Virginia Office of EMS Critical Incident Stress Management (CISM) And Peer Support Team

Accreditation Information

And

Application Packet



Office of Emergency Medical Services Virginia Department of Health Glen Allen, Virginia

Purpose and Benefits of Accreditation

In 2009 the Office of EMS recognized a need to standardize the training, composition, and protocols of Critical Incident Stress Management (CISM) teams. Through a multi-phase process the Governor's Advisory Board CISM Committee has created both an accreditation program and standardization of training expectations. This process will allow for a standardization of teams that will be utilized in requests for CISM Teams at the state level or to fulfill Emergency Management Assistance Compact (EMAC) requests from other states.

The process of fulfilling requests at the state level will be based on prioritizing those teams that have received accredited status over those teams that have not. In order to receive accredited status, a CISM team must complete the attached application and provide supporting documentation of the additional requirements. Once the documents have been received they will be reviewed for consideration and any additional information or need for clarification will be sent to primary point of contact listed on the application.

This packet provides the application as well as a list of supporting documentation and requirements for accreditation that must be complete prior to sending in the packet. Please understand that once approved, the accreditation period is a 3-year period, at which time a team will need to reapply for recognition, meeting any new requirements that may be in place.

Mail Completed Applications to:

Virginia Office of EMS ATTN: Chris Vernovai 1041 Technology Park Drive Glen Allen, Va. 23059

For additional information or questions contact Chris Vernovai by e-mail (<u>Chris.Vernovai@vdh.virginia.gov</u>) or phone (804-888-9100)

CISM Accreditation Requirements

- I. Minimum Team Membership
 - A. Clinician 1 Licensed Clinician (or hold equivalent training) or hold doctorate in the field (2 clinicians recommended)
 - 1. If applying for accreditation as a Peer Support Team the clinician MUST be a Virginia-licensed clinical psychologist, Virginia-licensed psychiatrist, Virginia-licensed clinical social worker, or Virginia-licensed professional counselor with at least five years of experience working with emergency medical services or public safety personnel.
 - B. Peer (a single person may be a peer in multiple categories). You only need to meet minimum requirements for the area(s) of focus. These individuals must meet the minimum training requirements listed below.
 - 1. Law Enforcement 3
 - 2. Fire/EMS 3
 - 3. Dispatchers 3
- II. Team Leadership
 - A. Active member that meets training standards
 - 1. must be designated as providing team oversight
 - 2. Minimum one year field experience in crisis counseling
 - 3. For Peer Support teams the leadership must be the Virginia-licensed clinician
 - B. Optional Clinical Coordinator
- III. Team Training
 - A. Training program must meet minimum OEMS standards (found on Page 6 of this document)
 - B. Minimum Training Certifications for Peers
 - 1. Peer-to-Peer
 - 2. Group Training
 - 3. Suicide Intervention/Postvention Training
 - C. Optional Training:
 - 1. Resiliency Training
 - 2. Psychological First Aid
 - 3. Grief Following Trauma

D. Training verification must be received with the membership packets. If Certifications of Completion are not available, a letter from the team commander verifying training is acceptable.

E. Renewal

- 1. 12 hours for each team member within the three year accreditation period
 - a. Renewal training must be in crisis counseling or related topics
 - b. Will need documentation on what the courses were and roster

IV. Team Alerting

- A. 24-hour contact number for team
- B. Alerting process that is documented and shared with OEMS
- V. Team Meetings
 - A. Minimum quarterly
- VI. Team SOPs
 - A. Should cover the basics, including membership requirements, alerting, leadership, and discipline

VII. Peer Outreach

- A. Required for reaccreditation
- B. Three outreach efforts per accreditation period
 - 1. Interact with Peer group outside of team membership

VIII. Team Documentation

- A. Twice a year basis
 - 1. Statistics and Activation activity log
 - 2. Training Log
 - a. Who attended, what dates, what times, what topics
 - b. Individually attended trainings
 - 3. Meeting Log
 - a. Minutes and agendas from each meeting attendance roster
 - 4. Background Check verification
 - a. If not a member of community that is required, then they must conduct a background check
 - 5. Updates provided

B. Team SOPs

- 1. Include activation procedure
- 2. Standard application process (include a copy of the member application must include statement of conviction)
- 3. Include dismissal process for conduct that diminishes view of the team

C. Team Roster

- 1. Names
- 2. Qualifications
- 3. MUST INCLUDE ALL MEMBERS, not just minimum members

IX. Team Identification

- A. Teams must provide each team member a standardized photo identification badge. This can be a work ID if provided by the public safety agency.
- B. If unable to provide as a team, please contact the Office of EMS for additional assistance.

CISM Training Standards

As a part of this process, a list of standards has been created for use in the review of CISM training programs. This review will determine whether or not CISM programs taught within the Commonwealth meet membership and deployment requirements set forth by the Office of EMS.

The following are the training standards that will be used by the Office of EMS to review CISM Courses by the Office of EMS.

- **Define** terminology and key concepts related to training topic
- Develop an **understanding** of the training topic and key concepts
- Learn techniques related to the training topic
- Develop a plan to implement or apply techniques related to the training topic
- Practice the plan, skills, and techniques related to the training topic
- Review the skills and discuss problem areas identified through practice (problem solve)
- Identify resources and referral options for people in crisis, as well as interveners
- Evaluation of the course

To have a program reviewed, the course coordinator or instructor must send a copy of the program to the Office of EMS (electronic or CD preferred). The program will be reviewed to determine whether or not it meets the above standards and notification of determination will be sent back to the instructor/course coordinator.

CISM Team Application

COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH OFFICE OF EMERGENCY MEDICAL SERVICES 1041 TECHNOLOGY PARK DR GLEN ALLEN, VA 23059

Team Accreditation Application

| Please Print or Type | | | |
|---|------------------------|------------------|-----------|
| Date Form Completed: | Type of Team: Peer | CISM | Dual |
| Team Name (as on file with OEMS): | | | |
| Jurisdiction(s) Supported: | | | |
| Team Mailing Address: | | | |
| (City) | (State) | (Zi _I | <u>o)</u> |
| Team Primary Phone #: | FAX #: | | |
| Primary E-mail Address: | | | |
| Is the team willing to be considered for stat | e deployment requests? | Yes | No |
| TEAM NOTIFICATION | | | |
| Primary Point of Contact: | | | |
| Telephone #: | _FAX#: | | |
| E-mail: | | | |
| Secondary Point of Contact: | | | |
| Telephone #: | _ Pager #: | | |
| E-mail: | | | |
| | | | |

TEAM CONTACT

| (State) | (Zip) |
|----------|---|
| Pager #: | |
| FAX #: | |
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| (State) | (Zip) |
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TEAM SPECIALTIES

| Please list any special areas that the team can provide services in. | | | | | |
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The following check list contains the items necessary to complete a Task Force Application. Failure to submit items on this list will delay consideration of the application.

| ITEM | ATTACHED | | COMMENTS |
|---------------------|----------|----|----------|
| Roster | Yes | No | |
| Governing Documents | Yes | No | |
| Training Records | Yes | No | |
| Alerting Process | Yes | No | |
| Meeting Schedule | Yes | No | |

- 1. Roster updated at least twice a year
- 2. <u>Governing Documents</u> What type of structure does the CISM Team have, what offices will be utilized, how will the positions be filled, what are team membership requirements, what are the grievance processes, etc.?
- 3. <u>Training Records</u> Training records of members. This can be in a spreadsheet format but with a signature that the records have been reviewed and can be obtained as needed.
- 4. <u>Alerting Process</u> This is the written Alerting process that the CISM Team uses to alert members. Documentation will be submitted on any tests and results.
- 5. <u>Meeting Schedule</u> A list of meeting dates needs to be provided with indication of frequency of the meetings.