Bringing Your Crisis Team Home After A Disaster:
Post Action Staff Support (PASS)
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When you send team members to do work after a disaster, you need to do some things differently. First, you should send your most experienced personnel—people who not only know the various CISM models, but also have used it on many occasions. You may think that because you have experienced personnel going out, they know how to take care of themselves and each other. This is probably true for as long as they are in the field, but they will need help when they return home to their own community. You must plan for this before they leave. I would offer the following suggestions.

Before the team leaves, they should be briefed with as much information as you can give them about what they will be doing, and what they might experience. Working with disaster survivors is not like anything they have done before. The closest experience that seems to compare is a line of duty death. The experience for the CISM team is overwhelming, with story after story of heart wrenching scenes, visual imprints, and seemingly never ending pieces of emotional trauma. A disaster, by its nature, extends for a far longer time on scene, with more visual devastation and trauma than most of us see in a lifetime. This may very well be a life changing event for many CISM team members, especially if they are working after a particularly intense disaster.

Before a team is deployed, each member should sign an agreement that commits him or her to attending a Post Action Staff Support (PASS) within five to seven days after their return. This is one of the most important things you need to do. Most volunteers returning from a disaster scene just want to escape it, and often think they are handling things just fine. This seems to be especially true for crisis response teams. It will not be true.

Second, teams should not work more than a week at a time at the disaster site. The trauma to the team will build with each day. The team should meet with each other at the end of each workday to do a mini-defusing for themselves. This helps prepare them for their work of the next day, and reminds them to do some of the things that they have been teaching victims during their CISM work. The team needs to take care of itself each day.

Third, the PASS should be completed by a team with at least one mental health professional. Some of the CISM team may be in need of a more thorough mental health assessment or follow up activities. The PASS team should not have been on the disaster site, so they do not have any direct trauma from this event. The PASS Team should be very experienced personnel who are trusted by their teammates.

The PASS for major disasters is slightly different than the model that Paul LaBerteaux and I have recommended and that is outlined in the International Critical Incident Stress Foundation’s CISM: Advanced Group Crisis Interventions Workbook.
HOW DO YOU PROVIDE POST ACTION STAFF SUPPORT?

The PASS process is a variation of the ICISF Model. It consists of three phases, REVIEW, RESPONSE, and REMIND.

The REVIEW phase is essentially a combination of the Introduction/Fact/Thought phase of the regular CISD. It utilizes questions designed to have members think about and discuss the debriefing and their participation in it. The following questions are examples of this phase:

- How did it go?
- What types of activities did you participate in?
- How do you think you did?
- What “ditzy” thing did you do?
- What themes emerged?

During this phase, the leader can guide the discussion into teaching what made the CISM experience so powerful for the members. Mostly you are trying to provide constant positive feedback on their work. Remember, you are validating their reactions to the experience and providing guidance on handling their reactions.

The RESPONSE phase is a condensation of the Reaction/Symptom phase of the ICISF CISD and works to elicit comments on the self-perception of the team members and any reactions they may have. The following types of questions seem to work well:

- What is your most vivid memory?
- What did you do that you wish you hadn’t?
- What didn’t you do that you wish you had?
- How has this experience affected you?
- What has been the hardest part of this experience for you?

During this phase, the leader guides some group discussion of the member’s self-impressions. If the person is blaming themselves for something or worried that they did something really wrong, it usually comes out during this phase. What then usually follows is reassurance by the other team members that no major errors occurred. This is also an opportunity for the team leader and team members to reassure each other that each individual contributed to the process and to offer alternative methods for handling problem issues. This is the prime time to teach new techniques or reinforce what the team actually did.

The REMIND phase correlates to the Teaching/Re-entry phase of the CISD. Questions in this step serve to help the team remember to do the same sort of things that we encourage the debriefees to do.

- What have you done to take care of yourself since your return?
- What will it take for you to eventually “let go” of this experience?
OTHER ACTIVITIES

The PASS model described above is offered as one activity for team maintenance. But of course, there are others that include:

- Follow up phone calls to provide private processing time for each team member
- Journaling or reporting about lessons learned
- Other opportunities to talk with one another about their experiences in a structured way
- An opportunity for the team to report to others about their experience and what they learned through the intervention

By using this type of structured approach to providing help to your team members, you will help to minimize the effects of the disaster experience.

Helping them to recover as quickly as they can and preventing them from having long term effects should be the natural goal of all people involved in doing crisis response work. It is the thing that keeps us strong and ready to go out again. It is vital that we take care of ourselves as well as we take care of others.