

# Grief, Trauma and Debriefing



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- Post-traumatic stress is a normal reaction in a normal person to an abnormal event.



# Working with Trauma Survivors

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## What Workers Need to Know:

Health care workers, direct care workers, or volunteers may come into contact with trauma survivors and traumatic events during the scope of their work.

Some workers interact with survivors as the traumatic incident is unfolding, others may work with survivors weeks, months, or even years after a traumatic event has occurred.

Why it's important for those who work with trauma survivors to know about traumatic stress:

1. Increases ability to help the trauma survivor
2. Decreases chance of doing harm
3. Increases self-care for worker



# 1) Increases Ability to Help the Trauma Survivor

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Trauma survivors are in an ongoing process of healing and recovery.

Approaching survivors with genuine respect, concern, and knowledge about their process increases the likelihood that you can:

- Answer some of their questions about what they may be experiencing
- Normalize their distress by letting them know that what they are experiencing is normal
- Help them to learn effective coping strategies
- Help them to be aware of possible symptoms that may require additional assistance
- Reduce their perception of helpers' potential insensitivity
- Give them a positive experience that will increase their chances of seeking help in the future



## 2) Decreases Chance of Doing Harm

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Knowing that an individual is a trauma survivor helps the worker to know not to press the individual into a discussion of a traumatic event soon after exposure to avoid a potentially detrimental effect on the traumatized individual.



### 3) Increases Self Care for the Worker

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Understanding traumatic stress can help the worker apply the knowledge to themselves. Some individuals who work with trauma survivors experience an enhanced sense of meaning, self-esteem, respect for the strength of others, and connection with humanity. However, some research shows that working with trauma survivors, under certain conditions, may have negative effects like burnout.



# Burnout

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- The term "burnout" has been applied across helping professions and refers to the cumulative psychological strain of working with many different stressors. It often manifests as a gradual wearing down over time.

The factors contributing to burnout include:

- Professional isolation
- Emotional drain from empathizing
- Difficult client population
- Long hours with few resources
- Ambiguous success
- Unreciprocated giving and attentiveness
- Failure to live up to one's own expectations for effecting positive change

The symptoms of burnout include:

- Depression
- Cynicism
- Boredom
- Loss of compassion
- Discouragement



# Compassion Satisfaction

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There is also the possibility that people working with trauma survivors feel a powerful sense of satisfaction with the work. Figley has coined the term "Compassion Satisfaction" to describe this process, which involves the development over time of a much stronger:

- Sense of strength
- Self-knowledge
- Confidence
- Sense of meaning
- Spiritual connection
- Respect for human resiliency



# Complicated Grief vs Trauma

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Complicated grief is associated with considerable morbidity and risk of physical illness. PTSD develops in approximately one-third of cases involving sudden, unexpected death of a close friend or relative and can result in comorbid—but distinguishable—reactions to the loss

## Clinical features of complicated grief:

- Constant longing, yearning, or pining for the lost person
- On edge or jumpy
- Trouble accepting the loss
- Difficulty trusting others
- Anger or bitterness about the loss
- Uneasiness about moving on with life
- Emotionally numb
- Trouble feeling connected to others
- Feeling as if there is no future or that the future holds no meaning without the lost person

## Clinical features of posttraumatic stress disorder:

- Exposure to traumatic event characterized by actual or threatened death or serious injury OR threat to physical integrity of self or others
- Peritraumatic response must be characterized by intense fear, helplessness, or horror
- Re-experiencing symptoms (1 or more), such as intrusive distressing memories or nightmares
- Avoidance and numbing symptoms (3 or more), such as avoidance of trauma-reminiscent cues, contexts, or conversations
- Hyperarousal symptoms (2 or more), such as concentration difficulties, exaggerated startle response
- Duration: Symptoms must be present for at least 1 full month after the trauma and must be of sufficient severity to compromise functioning



# Debriefing

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## Why debriefing techniques matter

Debriefing can help you:

- Create staff consistency
- Learn from challenges and success
- Create plans to make positive change
- Deal with incidents more effectively next time
- PREVENT a next time

## Why staff consistency matters

There are a lot of things that staff consistency can do for you, including:

- Remove uncertainty for staff about their job responsibilities
- Build trust among staff
- Promote teamwork
- Consistency is also linked to success



# Debriefing

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How debriefing techniques promote consistency

- Does your organization currently debrief? If so, how often do you use it (always, sometimes)?
- When you debrief—always and every time—you will see improvement
  - You will stop doing the same things over and over again that don't work
  - You will start doing things consistently that do work
- Your results show whether you're being consistent or not. To be consistent, the first thing you need to do is make sure you're debriefing.



# Debriefing

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- Debriefing interventions have sprung from the understandable desire to reduce—if not eliminate—victims' suffering after traumatic loss.
- Unfortunately, no compelling evidence has shown that an intervention given within a few days of a traumatic event can prevent significant psychological distress.
- Evidence does suggest, however, that components of psychological debriefing discussed here may help you provide effective “first aid” to trauma victims and identify persons at risk for chronic psychological problems.



# Crisis Response Checklist

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- Is an important tool when managing the complexities of a critical incident
- Staff will have a clear understanding of how to implement their own crisis response team and plan for their specific environment.



# CPI Model to Debrief

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- The COPING Model<sup>SM</sup> can also be used to structure a staff debriefing

This model outlines 6 important steps after an emotional and/or physical crisis:

1. Control
2. Orient
3. Patterns
4. Investigate
5. Negotiate
6. Give



# COPING Model<sup>SM</sup>

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- Benefits of using this model for Debriefing

It helps you ensure that staff:

- Know and follow your policies and procedures
- Actions and responses during a crisis are consistent with the training you give them
- Actions and responses are consistent with your organization's philosophy
- Actions and responses are consistent with the behaviors that are displayed during an incident
- Use this debriefing model to promote staff consistency



# CPI Level One for Debriefing

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- 1. **Control**: Ensure that staff have regained physical and emotional control
  - Are staff ready to discuss what happened?
  - What went well?
  - What can be done differently in the future?
- 2. **Orient**: You understand the basic facts of the incident. Establish what happened, listen to the perspective of every person involved, remain nonjudgmental
  - What happened?
  - Who was involved?
  - When did they get there?
  - What was each person's response during the situation?



# CPI Level One for Debriefing

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- 3. Patterns: Look for patterns in causes and responses
  - What trends did each person observe?
  - Are there things that seem to have caused the individual's behavior?
  - Do staff have participating factors at play as well?
  - If so, what are they?
- 4. Investigate: Determine what needs to change
  - Brainstorm options of what might be done differently next time
  - Are there things you can do to prevent the situation from reoccurring at all?
  - How can you strengthen or improve individual and team responses?
  - What resources do you have available?
  - What skills can team members practice?



# CPI Level One for Debriefing

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- 5. Negotiate: Agree on the changes and improvements to make
  - Make a commitment to change
  - Agree on how to respond in the future
- 6. Give: Offer each other support and encouragement
  - Be sure to express trust, confidence, and respect for your colleagues.



# Layer Two of Debriefing

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## 1. Control: Cultural shift and improvement changes

- Structure your internal environment for change
- Help direct the culture shift to take place
- Sustain the culture to maintain the changes long term

## 2. Orient: Action for change

- Orient each other to what you're going to do next time
- As you progress, you'll start to see attitude changes, because you're creating that consistency within your organization
- You'll start to see staff members being consistent during a response
- Always review end goals, so staff know what you're working together to accomplish
- Be sure to touch base with reminders



# Layer Two of Debriefing

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- 3. **Patterns**: Record and track the accomplishments and progress that staff make
  - As you achieve benchmarks, be sure to celebrate your progress
  - Also, provide staff with opportunities to practice
  - Help them recognize early warning signs and where precipitating factors exist
- 4. **Investigate**: Take a look at your communication system
  - Identify how staff members communicating with each other
  - Identify how they are communicating in a moment of crisis, after a crisis, and before a crisis
  - Identify whether the communication is helping



# Layer Two of Debriefing

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- 5. Negotiate: Negotiate that all of this is an ongoing process
  - Nothing is ever perfect, even with as hard as we try
  - Everything is an ongoing process, so negotiate the process, and continue to visit it consistently
- 6. Give: Provide support
  - Everyone wants to have a good day at work, especially when you face difficulties and deal with problems that sometimes seem unsolvable
  - At the end of the day (and throughout!), make sure staff feel good, feel safe, and are successful



# Layer Two of Debriefing

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To be successful, make sure:

- That the team owns the vision of where they want to be
- That you consistently provide support for your plan
- That you're clear about what the support is going to be and what it's going to look like
- As you're making changes and seeing improvements and consistent responses through the debriefing process, give staff affirmation of their success. Positive rewards will help them see and recognize that the changes took place.



# Obstacles to Debriefing

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Common reasons organizations don't debrief:

1. Time is a huge factor:
  - You don't have time to sit down and discuss an incident
2. Minimize the importance:
  - You look at an incident and think, "It was only a verbal incident, so there's no reason to debrief."
3. No policy or requirement to debrief.
  - If it isn't required, it won't get done

If you don't make the time and only debrief the most serious incidents, you'll have a hard time helping staff build consistent responses



# Steps to Success

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To achieve consistency and help support staff:

1. Recognize the need for improvement
2. Commit to change
3. Help staff understand the importance of creating a consistent environment
4. Work through obstacles
5. Make time

Determine when and where debriefing will take place, and make it part of a policy. Ensure that documentation is a part of your process too.



# Other Thoughts about Debriefing

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- Debriefing is not a substitute for therapy
- Debriefing is a time to help staff process and de-stress from an incident
- It is a time to look at who may need external counseling (EAP)
- It is a time to look at antecedents to events (not blame)
- Should occur within 2 hours of the incident



# Crisis Intervention Models

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- It is not recommended to simply “wing it”
- It is not recommended to go into a counseling session with no plan
- Some models include:
  - CISD (Critical Incident Stress Debriefing)
  - NOVA (National Organization of Victim Assistance)
  - PFA (Psychological First Aid)
  - OSFA (Operational Stress First Aid)



# Critical Incident Stress Debriefing (CISD)

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- Critical Incident Stress Debriefing (CISD) is a specific, 7-phase, small group, supportive crisis intervention process.
- It is just one of the many crisis intervention techniques which are included under the umbrella of a Critical Incident Stress Management (CISM) program.
- It does not constitute any form of psychotherapy and it should never be utilized as a substitute for psychotherapy.
- It is simply a supportive, crisis-focused discussion of a traumatic event (which is frequently called a “critical incident”).
- The Critical Incident Stress Debriefing was developed exclusively for small, homogeneous groups who have encountered a powerful traumatic event.
- It aims at reduction of distress and a restoration of group cohesion and unit performance.



# Psychological First Aid

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The National Child Traumatic Stress Network and the National Center for PTSD are pleased to make the Second Edition of Psychological First Aid Field Operations Guide and accompanying handouts available. Psychological First Aid is an evidence-informed approach for assisting children, adolescents, adults, and families in the aftermath of disaster and terrorism.

## Psychological First Aid: The Core Actions

- Contact and Engagement
- Safety and Comfort
- Stabilization
- Information Gathering: Current Needs and Concerns
- Practical Assistance
- Connection with Social Supports
- Information on Coping
- Linkage with Collaborative Services

<http://www.nctsn.org/content/psychological-first-aid>



# Debrief Diamond: Key Phrases to Remember

## Description

"So what happened?  
... and then  
what happened next?"

*Continue asking until confident  
that the details of the scenario have  
been raised by the candidates*

"Let's not judge our performance now, let's just  
focus on what happened"

### Transition

"This scenario was designed to show..."  
"Let's address technical & clinical questions. What is the protocol for ...?"  
"How do we normally deal with this clinical situation?"  
"Everyone ok with that?"

"How did that make you feel?" *To participants then group*  
"Why?" *Then use silence*

## Analysis

"How did you / they do that exactly?"  
"Why did you respond in that way?" or "Why did you take that action?"  
"It feels like ... was an issue. Did it feel like that to you?"  
"What I am hearing from you is ... is that correct?"

"This is part of ..." *(identify the non-technical skill / human factor)*  
"We refer to that as a human factor or non-technical skill, which means ..."

### Transition

"So, what we've talked about in this scenario is ..."  
"What have we agreed we could do?"

"What other kinds of situations might you face that might be  
similar? How are they similar?"

"How might these skills we discussed play out in  
those situations?"

"What are you going to do differently  
in your practice tomorrow?"

## Application



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