



Managing the Impact of a Critical Incident

A Guide for Managers and Supervisors

Developed by Kepro, Employee Assistance Program

The purpose of this guide is to provide information for managers and supervisors on how best to manage the impact of a critical incident and to outline available resources and support.

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INTRODUCTION

Critical Incidents, whether they occur in the workplace or in the community, have the potential to impact employees and interfere with their ability to cope and perform their jobs effectively. As they are referenced in this guide, critical incidents can encompass a wide range of events and include natural disasters, workplace accidents, homicides, suicides, or the death of a coworker. The KEPRO EAP utilizes a critical incident stress management (CISM) approach anchored in a research-based multidisciplinary resilience enhancement model. This approach incorporates features of Critical Incident Stress Management, Psychological First Aid, and Resilience Enhancement interventions which are catered to the nature and severity of the critical incident.

THE ROLE OF THE EAP

The EAP is available for telephone and on-site support. All calls for assistance should be directed through the dedicated toll-free number. Choose the option for manager or supervisor when calling for a consultation. This will connect you with a member of the EAP management services team. These senior level clinicians are experienced in guiding workplaces through a variety of critical incidents. Following this initial contact, the account manager will be alerted and notify HR if needed or requested. One or more EAP clinicians will stay in touch with human resources or the manager and help guide the process of providing an effective response to the critical incident from beginning to case closure.

WHAT YOU CAN EXPECT WHEN YOU CALL THE EAP

The EAP clinician will gather necessary information about:

- what happened,
- those impacted (to the degree possible at the time),
- location,
- contact people and phone numbers,
- services requested, and time and location of requested services.

Guidance will be provided on the timing and most effective type of response.

TYPES OF SERVICES AVAILABLE, TIMING, AND ATTENDANCE

Consultation and guidance on how to structure the organizational response will be provided by a member of the EAP management services team. In the case of a major event, it may also include assistance from the EAP account executive and/or local EAP providers.

On-site support by an EAP provider can be arranged within a few hours of an event. However, since individuals are most often still in shock, the role of the counselor at this time is limited. Most events do not require immediate, individual one-on-one support by a trained mental health professional. The kind of immediate support that can be most helpful is best provided by colleagues who are known and familiar to those impacted. The support often focuses on making sure the person has a way to get home safely and that they have someone to be with or reach out to, if needed. The EAP is available for telephone support 24/7. For urgent cases, immediate telephone support is available followed by same day appointment setting.

PARTICIPATION IN DEPARTMENTAL BRIEFING

EAP providers can be present as part of a management-led departmental briefing if the briefing occurs the day following the incident. Participation in the meeting allows the EAP counselor to provide education about normal reactions to a critical incident before conducting critical incident support services.

ON-SITE CRITICAL INCIDENT SUPPORT SERVICES

On-site support is best arranged within 24 to 72 hours after the event. The EAP counselor will provide a supportive environment where the range of normal reactions to significant events can be reviewed. The counselor will then provide education about utilizing effective resilience and self-care strategies. Group meetings are beneficial to participants because they raise awareness that what many are feeling, and thinking is normal in such situations and is shared by others. Group meetings also decrease isolation at a time when some may withdraw from supportive social contact.

Group sessions are not group therapy; rather they are a way to support employees who were impacted by a critical incident. Employees should be encouraged to attend the sessions, but their participation should not be mandatory.

Multiple meetings may need to be scheduled since groups of up to 15 employees are an ideal size. The meetings should be held in semi-private locations that offer flexibility for the facilitator to arrange the environment to best suit the needs of the group.

ON-SITE INDIVIDUAL SESSIONS

In conjunction with group meetings, having counselors on-site for potential one-on-one sessions offers additional assistance to those most affected or those reluctant to participate in the group setting. However, as a standalone intervention it is often the least likely service to be used. If individual therapeutic assistance appears to be needed, an immediate referral to the EAP is often the best approach. The EAP is available to assist in getting same day and next day appointments with network providers as needed.

ADDITIONAL SUPPORT

Human Resources, other organizational and community resources may also be available to support managers and supervisors in dealing with the range of issues surrounding most critical incidents.

ADDITIONAL INFORMATION - RANGE OF REACTIONS AND EFFECTIVE RESPONSES

The emotional, psychological, and physiological impact from traumatic events differs among individuals. This is due, in part, to one's past experiences and perceptions of the incident. If one interprets the incident as life-threatening to themselves or significant others, the stress response is activated. This response allows us to fight or flee the incident and achieve safety. Sometimes the stress response is prolonged. This can occur because perceptions have not changed, or because the incident is long term, like in the situation of natural disasters. Sometimes it is prolonged because past experiences are "awakened" by the incident. When the perception of safety is achieved, the stress response diminishes, and usual coping strategies facilitate the return to healthy functioning. Group session and/or brief one-on-one meetings with an on-site provider help to achieve this.

The handout included with this guide provides a more complete picture of the range of possible responses following a critical incident; the more typical reactions include:

- feeling numb or detached
- emotionally and physically drained or "lost in a fog",
- having difficulty concentrating,
- having intrusive thoughts about what happened,
- heightened sensory awareness,
- being easily startled,
- disruption in sleep patterns (sleeping more or less),
- body ache, and/or
- mood swings.

Some individuals will report not having any or few reactions. This may be the result of resilience skills, the individual's interpretation of the incident as non-threatening, and/or they may have effectively blocked the event at least in the short term. Individuals that seem to be having exaggerated or incongruent reactions should be brought to a counselor's attention. This may include appearing medicated, uncontrollable crying, and expressing threats to harm self or others.

Recovery occurs in four normal phases: **Shock, Denial, Disruption, and Reintegration.**

Shock phase is largely characterized by a sense of disorientation, and a commonly reported feeling that you feel like you are in a movie. During this phase it is important to:

- communicate with clear, easy to understand direction of what is expected,
- provide reassurance and basic assistance—water, rest, contact with supportive resources,
- identify those most impacted and plan outreach/monitoring activities as needed, and
- remain visible and accessible but not intrusive.

As the shock reaction dissipates, details of the incident begin to emerge. Our body's natural response is to protect and set up a barrier of denial.

Denial phase is marked by disbelief of the event and its impact. Denial sets in when the incident is too big for the body/mind to process. Denial also allows one to seemingly maintain a level of functioning and attend to the regular routines of their day. It is important to remember that denial can be purposeful and helpful to the individual and should not be confronted or questioned. Instead, supportive observance and gentle acceptance will allow individuals to move through this phase.

Disruption phase is the phase where most reactions are noted with a greater sense of vulnerability. The details and memory of the incident may feel overwhelming and out of control. Added support, normalization, and professional assistance can be very helpful during this phase. Returning to routines and structure can also enhance recovery.

At some point, when impacted individuals have processed what they have gone through, they will move into the **Reintegration** phase. Here they begin to make sense of the event and integrate it cognitively and emotionally. Often new choices and priorities are made, and a new sense of an empowered self emerges.

Consultation with the EAP management services team, especially during crisis, can offer focused guidance on all the stages and processes involved in developing a coordinated and effective response.

CISM CHECKLIST FOR MANAGERS/SUPERVISORS

- Event occurs.
- Address immediate safety concerns.
- Call EAP – choose the option of manager or supervisor calling for consultation.
- Notify departmental contacts, HR, etc., as needed.
- Compile a list of employees impacted by the event.
- Communicate the facts of what has happened, what has been done so far, and plans related to operations, support, and assistance. This notification should occur as soon as possible. Departmental briefings or an all-hands meeting can be an effective tool to accomplish this communication, but phone calls and email communication may be necessary. *Using email to initially notify employees of sensitive or personal information should be avoided but may be necessary at times when timing is critical or when staff are in remote locations.*
- Schedule group critical incident support meetings and individual support as needed in consultation with the EAP.
- Provide impacted employees with the EAP phone number to arrange individual sessions.
- Decide best course of action based on the event such as closing early, sending staff home, limiting hours of operations for the remainder of the day and for subsequent days, etc.
- Communicate status to stakeholders and others impacted.



The Critical Incident

Something happens; it is sudden, random, senseless. It affects not only the victim(s), but also family, friends, co-workers, acquaintances, and those who have witnessed some aspect of the event. The incident can alter your sense of safety, wellbeing, and competence. Your ability to function normally may be temporarily disrupted.

Individuals will react with different levels of intensity. However, most people will experience some form of reaction, which is outside the range of their usual way of coping. People may experience the following after a traumatic event:

- **Numbness.** You may withdraw from others, feel down, emotionally drained or “lost in a fog” and/or have difficulty concentrating.
- **Hyper arousal.** You may feel irritable or have flashbacks to the incident. You may be easily startled, feel nervous or have nightmares.

It’s not uncommon to go back and forth between these two states. You may feel numb one day and irritable the next. The traumatic experience may bring back situations from the past in which you felt helpless or out of control.

Close off the pain. When a crisis occurs, the normal tendency is to put feelings and emotions aside. Your instincts tell you to try to keep the incident separate from the rest of your life.

This strategy may be necessary to keep you going in the immediate crisis. The problem is that it usually doesn’t work in the long run. Refusing to talk or think about what happened doesn’t undo it. Often the effects break through later.

What is a Critical Incident Response?

The critical incident response is a temporary stress reaction to a serious event. It is important to understand that you are having a normal response to an abnormal experience. Making a conscious effort to recognize the signs and symptoms of a stress reaction and working through them will ultimately help you to overcome the stress.

Physical Critical Incident Responses:

- Fatigue
- Nervous energy
- Appetite changes
- Neck and/or back pain
- Headaches
- Chest pain and/or heart palpitation
- Insomnia and/or nightmares

Emotional Critical Incident Responses:

- Feeling jumpy or easily startled
- Irritability
- Difficulty concentrating
- Intrusive thoughts about what happened
- Avoidance of people, places, and activities
- Anger
- Feelings of helplessness
- Flashbacks

Productivity Critical Incident Responses:

- Inability to concentrate
- Making more mistakes than usual
- Trouble remembering things
- Tendency to overwork
- Staying home from work more often

Taking Care of Yourself

- **Relaxation techniques can be helpful.** Stress is completely normal at a time like this. Acknowledge that you may have a lot of unpleasant feelings. Learn some stress management strategies and use them frequently. Give yourself time to recover from the crisis.
- **Sleep is always important, but especially now.** Restlessness, nightmares and obsessing about the event can disrupt your sleep. Make sure you allow enough time for a full night's sleep. If you have difficulty sleeping for more than a week, consult your doctor.
- **Exercise can help clear the cobwebs.** A brisk walk is good for the body and has a calming effect on the mind as well. Mild exercises can help combat stress but don't overdo it. Even if you exercise regularly, over exercising can lead to injury.

Traps to Avoid

- **Smoking is always a health risk.** Unfortunately, many ex-smokers become current smokers during crisis. Try to avoid using cigarettes as a crutch.

Traps to Avoid

- **Alcohol and other drugs.** Under extreme stress people may try to “self-medicate” with alcohol, caffeine and/or other drugs, legal and illegal. When you are in pain, it is hard to tell what is enough. Perhaps the best idea is to try to avoid mood-altering substances as much as possible. They may cause far more problems than they solve. Instead of a drink, take a walk. Instead of taking pills, try talking to friends or to your spouse.

Positive habits:

- Get ample rest
- Maintain a good diet and exercise
- Take time for leisure activities
- Follow a structured schedule but allows some flexibility in case you are unable to follow through
- Find and talk to supportive peers and/or family members about the incident
- Spend time with family and friends
- Expect the incident to bother you
- Call your EAP

Negative habits:

- Drink alcohol excessively
- Use legal or illegal substances to numb feelings
- Withdraw from significant others
- Stay away from work
- Reduce amount of leisure activities
- Have unrealistic expectations for recovery
- Look for easy answers
- Make major life changes or decisions at this time
- Be hard on yourself or others



Your Employee Assistance Program

Anytime, any day, you have free, confidential access to professional consultants and online resources to help you be your best. To access these services, call or log on to get started.



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