF translate some of the new behavioral work for the wildland community. Her wildfire experience, years of post traumatic stress and her road to recovery inspire us all in the necessity and value of taking care of our own. With her special outreach prowess, Lightley is a great resource to the NFFF and will be an outstanding advocate in spreading the work of Initiative 13.

As we prepared to board our planes, I hugged this woman, 10 years my junior, who has endured suffering un-

known to me. She stands tall and strong to tell the world her story, to spread the taking-care-of-your-own message. She sees and has accepted her destiny — determined that fateful day atop a mountain of raging fire, that fire which spared her life. She is with us today, ready to help us support those we work with, side by side in a world of fire and death and sadness.

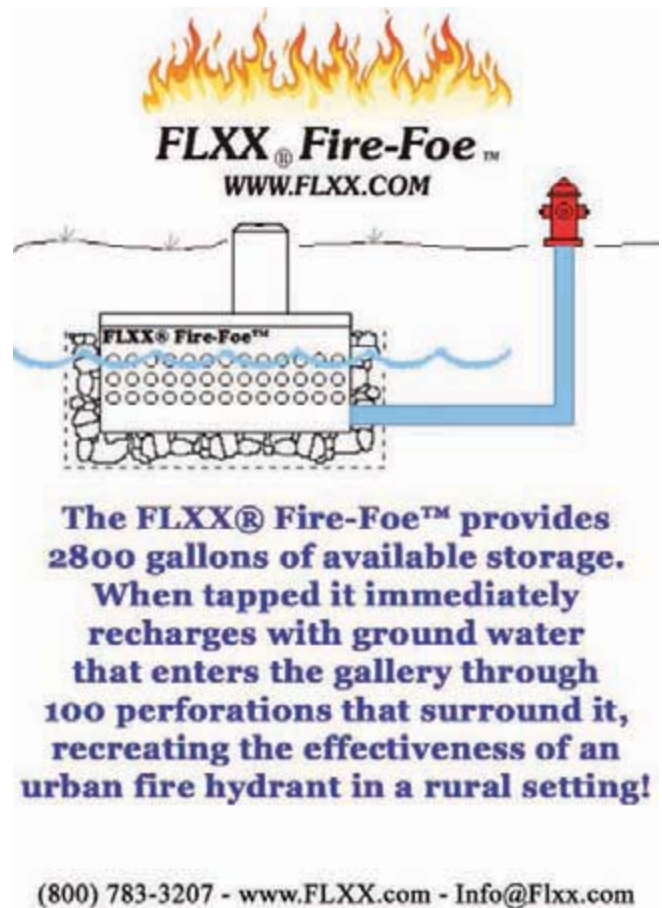
As we journey home, every one of us returns, pulling a thread. Weaving it into our own cultures, shaping that fabric into well-run incidents, punctuated with practiced AARs, and followed up with sincere concern for those with whom we worked, those whom we love. We can only hope to stand as tall, as brave, as committed and focused as the Prineville Hotshot who is ready to tell her story and inspire those of us she has touched. 

Visit www.wildfireworld.org/article/order-out-of-chaos/ to access the Initiative 13 tools.



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BEHAVIORAL HEALTH: Order Out of Chaos

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Volume 22 Number 3



A CL-215 "Super Scooper" on the Minidoka Complex. The Ops Branch Director observed that "use of the scoopers finally gave us the opportunity to grab some line and start going direct in tough terrain."

PHOTO: MINIDOKA COMPLEX, INT

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On the Cover

Looking towards Mt. Washington near Sisters, Oregon (2012). This landscape in Central Oregon has experienced multiple recent wildfires and now contains distinct patches of reburn from fires in 1999, 2003, 2008 and 2011. *Wildfire* Photo Finalist by Garrett Meigs.