

Customer Handbook

# Crisis Management Services



**Please contact us for more information**

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# 1 Introduction

## 1.1 Overview

Crisis Management Services (CMS) involve a multi-faceted approach to crisis intervention, designed to offer emotional first aid after a critical incident. These services provide comfort, support, information, and guidance to organizations and employees impacted by a critical incident.

Homewood Health™ provides Crisis Management Services as an integral component of its short-term counselling and assessment services. The goal of our Crisis Management Services is to minimize the occurrence and impact of reactions resulting from any critical incident. These services are always provided to employees within an atmosphere of complete confidentiality and emotional safety.

This handbook describes the Crisis Management and Grief Support Services available to your employees and organization.

## 1.2 Important Contacts

If you have any questions feel free to contact Homewood Health™, North America-wide.

<b>English</b>	<b>1-800-663-1142</b>
<b>French</b>	<b>1-866-398-9505</b>
<b>TTY (hearing assistance)</b>	<b>1-888-384-1152</b>
<b>Other international locations</b>	<b>604-689-1717 (collect)</b>
<b>Website</b>	<b>Homeweb.ca</b>

**Note:** Visit the website to access our e-services directly or if you prefer to arrange for services by electronic means.

# 2

## Definitions and Terms

### 2.1 Critical Incidents

A critical incident is a traumatic or troubling event that is sudden, unexpected, and outside the normal realm of daily experience.

Normal experience is relative – what may be a routine experience on the job for one person, may be a crisis for someone else in a different line of work. Nonetheless, there may still be events that are beyond routine experience or abnormal, even for experienced personnel. Such incidents typically evoke strong emotional, physical, and behavioural responses.

Examples of incidents include:

- Sudden death of a colleague.
- Serious injury or threat of serious injury or death.
- Disasters.
- Acts of violence such as assault, abuse, terrorism, hostage-taking, etc.
- Serious work-site accidents.
- Responding to emergency situations.
- Multiple casualties.
- Witnessing a suicide.
- Death or serious trauma to children.

### 2.2 Critical Incident Stress

Critical incident stress is the physical, mental, and emotional reaction that goes along with unusually difficult events. It may include or be worsened by stress that is part of the normal day-to-day working environment. No one is immune to this stress, even the very experienced.

Critical incident stress is a normal reaction, experienced by normal people, to highly abnormal events. It is the line-of-duty wound that you cannot see and sometimes, in the heat of the event, do not even feel.

Stress is manifested in many ways. Some examples are:

- Physical reactions: Fatigue, shock symptoms, sweating, chest pain, nausea.
- Cognitive reactions: Memory dysfunction, decreased problem-solving or decision-making abilities, confusion.
- Emotional reactions: Anxiety/fear, guilt, depression, anger, grief, irritability.
- Behavioural reactions: Withdrawal, sick time, under- or over-eating, escape behaviours.

A more complete list of stress reactions is found in the Appendix.

# 3

## Crisis Management Services

### 3.1 About Crisis Management Services

Homewood Health's Crisis Management Services offer immediate and short-term help to individuals and organizations who experience an event or a series of events that produce emotional, mental, physical and behavioural distress or problems. This distress may destabilize the normal problem solving and coping skills of individuals, temporarily impacting core functioning, teams or entire organizations. Crisis intervention has several goals. Initially we stabilize the situation, reducing the impact to and reaction of employees. Additionally, we focus efforts on the organizations workflow with the goal of restoring the workplace to pre-incident functioning. Crisis intervention helps one to understand the crisis, their reaction to it and develops new coping strategies and sources of resilience. Participants in such a program are provided with education regarding stress and stress management, and an opportunity to express thoughts and emotions in a safe environment. The structured support provided is designed to engage their natural resilience to cope with the critical incident.

Crisis Management Services are:

- Confidential.
- Non-judgmental.
- Not an investigation or a procedural debriefing.
- Not psychotherapy.
- About taking good care of good people.

CMS benefits to participants include:

- Normalize their experience.
- Encourage group cohesion and social support seeking behaviours.
- Encourage participants to utilize constructive methods for dealing with acute stress, including talking things out and consciously choosing concrete actions that empower individuals.
- Decrease the likelihood that participants will use destructive means to cope with stress.
- Provide encouragement to those individuals who may need more support to overcome acute stress arising from the event to access individualized services.

## 3.2 Available Services

### Management Consultation

Discussions surrounding the organization's ability to restore safety and making sure the CMS interventions are delivered in a safe manner are critical in Management Consultation. Consultation with HR and front-line managers is a key component of our Crisis Management Service. Leaders can feel the impact of the crisis and are simultaneously needed to provide support and leadership to their respective teams. Management Consultation assists leadership in assessing the needs of employees and the organization, devising a plan on how to respond expeditiously and effectively in the ensuing days and weeks.

### Group Intervention

Homewood Health offers several forms of group interventions, each having specific value when used under the right conditions. With an emphasis on team building in today's workplace, a group approach is consistent with this type of collaborative culture. Groups foster connection and communication, strengthen the normalization message through times of uncertainty and attendees may learn new strategies and resources. Group interventions can occur same-day or within a few days after the incident. (These are discussed later in this document.)

### Individual Intervention

Allows for participants to access the services of the clinician in a more discrete manner to discuss "private" issues not disclosed in a group setting. Clinicians can get more detailed assessment of individual needs, firm up follow-up plans, and make personalized referral recommendations if needed. Typically individual interventions can be utilized in several situations: 1) as adjunct follow-up after group intervention, 2) as primary intervention in single employee termination support, and 3) as additional grief support intervention for family members separate from other employee group support.

### Follow-Up Services

Given the nature of crisis events in combination with other factors including but not limited to, your employees proximity to the event, the history of critical events and current life circumstances and environments, all employees receive handouts that seek to normalize reactions. The information also provides suggestions for recovery and how to access Homewood Health's Employee and Family Assistance services. A Clinical Manager will follow-up with Leadership after onsite support is delivered to assess both the service provided and to determine if any additional support may be needed. Group services may be requested on the anniversary dates of major incidents when strong anniversary reactions are anticipated.

# 4

## Crisis Management Response

### 4.1 Overview

Requests for Crisis Management Services should be made as soon after the incident as possible. Ideally a Homewood Health™ clinician should be deployed to the site no later than 72 hours after the incident. Our clinicians can be deployed to the site on the same day or within 24-72 hours, as requested. The Homewood Health™ coordinator will discuss with you the circumstances in which same day deployment is recommended and circumstances in which deployment within 24-72 hour period is recommended.

If deployment is the same day (e.g. less than 24 hours have passed since the event occurred) the Homewood Health™ clinician will meet with employees to conduct brief group meetings and provide individual crisis support as needed, with the goal being safety and stabilization.

However, crisis management interventions are sometimes best conducted after at least 24 hours have passed since the event occurred. Affected employees are better able to engage their adaptive coping strategies because they have had time to recover from the initial shock of the event, reflect on their experiences, and get some distance from the incident.

### 4.2 On-Site Deployment

A critical incident often “breaks” the protective shield within which we usually interact with the world; it has likely undermined the “taken-for-granted” sense that the world is safe and bad things don’t happen to you or the ones you love. Once a situation has been perceived or experienced as threatening, neutral or ambiguous stimuli are more likely to be interpreted as dangerous, thereby increasing arousal and emotionality.

For these reasons, the goal of any Crisis Management intervention is to provide rapid psychological support to management and employees through adaptive coping strategies, acknowledging coping efforts and strengths that help to recreate a sense of physical and/or psychological safety. Through these efforts, we empower employees and the organization in the immediate aftermath of a critical incident.

The format for a CMS session will focus primarily on calming employees, assuring them that their reactions are normal under the circumstances, and assisting them to regain a sense of safety and empowerment regarding their recovery.

### 4.3 Same-Day Deployment

Crisis Management response on the same day as an incident may be less structured, and more flexible to allow for consultation with management in assessing needs, developing plans for accommodating affected employees’ shock responses that facilitate objective and subjective safety, and to allow participants time to respond, usually within the individual format through their potentially numbed or shocked state.

A same day response will follow the principles of Psychological First Aid (PFA). Interventions will focus on assessing immediate needs by supporting employees and the organization through the initial shock and disorientation. We also provide resources and support clarifying information. Our focus is on safety and stabilization. Many organizations need to continue core functions despite the crisis. As such, support is also provided to the organization in their return to normal business activities.

The clinician will provide “on the spot” crisis assessment and services that include:

- Consultation with the on-site manager regarding potential on-site safety considerations/risks, particularly for safety sensitive positions.
- Identification of a “safe” and “calm” on-site location for individual and small group service.
- Identification of who is at the epicenter of the incident.
- Prioritizing of who is most in need of immediate service and how.
- Assessment of shock reactions and appropriate response.
- On the spot intervention to calm and stabilize the crisis climate, which may incorporate “walk-around” on site to engage employees, in addition to small group and other individual services.

Often, same-day intervention is required where support for the immediate emotional reaction of employees experiencing the traumatic event is necessary to support current functioning at work or prior to end of shift.

#### 4.4 Short-Term Deployment

Interventions in the short term (but not same day) are recommended for Crisis Management response to most critical incidents as employees have had time to recover from the initial shock of the event, reflect on their experiences, and get some distance from the incident, thus they are able to focus more in-depth on adaptive coping strategies. An intervention within a short-term range after the event will typically take place 24-48 hours post-incident. The intervention can take place on-site or at an alternative location. Clinicians responding will provide consultation to managers about how best to support employees, as well as provide support to them should they have been affected by the incident and experiencing emotional reactions.

It is important to note that employees in these sessions will have a variety of reactions, expectations for the meeting, and motivation for participating. Group interventions undertaken within a few days after the incident has occurred will focus on allowing persons most affected by the incident to talk about the event, have their feelings normalized and validated, and receive information about stress reactions and adaptive coping from a professional. Because most employees may still be impacted by the stressful event(s), the clinician will therefore be directive and provide a degree of structure and information.

#### 4.5 Providing Individual Support

Crisis management and grief support (as discussed below) are emotional first aid measures, designed to help affected employees cope in the short term. This does not replace professional counselling. Management should be sensitive to their employees while they recover emotionally, and make sure that everyone is aware of appropriate support services (i.e. EFAP) that may be available.

Following the group intervention, the clinician can make him or herself available for brief (10-20 minutes) sessions with those who wish to do so. It is a good idea to ensure the availability of a separate, smaller room for individual meetings after the group meeting. This allows for participants to access the services of the clinician in a more discrete manner.

Individual sessions allow for a more detailed assessment of individual needs, discussion of “private” issues not disclosed to the group, and a firming up of a follow-up plan. Referral for counselling or to the persons’ family doctor can be made at this point. If you have reason to be concerned, try to encourage any affected employees to make use of this opportunity.

## 4.6 Arranging For Crisis Assistance Services For Employees

Most requests for Crisis Management Services are initially coordinated between Homewood Health™ and your human resources department, safety department, or equivalent. Contact your human resources or safety representative to arrange Crisis Management Services for your employees.

Homewood Health™ professionals are on hand 24/7 to respond to your needs. When you contact Homewood Health™, clearly state that you are seeking trauma assistance services or Crisis Management Services. After conducting an assessment by telephone with human resources personnel and local management, the Homewood Health™ Clinical Manager will deploy a local CMS trained counsellor to the site.

As discussed above, the services offered will either be on the same-day or within 24-72 hours of the event. The Homewood Health™ coordinator will assist you in determining the most appropriate response, as requested. In addition to individual and group support services, referrals for further support services will be provided, and follow-up contacts will occur with relevant key personnel.

During the telephone intake with the Homewood Health™ coordinator, you will need to have the following information available:

- Contact information
- Nature of the incident
- Timing of the incident
- Location of the incident
- Nature of injuries or fatalities
- How many employees and other individuals were involved
- Where those employees are currently and how they are doing
- Scheduling needs

## 4.7 Making Arrangements For A Group Intervention

The representative from Homewood Health™ will discuss with you the specific arrangements that need to be organized for a group intervention. It is important to follow these recommendations for the purposes of protecting confidentiality, and facilitating the smooth operation of the meeting.

The checklist in the Appendix of this document can be used to ensure that these arrangements have been prepared prior to the meeting.

## 4.8 Supporting Affected Family Members Following A Critical Incident

As a manager, you may be required to provide support to the family members of an employee who has been hurt or killed. Here are some suggestions:

- Ensure that family members have the means to travel to the hospital to visit a relative who has been injured.
- In cases of fatality or injury, ensure that immediate family members of the employee(s) have information about and access to support services (i.e. EFAP).
- Provide further information about coping and support available to those affected (i.e. handouts on dealing with traumatic events).
- Stay in touch with family members to provide any further information available about the incident, and any updates if there were injured employees.

# 5

## Collegial Grief Support

Collegial (relating to or involving shared responsibility, as among a group of colleagues)

Grief (is the internal part of loss, how we feel, it is the reflection of the connection that has been lost)

Collegial Grief differs from the death of an employee through tragedy whether at work or in the community. Homewood Health™ provides onsite grief counselling support and consultation for employees and leaders in the event of a co-worker's death or terminal illness, or the death of a co-worker's family member. According to statistics in both Canada and the United States, the number of critical incident requests due to employee death far outnumber other types of requests. Grief support may be in the form of brief individual sessions on a "first-come, first-served" basis, or as planned group meetings. The purpose of grief support is to guide and educate employees and managers in navigating the grief process, and to promote meaningful social support and group cohesion.

The essential format of a planned group meeting is essentially similar to that of other Crisis Management Services, providing an opportunity for participants to discuss the impact of their loss with each other as part of an extended information session. The facilitator can remind group participants that while the particular person at the centre of the group's concern is the immediate focus of the discussion, the issues discussed in the session may translate to other situations and contexts as well.

If the intervention is regarding a colleague who has experienced a loss or a serious illness, it may be prudent to recommend that the supervisor tell affected employees that a facilitator from Homewood Health™ will be coming to talk with the group about what the group is feeling, and how they might help and show support. The supervisor might also ask if there is anything in particular that the employee would like to have included in the meeting (e.g. how he or she would like others to help, anything he or she wants their coworkers to know, etc.)

# Appendices

- A. Checklist for Preparing a Crisis Management Group Intervention, Including Grief Support
- B. Providing Support To Employees Immediately Following An Incident
- C. Writing A Letter To The Bereaved
- D. Stress Response: Signs and Symptoms To Watch For
- E. Tips For Self-Care

## Preparing For A Crisis Management Group Intervention, Including Grief Support

- Determine how many people will be attending**
- Determine how many groups will be needed**
  - Large groups (more than 15) should be divided into separate groups.
  - Group individuals, if necessary, according to issues they have in common or extent of exposure to the incident (this will need to be negotiated with your Homewood Health™ contact person).
- Determine how much time will be needed**
  - Depending on the size of the group(s) and nature of the incident. Again, this will need to be negotiated with your contact person from Homewood Health™.
  - Ensure that participants will be able to attend the group meeting for the full length of time set aside. It is disruptive to the group if people must leave early.
- Secure a suitable space**
  - You will need to locate a quiet, self-contained room with enough chairs for everyone to face each other, where participants will not be disturbed by co-workers who are not participating in the meeting.
- Confirm a suitable time**
- Invite all relevant individuals**
  - Invite only those directly impacted by the event.
  - If managers or human resources staff were not directly impacted by the event, they should not attend the meeting. If there is information they wish to share with the group, they should do so at the beginning of the meeting and then leave.
  - Managers directly impacted by the event are best served in a separate group meeting (if there is more than one manager impacted) or individually by the CMS clinician on the same day as the other employees' CMS group.
  - Inform all potential attendees of the purpose, time, and location of the meeting. If the group is small, the invitation should be extended in person. If the group is large, ensure that the information is well posted and circulated. Reassure individuals of the confidentiality of the meeting and that participation is voluntary.
  - Reluctant attendees may be encouraged to attend by pointing out that they have an important part of the story and that their attendance would help others in the group.
  - Inform individuals that it is particularly important that they arrive on time.
- Ensure adequate coverage while attendees are in the meeting**
  - Whenever possible, arrange for adequate coverage on the job so that attendees will not have to leave prematurely due to work responsibilities.

## Providing Support To Employees Immediately Following An Incident

Although there will be much variation in the response to a particular situation, and your organization will likely already have established protocols in place for responding to a critical incident, the following outlines a few steps managers and supervisors can think about to help employees cope with the event and to provide support. These are suggestions only and may need to be modified according to the particular situation.

### Make sure the employee(s) is/are safe.

- Arrange for ambulance or police services if necessary. Advice regarding additional crisis intervention resources such as those available through the EFAP and Crisis Management Services.
- If any employees who are directly involved are to go home after an incident, ensure no one is going home to an empty house. Ensure that a support person (a co-worker, family member, or neighbor) will be able to stay with the impacted employee(s). If applicable, assess whether the employee(s) is/are in a condition to drive. If there are serious signs of distress, the employee should not drive. If the signs persist, have a family member or co-worker drive the employee, or provide a taxi to transport the employee.
- Ensure that employees have contact information for their EFAP (1-800-663-1142) and those employees understand that they can access the EFAP at any time. Also suggest to employees the option of requesting a Crisis Management Service. Determine who else would be involved and interested in participating in a CMS group or individual meeting.

### Find out the details of what happened (who, what, when, where, how)

- Who was involved?
- What happened? What caused the accident?
- When did it occur? Date?
- Where did it happen? Where are the other impacted employees now?
- How are the impacted employees doing/feeling? Be alert for serious signals, such as incoherence, distraction, repetition, fixation on a particular sight or smell, continuous shaking, teeth chattering, uncontrolled tears, numbness. Was anyone injured or killed? Try to determine the nature of any injuries sustained.
- Find out name and location of hospital any injured employee(s) were transported to, if applicable, and who accompanied the employee(s).
- Understand the differing level of impact that the event will have on those affected by the event based upon their level of exposure to the critical incident:
  - Immediate Victims: Those directly involved in critical incident (i.e. at epicentre of critical event).
  - Secondary Victims: Those who observed immediate effects of event on primary victims but not present at immediate event.
  - Family and work friends of immediate victims: Those indirectly affected by critical incident due to their connection with primary victims or later observation of critical incident scene (e.g. family or co-workers of primary victims who were not present at time of incident).

Acknowledge the feelings being expressed by the employee(s). *That's very distressing. Sounds like you feel really shaken.*

Listen and affirm. Be prepared for strong emotions from the person(s) involved

Express concerns for the employee(s). *How are you? Are you all right?*

Affirm something that the employee(s) has/have done, even if it is just contacting you.

Talk through what needs to be done with the employee(s). *What is your next step? What else needs to happen now?*

Offer suggestions if the employee falters.

## Writing a Letter to the Bereaved

There are six basic components to a letter or short note to someone who is bereaved. These include:

1. Acknowledge the loss:

*“This morning Mr. Smith told us the sad news of your father’s death.”*

2. Express your sympathy:

*“Let me first extend my heartfelt sympathy to you and your family. The loss must touch you very deeply.”*

3. Note special qualities of the deceased or recount a memory of the deceased (or a memory of a story that was told to you about the deceased):

*“Though I never met your father, I remember how touched I was when you described...His tenderness and humor were both captured in that story, as was your obvious love for him.”*

4. Note special qualities of the bereaved:

*“While our relationship has been largely in the office, I have seen you handle challenging situations for the first time and again. During this difficult period, I know you will draw on these same deep personal resources so many of us have come to respect and admire.”*

5. Offer assistance:

*“During your absence, Dan and I will cover your accounts—maybe not with your finesse but with as much savvy as we can muster. We’ve had a terrific mentor.”*

6. Close with a thoughtful word or phrase:

*“Keep in mind that this office is filled with people who care about you and are thinking about you in your sorrow.”*

## Stress Response: Signs and Symptoms to Watch For

### PHYSICAL

- sudden chills
- dizzy waves
- fainting
- shock symptoms
- muscle tremors
- muscle knots
- headaches
- chest pain\*
- vision changes
- difficult breathing\*
- racing heart, BP elevated
- the sweats
- dry mouth
- thirst
- nausea and vomiting
- bowel upsets
- weakness
- fatigue
- teeth grinding
- restlessness

### BEHAVIOURAL

- easily startled
- suspiciousness
- social withdrawal
- clumsy
- change in speech
- humour changes
- pacing
- insomnia
- alcohol use increases
- appetite changes
- hyper alert
- communications change
- antisocial acts
- can't relax
- no joy in sex
- quick emotional changes
- complaining
- desire to run away

### EMOTIONAL

- overwhelmed
- hopeless
- helpless
- anxious
- waves of panic
- depressed
- uncertainty
- outbursts of anger
- irritable
- agitated
- denial
- guilt
- fearful
- intense anger
- loss of control
- fake laugh
- detachment from others

### COGNITIVE

- scattered thinking
- confusion
- being in a daze
- difficulty concentrating
- forgetful
- simple math is hard
- no creativity
- nightmares
- a sense of reliving the experience
- intrusive images
- search for blame factor
- hyper vigilance
- loss of memory for things usually familiar with
- indecisive
- miss or excessive focus on detail
- flashback episodes

The list is intended as a complement to both ongoing education and interventions such as stress management programs. An individual should seek professional consultation if the above reactions persist longer than a month at a level that interferes with his or her ability to function.

**Note:** Symptoms marked with an asterisk (\*) require medical evaluation. The signs and symptoms listed here are by no means a complete list, nor is it intended to imply that any or all of these signals will be experienced by people who encounter stressful events.

## Tips For Self-Care

As a manager, having to deal with a critical incident can be extremely stressful, so good self care can be very important for your personal health and wellbeing. One or more of the following tips may help you get through the period following the critical incident:

- Avoid excess caffeine or alcohol.
- Drink lots of water
- Get a good night's sleep
- Include fibre and green vegetables in your meal
- Participate in moderate exercise (i.e., take a walk at lunch/break).
- Discuss with your supervisor scheduling a structured daily routine.
- Encourage yourself to go back to work.
- Keep to your normal routine as much as possible.
- Maintain regular activities outside of the home (i.e., work, errands, appointments, sports, etc.).
- Maintain social activities - do not isolate yourself.
- Return physical surroundings to original appearance.
- Talk about the specifics of the event with your friends and family - tell them it's important for you to talk it out.
- Take a warm (not hot) bath.
- Write down your thoughts.

## About Homewood Health

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Homewood Health offers the highest quality clinical support and intervention available within the EFAP industry, and an unmatched continuum of services — spanning health promotion, mental health and addictions support, and prevention-focused work-life balance services.

## Contact Us

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If you have any questions feel free to contact Homewood Health, North America-wide.

**English**            **1-866-565-4903**  
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### Other international locations

**604-689-1717** (collect)

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