



KENTUCKY COMMUNITY CRISIS RESPONSE TEAM

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These interventions are to be done only by current KCCRT Members trained in these interventions.

If found, please contact:

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## RESPONSE PRE-MEETING

*Minimum of 30 minutes prior to intervention time.  
More time needed if situation is particularly complicated.*

Check ID & Accountability Tags  
Team Meets with POC/Agency Representative  
Advise POC of suggested intervention logistics

### TEAM LEADER:

- Review planned intervention
- Assign parts of intervention
- Assign tracker for total attendees & time spent
- Remind:
  - Identify self as peer or team member
  - Watch for persons having difficulty
  - Pick only a few reactions and things to do
  - Count one-on-ones and discipline
  - Turn off cell phones & put away
- Check room for readiness
  - Informational Briefing & RITS:  
Classroom or theatre style
  - Defusing & Debriefing:  
Circle of chairs, one entrance into circle



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## POC GUIDANCE

Based on meeting with POC, assess if planned intervention is appropriate. Consult with KCCRT Staff as needed.

- **Ask POC:**
  - Is anyone having a particularly difficult time?
  - Has anything else happened recently that is impacting personnel?
- **Recommend POC not stay for intervention**  
*(other than for the Informational Briefing or RITS.)*
  - Unless POC or crew insists
  - Crew may not be comfortable being vulnerable in front of them
  - Rank may keep some from participating
- **Provide one-on-one to POC**
- **Ask if POC has questions**



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## CONFIDENTIALITY STATEMENT

“Everything that is said during this intervention or to a team member is confidential.

Team members will hold comments in the utmost confidence with the following exceptions:

- If someone makes a statement or threat to harm themselves;
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## SAFE-R MODEL

*(For brief 10-20 minute 1:1 intervention)*

### S STABILIZE SITUATION

- Introduction; establish rapport
- Reduce stimuli; meet basic needs
- Communicate clearly

### A ACKNOWLEDGMENT OF CRISIS

- Acknowledge event and reactions
- Encourage safe ventilation
- Person describes what happened & their reactions

### F FACILITATE UNDERSTANDING

- Normalize reactions
- Explain common reactions to challenging events
- Provide reassurance

### E ENCOURAGE ADAPTIVE COPING

- Discuss prior and new coping skills
- Acceptance & utilization of resources

### R RECOVERY OR REFERRAL

- Restore to functioning
- Refer for continued care (if needed)
- Refer to support resources



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## RITS (DEMOBILIZATION)

*For operations personnel/homogeneous groups.  
(Post operations period)  
Classroom/Theatre setting*

### PROCESS

- 1 room for process; 2nd room for rest and refreshments
- Keep work teams together
- Can be done by 1 team member
- Limit information to 10 minutes; less if group is very tired
- Provide **Information Session** after Command Briefing

### INFORMATION SESSION

- Review Typical Reactions - *Incident specific*
- Review Coping/Stress Management
- Let group know if other response services are planned
- Hand out **Common Reactions** brochure when finished



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*(RITS Continued)*

**GOALS**

- Assess well-being of personnel
- Mitigate impact of stress
- Provide stress management information
- Assess need for additional services
- 1:1 support



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## INFORMATIONAL BRIEFING

3-500 people; 20-30 minutes –  
Classroom/Theatre setting

### POC, AGENCY AUTHORIZED REPRESENTATIVE

- Update attendees on FACTS, condition of injured, funeral arrangements, steps being taken by agency due to incident, and when more updates will be given.
- (If no POC, KCCRT Team Leader provides update.)
- Turn briefing over to KCCRT

### INTRODUCTION

- Team members provide name and 1 Peer Discipline or identify as Team Member only!
- Give overview of process - Providing Information
- Not an operational critique
- No notes/recording
- Read Confidentiality Statement
- Leave & return quietly



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*(Informational Briefing Continued)*

**ACKNOWLEDGEMENT**

- Acknowledge the incident & gravity of situation
- Offer condolences when appropriate

**REVIEW COMMON REACTIONS**

- Cognitive
- Behavioral
- Emotional
- Physical
- Spiritual

Identify Major Themes  
(fear, guilt, sadness, anger)  
based on incident

**COPING/STRESS MANAGEMENT**

- Review positive coping, self-care techniques
- Review stress management techniques
- Identify support network & referral options

**CLOSURE**

- Provide KCCRT approved brochures & handouts as appropriate
- Final assurance/confidentiality
- 1:1 peer support will be available
- Thank them



*(Informational Briefing Continued)*

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## DEFUSING

*20–45 minutes Room set-up—circle  
Immediately after operations end or as soon as possible  
Small homogeneous group;  
roughly equal exposure to trauma.  
Participants speak when ready. Do not go around circle.*

### INTRODUCTION

- Introduce Team/present guidelines
- Read *Confidentiality Statement*
- Do not have to speak
- Relate your own experiences
- Not investigation or operational critique
- All view points are important
- Describe process

### EXPLORATION

- What happened from your viewpoint?
- Minimal clarifying questions
- Experiences and reactions
- Was anything significant for you?
- What sticks with you now?
- Anything else?



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*(Defusing continued)*

**INFORMATION**

- Summarize their exploration
- Normalize their response based on themes presented
- Teach multiple stress management skills
- Encourage reasonable activities
  - Diet/Family life
  - Recreation
  - Warn off alcohol etc.
  - Q & A

**CLOSURE**

- Reassure as necessary
- Provide KCCRT approved brochures and hand outs as appropriate
- 1:1 peer support will be available
- Assess need for more help



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## DEBRIEFING

Room set-up—circle

(Post crisis: 1-10 days after other intervention)

### 1. INTRODUCTION

- Self/team members
- Give overview of process
- Will help lessen impact
  - eat/sleep/work better
- Not an operational critique
- No notes/recording
  - put cellphones away/off
- Confidential
  - (read *Confidentiality Statement*)
- You will only be asked to speak twice, participation in discussion is voluntary
- Questions as you wish
- No breaks
  - leave & return quietly if needed
  - a team member will check on you
- Ensure everyone belongs here
- No food/drink



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*(Debriefing Continued)*

## **2. BRIEF SITUATIONAL REVIEW**

**(GO AROUND CIRCLE)**

- Who are you?
- What was your role?
- What happened from your viewpoint?

## **3. FIRST IMPRESSIONS OF EVENT**

**(GO AROUND CIRCLE)**

- Your 1st, most prominent thought during incident?
- Any upsetting or unusual thoughts?

## **4. ASPECTS CAUSING MOST DISTRESS**

**(AS READY)**

- What was the worst part of incident for you?
- What part left the biggest impression on you?

## **5. SIGNS OF DISTRESS**

**(AS READY)**

- What has life been like for you since this event?
- What stress reactions have you noticed?
- What physical or behavioral changes have you noticed?



*(Debriefing Continued)*

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## **3. FIRST IMPRESSIONS OF EVENT**

**(GO AROUND CIRCLE)**

- Your 1st, most prominent thought during incident?
- Any upsetting or unusual thoughts?

## **4. ASPECTS CAUSING MOST DISTRESS**

**(AS READY)**

- What was the worst part of incident for you?
- What part left the biggest impression on you?

## **5. SIGNS OF DISTRESS**

**(AS READY)**

- What has life been like for you since this event?
- What stress reactions have you noticed?
- What physical or behavioral changes have you noticed?



*(Debriefing Continued)*

## **2. BRIEF SITUATIONAL REVIEW**

**(GO AROUND CIRCLE)**

- Who are you?
- What was your role?
- What happened from your viewpoint?

## **3. FIRST IMPRESSIONS OF EVENT**

**(GO AROUND CIRCLE)**

- Your 1st, most prominent thought during incident?
- Any upsetting or unusual thoughts?

## **4. ASPECTS CAUSING MOST DISTRESS**

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- What was the worst part of incident for you?
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*(Debriefing Continued)*

## **6. STRESS MANAGEMENT INFO**

- Normalize reactions expressed by the group
- Identify coping techniques they have used in the past
- Illicit their stress management techniques
- Teach stress management/coping techniques for identified reactions
- Encourage them to seek support

## **7. SUMMARY**

- Summarize their exploration
- Normalize their response
- Q & A
- Assess need for more help
- Final assurance/confidentiality
- 1:1 peer support will be available
- Provide KCCRT approved brochures and handouts if appropriate
- Thank them



*(Debriefing Continued)*

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# PATS

## POST ACTION TEAM SUPPORT

*(Post Operations – Team Care) 10-15 minutes*

### STAGE 1: REVIEW

- What themes emerged?
- What was participation level of group?
- Is there anything that concerns you?

### STAGE 2: RESPONSE

- Anything you wish you had said?
- Anything you said or did that you wish you hadn't?
- What was the hardest part of this for you?

### STAGE 3: REMIND

- Is there any follow up to be done?
- What are you going to do to take care of yourself?
- Report to Staff how the process went.

*Any follow up will be done by Staff.*



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## ASSESSMENT FOR SUICIDE RISK

- Does the person have a plan?
- Is the person actively suicidal at the moment?
- Does the person have access to a weapon or the means to carry out the plan?

### **IF THE PERSON IS ACTIVELY SUICIDAL AND HAS IMMEDIATE ACCESS TO A WEAPON:**

- Signal for another KCCRT Team Member to come to you or walk the individual to another team member; Do not leave the person alone.
- Call 911 and let them know who you are, and why you are calling.
- Remain with the person until help arrives.
- Let the Team Leader know what is going on.
- Inform KCCRT Staff.

### **IF THE PERSON IS HAVING SUICIDAL IDEATIONS BUT DOES NOT HAVE ACCESS TO A WEAPON:**

- Signal for another KCCRT Team Member to come to you or walk the individual to another team member; Do not leave the person alone.
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## SEA-3

### Assessment Considerations

#### SPEECH

- Amplitude, quality flow, organization

#### EMOTION

- Dominant mood, appropriateness, absence, euphoria, depressed anger, hostility, fear, anxiety, or apprehension

#### APPEARANCE

- Unkempt, unclean, clothing disheveled, dirty, atypical, unusual, or bizarre physical characteristics

#### ALERTNESS

- Oriented to person, place, and time; insight, judgment, memory, intellectual functioning stream, content of thought

#### ACTIVITY

- Facial expressions, posture, movements, interactions with helper



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## CRISIS NUMBERS

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### EMERGENCY ASSISTANCE / REPORTING

National Suicide Prevention Lifeline 988  
\*Veterans—dial 1 or text 838255  
\*Spanish Speakers—dial 2  
\*LGBTQIA+ Support—dial 3  
\*Deaf/Hard of Hearing- Video relay  
& voice caption  
TTY 1-800-799-4889

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Child / Adult Abuse Hotline 1-877-KYSAFE1  
(597-2331)

National Domestic Violence Hotline TTY 1-800-799-7233  
1-800-787-3224

Alcoholics Anonymous 1-800-467-8019

National Drug Helpline 1-888-633-3239

Poison Control Center 1-800-222-1222

State Police Emergency 1-800-222-5555



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### KCCRT STAFF

24/7 Response Line 888-522-7228

### IF YOU CANNOT REACH STAFF, CALL:

Duty Officer—State EOC 502-607-1638

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### CRISIS LINES

Copline (Law Enforcement) 1-800-267-5463

Safe Call Now (Public Safety) 1-800-267-3020

Fire/EMS Helpline 1-888-731-FIRE  
(3473)

First Responder Crisis 1-844-550-HERO  
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### SAMHSA

Disaster Distress Helpline 1-800-985-5990  
\*Hearing Impaired Relay Service:  
TTY 1-800-846-8517  
Text **TalkWithUs** to 66746  
\*Spanish Speakers: dial 2  
Text **Hablanos** to 66746

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### COMMUNITY MENTAL HEALTH CENTERS

Four Rivers Behavioral Health 1-800-592-3980

Pennyroyal Center 1-877-473-7766  
\*Christian County Only 1-270-881-9551

River Valley Behavioral Health 1-800-433-7291



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Lifeskills		1-800-223-8913
Communicare		1-800-641-4673
Centerstone Kentucky		1-800-467-3123
Northkey		1-877-331-3292
	TTY	1-859-331-1792
Pathways		1-800-562-8909
Comprehend		1-877-852-1523
Mountain Comprehensive Care		1-800-422-1060
Kentucky River Community Care		1-800-262-7491
Cumberland River		1-800-273-8255
Adanta		1-800-633-5599



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### DISASTER RELIEF SERVICES

*Temporary Sheltering/Housing, Mental Health Assistance, Financial Assistance, Health Services*

#### AMERICAN RED CROSS

##### KENTUCKY REGION

Western KY Chapter 270-683-2438  
South Central KY Chapter 270-781-7377  
Louisville Area Chapter 502-589-4450  
Bluegrass Area Chapter 859-253-1331  
Eastern KY Chapter 606-325-1626

#### GREATER CINCINNATI—DAYTON REGION

Greater Cincinnati/

Ohio River Valley Chapter 513-579-3000

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### LOCATE A FOOD BANK

Feeding Kentucky 859-986-7422



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