

HEALTH CARE WORKERS



# Site Champion Training Manual

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# Acknowledgements

This instructor's manual, intended for those in high-stress jobs such as fire/rescue, healthcare, law enforcement, rail, and pretrial/probation settings, is derived from the Stress First Aid for Firefighters and Emergency Medical Services Personnel Student Manual, developed by the National Fallen Firefighters Foundation. The principal authors of The Stress First Aid for Firefighters and Emergency Medical Services Personnel Student Manual are Patricia Watson, Ph.D., of the National Center for PTSD, Vickie Taylor of Prince William (VA) Community Services/NFFF Behavioral Health Specialist, Richard Gist, Ph.D., of the Kansas City (MO) Fire Department, Erika Elvander of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury, Captain Frank Leto of the FDNY Counseling Unit, Captain Bob Martin of the Chicago Fire Department, Captain Jim Tanner of Prince William (VA) Fire and Rescue, District Chief Don Vaught of the Eugene (OR) Fire & EMS Department, William Nash, MD, Captain, MC, USN (Retired), Richard J. Westphal, Ph.D., PMHCNS-BC, Captain, NC, USN (Retired), and Brett Litz, Ph.D., of the Mental Health Core of the Massachusetts Veterans Epidemiological Research and Information Center at the VA Boston Healthcare System.

The Stress First Aid for Firefighters and Emergency Medical Services Personnel Student Manual represents a civilian adaptation of the Combat and Operational Stress First Aid (COSFA) Field Operations Manual, developed by the Bureau of Medicine and Surgery, Department of the Navy, in cooperation with the Combat and Operational Stress Control, Manpower & Reserve Affairs, Headquarters Marine Corps, the Navy Operational Stress Control, Chief of Naval Personnel, Total Force N1, and the National Center for PTSD, Department of Veterans Affairs. The principal authors of the COSFA Field Operations Guide included William Nash, Richard Westphal, Patricia Watson and Brett Litz. We are grateful to the military units and bureau listed above for allowing the adaptation of their work to help our nation's first responders.

## Overview

## A. Enabling Objectives

Upon completion of this 1-hour presentation, participants will be able to:

- 1. Describe the basic foundation of Stress First Aid.
- **2. Differentiate** between stress reactions and stress injuries.
- 3. Recognize Orange Zone Indicators.
- **4. Describe** different types of situations in which it would be appropriate to use each SFA action.
- **5. Explain** why Check must be performed continuously and often for every member of the organization.
- **6. Explain** the goals of the Coordinate function.
- **7. Describe** strategies for performing Cover, Calm, Connect, Competence and Confidence.

## **B.** Training Materials Required

- 1. Attendance Form
- 2. PowerPoint Slides and projector

## C. Presentation Notes

If time allows for a longer presentation:

- **1.Present** any optional example slides you would like or tell real stories to illustrate the core actions of SFA.
- **2.Ask** trainees to share relevant stories and situations.
- **3.Discuss** the SFA framework in the context of trainee examples.
- **4.Discuss** how trainees can apply the skills of SFA to their work settings.
- D. Trainee Support Materials
  - **1.SFA Pins and Pocket Cards**
  - 2.COVER-HCW SFA Workbook to be used during booster sessions.
  - **3.(Optional) SFA Handouts** that cover specific topics such a grief, moral injury, etc.

# **Slides and Discussion Points**

#### Slide #

## **Discussion Points**

## 1 Introduction

Welcome to Stress First-Aid (SFA) Training. This training is part of the "COVID-19 Protection to Ensure Resilient Health Care Workers (COVER-HCW) study" which is led by the RAND Corporation, a nonprofit research organization and funded by the Patient-Centered Outcomes Research Institute (PCORI).

[*Explain your background, credentials, and role. Consider leading introductions or an icebreaker. Discuss why you chose to be a site champion.*]

SFA is a set of supportive actions designed to help you with self-care and coworker support, to mitigate the negative impacts of stress.



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At the outset of the training, **make introductions**. Consider an icebreaker to help staff shift from patient care duties and work stressors to focusing on the training and each other.

**Explain your background**, credentials, and role. Provide primary and backup contact information so staff see you as an accessible resource tied to the intervention.

**Discuss why you chose to be a site champion** for this intervention and why you support the SFA model. This can include sharing your initial impressions of SFA, your experiences using the model in practice, and your thoughts on why SFA will be helpful to staff. For example:

- SFA is a good fit for health care workers because it is a self-care approach that can be used any time to help reduce distress.
- SFA is also a good fit for health care workers because it uses a peer-to-peer approach that enables everyone on a team to look out for each other.
- SFA takes little time to learn and with regular practice can be a low burden approach to maintaining wellness.
- SFA is based on cutting-edge stress science.
- SFA is designed to be used by members of teams working together to accomplish

lide #	<b>Discussion Points</b>	Slide
		<ul> <li>important missions, like firefighters and Marines.</li> <li>In addition to providing a set of tools to monitor and manage stress in individual healthcare workers, SFA serves as a strategic framework for assessing and managing stress in a team, unit, or organization.</li> <li>SFA may make you a better family member, friend, and member of your community</li> </ul>
2	<ul> <li>Health Care Research: Resilience and Burnout</li> <li><i>Physicians:</i></li> <li>2017 – 2018 national study included 5445 physicians</li> <li>Resilience scores were higher among physicians than the general employed population.</li> </ul>	<ul> <li>Health care professionals are resilient but may still experience burnout</li> <li>Efforts to address system issues can reduce burnout and promote well-being.</li> <li>Factors related to resilience in health settings include:</li> <li>Genuine interest in the wellbeing of staff</li> <li>Meaningful recognition</li> <li>Accessibility to support and collaboration</li> <li>Serater input into work conditions</li> </ul>
	<ul> <li>Resilience was inversely associated with burnout symptoms, but burnout rates were substantial even among the most resilient physicians.</li> <li>Even 29% of physicians with the highest possible resilience score had burnout.</li> </ul>	<ul> <li>A synthesis of systematic reviews related to resilience in health care organizations concluded that the following organizational factors were related to greater resilience in health care workers:</li> <li>A genuine interest in the well-being of staff</li> <li>Accessibility of support without being judged as "not coping"</li> </ul>
	<ul> <li>Conclusion: Additional solutions, including efforts to address system issues in the clinical care environment, are needed to reduce burnout and promote physician well-being.</li> <li>West, C. P., Dyrbye, L. N., Sinsky, C., Trockel, M., Tutty, M., Nedelec, L., &amp; Shanafelt, T. D. (2020). Resilience and burnout among physicians and the general US working population. JAMA network</li> </ul>	<ul> <li>Enhancement of coworker support and social support</li> <li>Safe discussions of events and sharing</li> <li>Providing opportunities for coworkers to work collaboratively</li> <li>Recognizing the importance of boundaries between work and home life</li> <li>Greater autonomy over time and content of worl</li> <li>Regulated working hours and adequate staffing</li> </ul>

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## **Discussion Points**

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#### Nurses:

Moral distress was a significant predictor of all 3 aspects of burnout, and the association between burnout and resilience was strong. Greater resilience protected nurses from emotional exhaustion and contributed to personal accomplishment. Spiritual well-being reduced emotional exhaustion and depersonalization; physical well-being was associated with personal accomplishment. Meaning in patient care and hope were independent predictors of burnout. Higher levels of resilience were associated with increased hope and reduced stress. Resilience scores were relatively flat over years of experience.

Khamisa, N., Peltzer, K., & Oldenburg, B. (2013). Burnout in relation to specific contributing factors and health outcomes among nurses: a systematic review. International journal of environmental research and public health, 10(6), 2214-2240. The SFA model highlights the importance of organizational and leadership support strategies that have received broad research support, such as sustained interest and appreciation for the well-being of staff, enhancement of social support, clear work boundaries, and regular staff recognition.

These strategies are particularly important to highlight because a recent Cochrane review found that the evidence for formal resilience training of health care professionals is limited and very uncertain (Kunzler et al., 2020). Cochrane Reviews are internationally recognized as the highest standard in evidence-based health care because they base their findings on the results of studies that meet their standards of quality criteria, with the most reliable studies included to inform decisions related to health care.

The research that was included in the Cochrane review has shown that resilience trainings may improve resilience and may reduce symptoms of depression and stress immediately after the end of the training, but they do not appear to reduce anxiety symptoms or improve well-being.

Kunzler, A. M., Helmreich, I., Chmitorz, A., König, J., Binder, H., Wessa, M., & Lieb, K. (2020). Psychological interventions to foster resilience in health care professionals. Cochrane Database of Systematic Reviews, (7).

Cheong Wei Terence Huey & Janice C. Palaganas (2020): What are the factors affecting resilience in health professionals? A synthesis of systematic reviews, Medical Teacher, DOI: 10.1080/0142159X.2020.171402.

## Discussion Points

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#### 3 What is Stress First Aid?

SFA is a framework to improve recovery from stress reactions, both in oneself and in coworkers. It was based on research support for five elements that seem to be related to recovery from different types of ongoing adversity. The framework aims to support and validate good friendship, mentorship, and leadership actions. The potential strategies identified within each element were derived via focus groups with those judged to be good leaders, coworkers, and mentors in each culture who created a version of the model (military, fire/rescue, law enforcement, healthcare, rail, and pretrial/probation).

SFA fosters longevity on the job – in potentially stressful work environments, the value of reducing the impact of stress translates into a stronger workforce, less turnover, more productivity, and less likelihood of employees leaving the job prematurely.

## Characteristics of Stress First Aid

 Flexibility and "tiny steps" are emphasized – SFA should always be tailored in a flexible way to fit your personality and style, as well as your capacity to help others in any given moment. It should look different for each person who implements Stress First Aid is a framework to improve recovery from stress reactions

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- SFA can reduce stigma by changing culture. When it becomes part of training from the start of a career, acknowledgement of stress and stress reactions becomes a matter of fact, common sense approach that reduces stigma. SFA creates a common language with which to discuss stress and stress reactions in an efficient way.
- SFA addresses stress reactions before they create larger problems that can derail health, relationships, or a career.



Slide #	Discussion Points	Slide
•	<ul> <li>it and within each context it's implemented in.</li> <li>The timing and context are important to how one uses SFA – what you can achieve with any interaction depends on many factors, such as how much time you have, where you are, how open a person is to hearing what you have to say, and how long after the incident the conversation takes place.</li> <li>Mentoring and problem solving are highlighted. Your role may be to provide immediate support and possible assistance (either verbally or through your actions) to someone reacting to overwhelming stress in a highly stressful moment. Or you may need to help a coworker problem solve and manage tasks that seem overwhelming to them when they've been under significant stress for an extended period of time.</li> </ul>	<ul> <li>SFA is not meant to address all ranges of issues <ul> <li>it is a first aid model, and not designed to deal with lifelong problems, personality issues, serious mental health issues, or complex problems that would require more intensive interventions.</li> </ul> </li> <li>Bridging to higher care is recommended when indicated – always think in terms of referring a person on to an employee assistance program (EAP) or mental health provider or other professional if they are having difficulty adjusting and are experiencing disabling or persistent stress reactions. Effective, short term treatments are available. Being a bridge to that type of care may be your most helpful SFA action.</li> </ul>
	How is Stress First Aid Different? Healthcare workers are often working long hours with limited time. Many stress management programs aim to give them tools to reduce stress and build resilience without taking into	How is Stress First Aid Different? Rather than prescriptively telling people how they should support each other, SFA highlights the <i>importance</i> of coworker support, which can often only arise in the unspoken understandings that result from working together.

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account that they may not have the capacity or time to practice or

Stress First Aid is responsive to

high-stress job environments in

the sense that it gives a

use those tools.

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Rather than prescriptively telling people *how* they should support each other, SFA highlights the *importance* of coworker support, which can often only arise in the unspoken understandings that result from working together.

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framework of elements that have been linked to better resilience and highlights the need to use the framework flexibly.

#### Stress Continuum Model

- The Stress Continuum Model was developed as a visual tool for assessing an individual's stress experiences, zones of stress, and stress responses. It forms the foundation for Stress First Aid. It also indicates that four possible types of stress "injury," trauma, loss, inner conflict / moral injury, and long-term chronic stress, or "wear and tear," might move a person from the Yellow Zone of stress the Orange or Red Zones.
- Stress responses lie along a . spectrum of severity and type from transient and mild to chronic and debilitating. The continuum has four zones: Ready (Green), Reacting (Yellow), Injured (Orange) and Ill (Red). It is important to note that 100% of people will react when faced with significantly stressful experiences. However, the way in which they respond will depend on many factors, including how prepared they are for the stressor and how they interpret it. A person's reaction can range relatively rapidly from Green to Yellow

It is frequently only in moment-to-moment encounters that the right support can happen, if we are aware of its importance and open to being creative in accessing and giving that support.

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- Movement into the Orange Zone is usually caused by an accumulation of different types of stressors or a pretty severe stressor. In the Orange Zone you start to see more severe and persistent distress or impairment, the person doesn't feel like themselves, or they have a loss of control of their stress reactions. They might feel strong panic on depression, rage, guilt, or blame. In this zone it starts to feel like the stress "leaves a scar," and the person is at high risk for having trouble functioning and strong or persistent distress.
- The Red Zone is usually reserved for diagnoses like PTSD, depression, anxiety, or substance abuse. What signifies a person being Red Zone is that their symptoms are very persistent or worsen over time, the person experiences severe distress, or has significant difficulty functioning at work or in their home life. The Stress First Aid model was designed to help people move themselves or their coworkers from the Red and Orange Zones back to the Yellow or Green Zones.
- The ethos in many high stress work cultures has been that after a difficult event, one should be able to "tough it out." This is still the case in many settings, where the stigma associated with

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to Orange to Red and back again.

Stress First Aid was adapted • from the Navy/Marine Corps **Combat Operational Stress** First Aid (COSFA). The Stress Continuum Model was developed as a visual tool for assessing an individual's stress responses and forms the foundation for both COSFA and SFA. It was also designed to reduce stigma by showing that people can go in and out of ranges of stress reactions frequently, based on a variety of factors.

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This Model acknowledges that within this range of reactions to stress, a person can go from being in optimal functioning--feeling good, mentally and physically fit, mission focused, calm, and motivated---into what's called the Yellow Zone. In the Yellow Zone a person can feel more irritable anxious or down, have a loss of motivation, loss of focus, have trouble sleeping, or have muscle tension or other physical changes, but these are transient reactions.

## Slide

reacting to stress or stress injury behaviors is still very real and people will try to conceal stress reactions from supervisors to avoid medical or psychological intervention.

However, it is usually not possible to keep these behaviors hidden for long from family members, coworkers. and friends. When a coworker recognizes that someone is in trouble, it is important to try to assist in some way. Getting this individual connected with the next level of help as soon as possible may help prevent their reaction from progressing into the Red Zone. And once an individual has moved into the Red Zone, the goal is to help get them into treatment as soon as possible.

## 7 The Stress First Aid Model

Stress First Aid is based on research literature that says that people tend to do better in ongoing, stressful circumstances when they have *one or more* of "five essential elements" to counteract the adversity. Those elements are:

- Being able to move towards a greater feeling of safety
- 2. Being able to calm themselves
- 3. Feeling connected to others
- Feeling that they will be able to get through what they're having to deal with
- 5. Having a sense optimism, faith, or hope.

Stress First Aid maps onto these five elements, and adds two more core actions, because it is a long-term model designed to help support oneself and one's coworkers.

The Stress First Aid model is initiated when a person experiences one or more stressful circumstances, which can occur either at work or in the person's personal life. It's different from models like critical incident stress management, in that SFA is only initiated if the person is showing evidence of experiencing stress reactions. It's also different because the stressors could occur at home, and only be detected by fellow coworkers because of changes they see in a person's demeanor or functioning.



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Coordinate has also been added to the five essential elements. Coordinate serves as a reminder that this is a first aid model and includes bridging people to higher care as needed. This action should also be continuous. It involves always being aware of additional resources that you may need to access yourself or share with a coworker if your SFA actions don't sufficiently alleviate stress reactions.

Once stressors provoke distress or loss of functioning, there are five core SFA actions that can be considered:

- 1. Cover maps onto helping a person feel safer.
- 2. **Calm** involves calming the person down or staying calm through an extended difficult experience.
- 3. **Connect** involves helping a person feel a greater sense of connection to others, which may be coworkers, mentors, or family members. This is important because when people go into the Orange Zone, they often isolate themselves from others, and lessening the possibility of social support. Making connections with others has been shown to be very helpful in recovery from many types of stress.
- 4. **Competence** involves helping a person feel more capable in a number of ways, including feeling more capable to perform their duties at work, feeling more capable to handle their own stress reactions, or feeling better able to function and recover from stressful situations.

Checking in with self or others has been added to the five essential elements. It involves observing, paying attention, and checking in on coworkers on a regular basis, so that you know their baseline functioning and behavior and can therefore see stress-induced changes in behavior or functioning. This action should be ongoing and continuous---occurring even before stressors or reactions appear. In high-stress jobs, everyone should be checking on the wellbeing of themselves and coworkers regularly in order to intervene early in stress reactions.

#### 8 Essential SFA Skills

The essential SFA skills that the SFA actions require involve:

- Paying more attention to signs of stress reactions in oneself and one's coworkers
- Recognizing when stress reactions are in the Orange or Red Zone of the stress continuum
- Acting early on in response to your own or a coworker's stress. If you see something, do something, either for yourself or for the coworker. Or you may need to say something to the person themselves or to somebody they trust.
- And lastly, knowing at least two resources that you would either access yourself or offer to a coworker in distress. It is helpful to know a range of both

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5. **Confidence** maps onto helping people have more confidence in themselves, life, their work mission, or leadership. It can also sometimes involve helping reduce guilt or anger or helping them make meaning or grapple with philosophical questions that arise as a result of the stressors in their life.

This diagram makes it seem like these actions are sequential, but in actuality, Check and Coordinate are continuous, and the others are only used as needed.

The goal of SFA is to move people towards wellness.



Remember that SFA is both a coworker support and self-care model that can be used to support coworkers and to increase your own self-awareness and improve your early response to stressors in your life.

organizational and community resources.

#### 9 How Can You Use SFA?

The Stress First Aid framework of possible actions was designed to be very flexible. Because this is a short briefing about SFA, the descriptions in this and following slides are geared primarily towards coworker support rather than self-care but remember that all the core actions of SFA also include strategies for better self-care.

Here is an example of how SFA can be used in coworker support.

Ideally, what you would do ahead of any SFA action is to pay attention and be aware of what's happening either in a highly stressful moment, or in a person's ongoing circumstances. Paying attention in this way allows you to see changes in the way that the person is reacting or functioning that would indicate that they are stressed.

Then you would either act to mitigate stressful circumstances in the moment or approach the person and together decide together what they most need at that time. These choices are usually based on what type of stress reactions they are having.

Each one of the stress reactions could be handled differently, depending on your personality, what's going on in the moment or in the person's life, what they're most likely to respond to or be able to tolerate, or what makes the most sense.



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The model allows you to be both practical and creative, depending on many factors, and should look different with every exchange that you have with a coworker. It's not a one-size- fits-all model. That can make it challenging to use for some people, because there is no one prescribed set of actions. But the hope is that it gives people permission to use the model in a way that makes the most sense to their own role and personality, and the roles and personalities of their coworkers, as well as specific situation at hand.

SFA is also a framework that validates what you are already doing to help coworkers feel safer, calmer, and more connected, competent and confident.

[Note: This slide has animation. "Check, Act/Approach, Decide what is needed most" will appear. Then the stress reactions. Then the connections to the Seven Cs.]

#### 10 Check: Why Is It Needed?

This slide lists some reasons to utilize Check on a regular basis. As we cover each SFA action, we will discuss potential scenarios in which to use them--for whom and in what circumstances. The action of Check is different in that it is not triggered by certain situations, but rather should be an ongoing process. This is because most people are unaware of their stress zones and needs, and can't afford to pay attention to such things when focusing on work and the demands of daily life.

When people have been significantly changed by stress—injured by it they may not recognize the ways that it has impacted their lives. Others, though, may notice if they are paying attention and know what to look for.

Even if the person affected by stress recognizes distress or changes in functioning, the stigma that surrounds such problems can be a powerful barrier to seeking help. Telling others about our problems and asking for assistance is very difficult for most of us.

## 11 Check: Indicators of Severe Stress Reactions

In order to Check in with oneself and others, it is helpful to be aware of the experiences, behaviors and symptoms that characterize stress reactions. They include:

*Signs* that you can use to check on both yourself and others.

## Slide

#### Check: Why is it Needed?

- Those injured by stress may be the last to recognize it
- Stigma can be an obstacle to asking for help
- Stress zones and needs change over time
- Risks from stress injuries may last a long time



Both the stress zones of individuals and the resources available to help can change drastically over time. A continuous process of assessment is often the only way to match needs with appropriate levels of help each step of the way.

It is also important to remember that the after-effects of stress injuries can be delayed by weeks, months or even years. Those who have been seriously affected by stress at any one point in time will need to be periodically followed up with and reassessed.



Slide #	<b>Discussion Points</b>	Slide
	<ul> <li>Symptoms that you can use to check on yourself.</li> <li>Signs are significant and persistent negative changes in behavior or habits</li> <li>Becoming more isolated from others</li> <li>Uncharacteristic negative behavior</li> <li>Making mistakes</li> <li>Compulsive behavior</li> </ul>	<ul> <li>Symptoms are internal feelings and less public reactions. Orange zone reactions are generally characterized by not feeling in control of one's body, emotions or thinking</li> <li>Sleep changes or nightmares</li> <li>Loss of focus, memory, or the ability to think rationally</li> <li>Intense feelings</li> <li>Inability to engage in or enjoy things you usually like</li> <li>Feeling unusually numb or uncaring</li> <li>Compulsive behavior</li> <li>Wanting to avoid situations or reminders</li> </ul>
12	Check Skill: OSCAR Example Many people feel uncomfortable	Check Skill: OSCAR

Many people feel uncomfortable asking others about their stress reactions. We know how to have casual conversations with peers, but when it comes to discussing personal issues or emotions, people often don't know where or how to start. Another common barrier to accurate assessment is the almost automatic denial of experiencing any stressors, distress, or changes in functioning.

One tool that can be effective in overcoming these obstacles is "OSCAR" communication—a mnemonic (memory device) for the five steps of:

- Observe
- State Observations
- Clarify Role
- Ask Why
- Respond.



*Clarify:* Before the individual has a chance to get defensive, you add—to clarify your role—that you only bring it up because you are concerned, and want to know if there is any way that you can help. Alternatively, you might clarify that you are making observations because you are a supervisor and their behavior is affecting their work.

*Ask:* If you can then establish a common perception about the person's behavior (i.e. he or she admits to isolating more than usual), you next ask why, or maybe simply "What's going on?"

*Respond:* The final step is to respond with a statement that makes it clear that you both heard and understood what you were told, and that you either

lide #	<b>Discussion Points</b>	Slide
	Here's how it works: <i>Observe:</i> If you have observed a co- worker's change in behavior, that information can help you make more headway into having a conversation about how they are doing. Find a good time and strike up a friendly conversation. After a while, you ask something open-ended like "How are you doing? or "How are you feeling?" <i>State:</i> If he or she quickly brushes you off with a denial such as "I'm fine," you next state your observation. State	might have some ideas about what might make the person feel or function better, or that you're glad that what they told you indicates that they really are fine.
13	your observations of the behaviors you've notices; just the facts without interpretations or judgments. <b>OPTIONAL SLIDE: Check</b>	Check Example
	<b>Example</b> Here is a real example of how Check can be incorporated into work in a seamless and natural way: "I try to get to know each of my staff individually, so I know their baselines and what could potentially be a red flag. Instead of staying in my office, I	I try to get to know each of my staff individually, so I know their baselines and what could potentially be a red flag. Instead of staying in my office. I make a point to sit and talk with them during breaks. That helped when one of my staff members had a pregnant wife, and we responded to a stalk with him, to make sure that he was okay.
	make a point to sit and talk with them during breaks. That helped when one of my staff members had a pregnant wife, and we responded to a stillborn birth. After that call I took a little extra time to sit and talk with him, to make sure that he was okay."	Optional: Ask trainees if they can think of any other examples where they have seen the Check action used.

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#### Slide # Discussion Points

#### 14 Coordinate

The next core action of SFA is Coordinate, which should come naturally to you. Within SFA, providers consult and collaborate with others, and inform those who need to know. The key components of the Coordinate action are:

- To collaborate with everyone who has a stake in the wellbeing and future of the stressed individual.
- To get assistance from others at any step in the process in which help is needed to assess and care for individuals with stress problems.
- To inform the chain of command to the extent they need to know.

To refer individuals in need to others who can help either in a direct hand-off or through a more gradual consultation process.

## OPTIONAL SLIDE: Coordinate Example

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Here is a real example of how Coordinate can be incorporated into work in a seamless and natural way:

"One of our team members reported to work and was unusually quiet and distracted. During her break, I asked if everything was okay. She explained that her 2-year-old child

## Coordinate Actions

- Collaborate
- To promote recoveryTo ensure safety
- To get more information
- Inform
  Chain of command
- Family
- Peers
   Refer
- Recommend resources
- Consultation
  Direct hand-off





One of our team members reported to work and was unusually quiet and distracted. During her preak, I asked if everything was okay. She explained that her 2-year old child had just been diagnosed with autism and she just did not know where to begin to get the needed services. I told her that I knew someone on another shift who had a child with autism and she and her husband had become resource 'experts' who had offered to help thers. I offered to make an email introduction to ther. At her next shift, she told me how helpful the eferral had been.

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lide #	Discussion Points	Slide
	had just been diagnosed with autism and she just did not know where to begin to get the needed services. I told her that I knew someone on another shift who had a child with autism and she and her husband had become resource 'experts' who had offered to help others. I offered to make an email introduction to her. At her next shift, she told me how helpful the referral had been."	<i>Optional: Ask trainees if they can think of any other</i> <i>examples where they have seen the Coordinate action used</i>
16	Coordinate: Reasons for Referral In all cases, asking for someone else's	Coordinate: Reasons for Referral
	opinion or help early rather than late in the process is a good idea. A referral to an EAP provider or clinician is indicated if:	relationship      Uncertainty regarding stress level,     dangerousness or level of impairment      Poses a threat to self or others
	<ul> <li>You are uncertain about the strength of your relationship with the person who needs help</li> </ul>	Worsening over time or failure to improve
	<ul> <li>There is uncertainty regarding stress level, dangerousness or level of impairment.</li> </ul>	
	• The individual poses a threat to self or others.	
	The individual's impairment seems to be worsening over time or failing to improve	
17	Coordinate: Help in Overcoming Potential Barriers to Providing or Succeeding with Stress First Aid	Coordinate: Help in Overcoming Potential Barriers           You have stress injury that impairs your ability         Get help yourself           to provide SFA         Get help yourself
	There are many possible barriers to delivering or succeeding with SFA, including:	You cannot acquire or hold the other person's attention or trust You have negative beliefs about the person, or the person actively resists attempts to help batth providers
	• You have stress injury that impairs your ability to provide SFA, in which case you should get help yourself	The person does not get better with SFA actions

Slide #	Discussion Points	Slide
	• You cannot acquire or hold the trust or attention of the other person	
	• You have negative beliefs about the person, or they actively resist attempts to help	
	• The person's stress behaviors do not respond to SFA actions	
	One of the main ways of overcoming barriers to delivering or succeeding with SFA is to coordinate with others who may be better able to meet the needs of coworkers. Involve other leaders, coworkers, trained peers, human resources, chaplains, or mental health providers.	
	Stress First Aid is a team response and no one person needs to do it all.	
18	Cover Actions	Cover Actions
	<ul> <li>Standing by a coworker and remaining available and ready to assist as needed, watching and listening for ways you might intervene if needed, or holding the person's attention if they are overwhelmed or panicky.</li> <li>Making the person safe in any</li> </ul>	<ul> <li>Stand by</li> <li>Ready to assist</li> <li>Hold attention</li> <li>Hold attention</li> <li>Authoritative presence</li> <li>Ustra na</li> <li>Warn</li> <li>Protect</li> <li>Stand listen</li> <li>Encourage perception</li> <li>Caring presence</li> <li>Listen and communicate</li> <li>Reduce chaos</li> <li>Reduce danger</li> <li>Assist</li> </ul>
	way you can, including by being an authoritative presence, by warning the person, by protecting the person physically or psychologically, or by assisting the person.	• Encouraging a perception of safety occurs in the long term for both workers and their families via a caring presence, listening to feedback and communicating about safety, and greater commitment to organizational safety and order. This can be physically via maintenance of
	When necessary, Cover may also involve <b>making others safe</b> from the person if they are not functioning	equipment and attention to worker fatigue and burnout, and mentally/emotionally by reducing chaos and rumors.

well because of stress reactions. You could do this by protecting them

lide #	Discussion Points	Slide
	physically or warning them about possible dangers that might result via the stressed person's actions.	
19	<ul> <li>Examples of a Need for Cover</li> <li>Here are a few examples of a need for Cover: <ul> <li>Someone in a life-threatening situation is not thinking clearly or making good decisions because of stress</li> <li>Someone has frozen or panicked in an intense situation</li> <li>Someone feels guilty because their family has concerns about their safety following the death of a coworker from an infectious disease</li> <li>Someone has threatened others</li> </ul> </li> <li>Someone expresses serious thoughts of suicide</li> </ul>	Examples of a Need for Cover Someone • is in a life-threatening situation is not thinking clearly or mining good decisions because of stress • has frozen or panicked in an intense situation • feels guilty because their family has concerns about their safety following the death of a co-worker from an interview of the safety following the death of a co-worker from an • outs their own physical and mental health in danger from overwork • as threatened others • ayresses serious thoughts of suicide Optional: Facilitate a discussion with trainees by asking something like, "What actions have you noticed in yoursel or others that indicated a need for Cover?" The goal is to have them start to reflect upon their own experiences with Cover and identify behaviors or situations that they think would indicate a need for Cover.
20	OPTIONAL SLIDE: Cover Example: Self-Care Here is a real example of how Cover actions can be incorporated into self- care: "Having a person you can talk with if you have a bad day is very important. That cover in your personal life is necessary, because so many times we're still thinking about what happened at work when we get home."	Cover Example:         Self-Care         Having a person you can talk with if you         Nave a bad day is very important. That         cover in your personal life is necessary.         thinking about what happened at work.         White the person you can talk with if you         Self-Care         Optional: Ask trainees if they can think of any other         examples where Cover actions have been helpful.

## 21 OPTIONAL SLIDE: Cover Example: Coworker Support

Here is a real example of how Calm actions can be incorporated into coworker support:

"On the whiteboard, we write our name if we think we are in the green zone that day, to give permission for coworkers to approach us for support without worrying about being a burden. We can erase our name if during the day we are no longer in green."

## 22 Calm Actions

This slide shows the major components of the next SFA action, Calm. There is some overlap between the actions in Cover and Calm. Actions that promote one of these two actions often also help with the other.

The major difference is that while the goal of Cover is safety, Calm's goal is to reduce the intensity of physiological, emotional and behavioral activation.

The first and most basic procedure of Calm is simply to stop, **quiet**, and cease physical exertion if possible. Some examples of this are to sit down or lie down, put down any items and relax, with the goal of slowing heart rate.

Regaining composure will help to restore cognitive function. The word "**compose**" means to help to pull back together that which is scattered or fragmented into a more orderly and coherent state. In the Calm action,



Slide

*Optional: Ask trainees if they can think of any other examples where Cover actions have been helpful.* 



The next component of Calm is to **rest**—including helping the person recuperate and get better sleep--for as long as is necessary to return to a more functional calm state. Sometimes a good night's rest is the only thing that will restore a person to baseline mental and emotional functioning, so make sure they can sleep.

The final component of Calm is **soothing**, which means to reduce the intensity of potentially destructive emotions like fear and anger by providing a calm physical presence and listening empathically. This also includes providing encouragement if that is what is needed or soothing in a way that fits your style and is acceptable to the individual.

Slide #	Discussion Points	Slide
~~~	you can help people compose themselves by drawing their attention away from anxiety-producing thoughts and feelings and refocusing them on something else.	
23	<ul> <li>Examples of a Need for Calm</li> <li>Here are a few examples of a need for Calm:</li> <li>Someone returning from responding to a particularly violent domestic violence case is talking too fast and not reacting appropriately to commands or questions.</li> <li>Someone is pacing and wringing their hands while on duty. They just heard that their son, an Army sergeant deployed overseas, has been seriously injured.</li> <li>Someone punches their locker after just returning from responding to a baby who is in a coma after being shaken by a parent.</li> <li>The purpose of Calm is to reduce excessive physical, mental, or emotional arousal or activation. It stands to reason that Calm is needed in situations in which those aspects of arousal and activity are too high and remain at elevated levels even when the external threats that have triggered this response have been reduced.</li> </ul>	<section-header></section-header>

## 24 OPTIONAL SLIDE: Calm Examples: Self-Care

Here are some examples of how Calm actions can be incorporated into self-care:

"What helps calm me is breaking down responsibilities into manageable pieces, making lists and being organized.""

"Taking a break from work to clear one's head is beneficial. During this break, several different strategies can be used: a short nap, physical exercise, meditation, stretching, having a conversation with a friend, laughing, getting a drink of water, and avoiding caffeinated beverages that contribute to agitation or anxiety."

## *OPTIONAL SLIDE*: Calm Example: Coworker Support

25

Here is a real example of how Calm actions can be incorporated into coworker support:

- "If something is going wrong on a unit, someone will say "Orange huddle!"
- That means: "Everyone take breath, we're coming together."
- It's not blaming or shaming. It means there's an issue, we feel it, someone saw it, something is happening, and it's tense.

It's a shorthand way to say: "Let's all take a breath. What do we need to do? This is the shift from hell, but we'll make it through.""



Slide

Optional: Ask trainees if they can think of any other examples that they have seen where the Calm action has been used.



*Optional: Ask trainees if they can think of any other examples where Calm actions have been helpful.* 

Slide

## Discussion Points

#### 26 Connect Actions

Slide

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There are three components of the SFA core action Connect. As with all SFA actions, these components are designed to be adapted to fit your setting, your personality and the needs at that time of the individual experiencing a stress reaction.

The first component is to simply **be with** the person. This means being present, making eye contact, listening, mentoring and empathizing and accepting them and their reactions.

The next component is to **promote connection**. This could include finding trusted others for the person to talk or spend time with if you are not in the best position to be that support. It could also mean fostering contact with others, such as by pairing coworkers up during stressful situations, creating team projects, or encouraging contact with supportive others.

The final component is to **reduce the person's sense of isolation**. Isolation can often occur when Orange Zone reactions make a person irritable and less able to function on the job, or if the person withdraws because they feel ashamed in some way. Assisting in such a case may involve helping to improve the person's understanding of the situation and of stress reactions. Often, the SFA provider must help the person to see that stress reactions are understandable and acceptable.

#### **Connect Actions** Be with Reduce isolation Improve understanding Maintain presence Keep eye contact Correct misconceptions Listen Empathize Accept Restore trust Invite and includ Promote connection Find trusted others Foster contact with others Encourage contact with others



Research has shown that people who are experiencing significant stress may prefer different types of social support. Some may want to be included in an activity, whereas others may prefer having casual friendly encounters, receiving help and information in strictly practical ways, or directly discussing emotional problems or reactions. Those who have posttraumatic stress reactions or who want to repress their reactions, may avoid direct discussion of emotional problems and reactions because it brings adverse events to their attention again.

These Connect actions are designed to help a person feel that they're not alone, that there are caring others around, and that there are many ways to be connected with others.

Slide

#### Slide # Discussion Points

This component also involves correcting misconceptions and misperceptions in order to help reduce the stressed person's alienation and isolation. This includes clearing up misconceptions held by the person about their own stress reactions, as well as those held by others. Doing so will effectively restore the individual's trust in him or herself and restore the trust of others. In its simplest form, you can help reduce isolation by simply inviting and including the person into department or crew activities.

#### 27 Reasons for a Need for Connect

When injured by stress, people can feel a sense of being alienated from themselves, like they are a different person. It is also very common for them to feel disconnected from friends or family, for a number of reasons:

- Trust may be an issue. An individual may have lost trust in themselves, or be experiencing shame, a feeling that others were disappointed or betrayed, or a loss of trust in their coworkers.
- Stress reactions may cause individuals to lack the confidence and/or competence to make new relationships or to rebuild existing relationships.
- People who are stressed may not want to share negative experiences or feelings for fear that they won't be understood or will be a burden to others.

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#### Examples of a Need for Connect



- Individuals may not be getting enough positive feedback or support from their environment due to Orange Zone stressors such as loss, or lack of access to appropriate supports or resources (e.g. separations, lost contact, new living environment, etc.).
- Other people might need Connect because they feel exhausted and overwhelmed or are unable to talk about their feelings and put their experiences into words.
- Some may be unable to express an increased need for support from others for their stress or don't feel that their existing social support networks can or will meet their needs.

Slide #	<b>Discussion Points</b>	Slide
	<ul> <li>Some may just be numb or withdrawn, or don't want to be triggered by talking about events.</li> <li>Orange Zone stressors and/or reactions may cause difficult emotions to surface, such as increased anger or frustration, that can push others away.</li> </ul>	<ul> <li>Some may want to be available to provide support to others but are avoiding doing so because they are overwhelmed, or don't want to trigger their own stress reactions.</li> <li>Finally, stigma is a big obstacle to asking for support.</li> <li>Asking for help can make people feel that they are weak, or that they are unable to handle their life stress. It may also raise concerns that their disclosure will affect either their coworkers' view of them, or their job security.</li> </ul>
28	Examples of a Need for Connect	Examples of a Need for Connect
	<ul> <li>Here are a few examples of a need for Connect:</li> <li>A young health care provider freezes during his first major surgery. Although only disabled for a few seconds, he feels ashamed and withdraws from all contact with fellow health care providers.</li> <li>A child dies after a complicated procedure involving many staff. Some department members feel that better coordination could have prevented the death. Staff not involved in the situation avoid speaking or interacting with those who were involved. Sense of staff cohesion drops.</li> </ul>	Ayoung healthcare provider surgery. Although onig urgery. Although onig the feels ashamed and with nelicov healthcare providers.       A child dies after a monificated procedure involving many staff. Some the teels ashamed and surgery. Although onig the feels ashamed and with nelicov healthcare providers.       A child dies after a monificated procedure involved in the start involved in the start involved in the start involved. Sense of staff.         These examples highlight the fact that Connect can be needed at either an individual or organizational level.         Optional: Facilitate a discussion with trainees by asking something like, "What actions have you noticed in yourself or others that indicated a need for Connect?" The goal is to have them start to reflect upon their own experiences with Connect and identify behaviors or situations that they think would indicate a need for Connect.
	A coworker who has been through a difficult year at work and a divorce starts withdrawing from others at work, calling in sick more frequently, and looking disheveled.	

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#### 29 **OPTIONAL SLIDE:** Connect **Example: Self-Care**

Here is a real example of how Connect actions can be incorporated into self-care:

"The people I reach out to are honest. It's about calling a spade a spade, not dancing around it. They're able to give their perspective on my problem and say something like: 'You need to pick up the pieces and move on.' It serves to provide another's perspective, and foster honesty. Or they might say, 'That's not normal for you.' I am skeptical of self-diagnosis. I think you need to get a second opinion from someone who knows you - a fresh perspective."

## **OPTIONAL SLIDE:** Connect **Example: Coworker Support**

Here is a real example of how Connect actions can be incorporated into coworker support:

• "I try to make my staff laugh as much as possible throughout the day. I also take advantage of any lulls throughout the day to hold round tables with the staff. During these round tables, staff can voice their concerns over anything that bothers them. I also try to make myself available and approachable to staff at all times during the day."

"I try to help a co-worker who is drowning by giving a medication to a patient or starting an IV - just a simple task to allow them to catch up."



Slide

*Optional: Ask trainees if they can think of any other* examples where Connect actions have been helpful.



Optional: Ask trainees if they can think of any other examples where Connect actions have been helpful.

Slide

#### Slide **Discussion Points**

#### 31 **Competence Actions**

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Competence focuses on enhancing and restoring an individual's capacity to function and perform in all important life roles, in both occupational and personal domains.

Building job experience or competence can reduce the risk for stress reactions. Additionally, Orange or Red Zone stress reactions might require competence in social or wellbeing skills. This SFA action focuses on *building or fostering skills* that will either prevent or reduce stress reactions.

We know from the research literature that increasing Competence:

- Improves functioning and fosters better connections and supports, as well as augmenting individual and group morale.
- Reestablishes the confidence of others in the stressed individual.
- Helps to overcome injury to mind, body and spirit.
- Builds resilience.

#### **Competence** Actions Foster Occupational skills Social skills Improve to reduce risk of stress reactions Re-establish or learn to deal with stress TrainRetrain reactions Requesting support Reassign Conflict resolution · Mentor back to duty Assertiveness Seeking mentoring Well-being skills Re-establish or learn to deal with stress reactions Calming Problem solving Health and fitness Managing trauma and loss reminders



The first component is to augment occupational skills that either have contributed to stress reactions, or that may have been damaged by stress injury. This may require mentoring or training for the person to feel more capable in specific job-related skills, or to once again gain self-esteem from their work after a loss of abilities due to stress reactions. Just as physical therapy aids in rehabilitation of a physical injury, mentoring and training can help restore earlier functioning.

The next component involves increasing *well-being* skills that can help the person deal with stress reactions, such as by helping them gain skills in calming themselves, problem-solving, improving health and fitness, and managing trauma and loss reminders.

The last component of Competence is to improve the social skills needed to deal with stress reactions. These skills---such as assertiveness, conflict resolution and help-seeking---are often damaged by stress yet they may become necessary when a person is dealing with stress reactions.

#### 32 Examples of a Need for Competence

Here are a few examples of a need for Competence:

- An intern responding to an infectious disease patient becomes anxious because he has never had experience with that type of patient before and has concerns about his own safety.
- A nurse who was the target of a violent patient experiences persistent mental confusion and slowed, unclear thinking.
- A nurse who developed wear-andtear stress injury loses the ability to stay calm when dealing with coworkers.
- A manager who loses a staff member because that person became infected with hepatitis C when they were stabbed by a violent patient becomes hesitant about sending staff into potentially hazardous situations, increasing the danger to the entire department.

## 33 *OPTIONAL SLIDE*: Competence Example: Self-Care

Here is a real example of how Competence actions can be incorporated into self-care:

"When I'm under too much stress, I revert to doing something that is easy for me. It gives me a sense of accomplishment, like tidying the garage, or shoveling snow for a

#### Examples of a Need for Competence An intern responding to a Covid patient becomes analous because he has never had experience with that type of patient before and has concerns about his own safety. Anurse who awas the target of a violent patient experiences persistent mental confusion and slowed, unclear thinking. Anurse who developed wear-and-tear stress injury loses the ability to stay calm when dealing with coworkers. A manager who loses a staff member because that person became infected with hepatitis C when they were stabbed by a violent patient becomes hestant about sending staff into potentially hazardous situations, increasing the danger to the entire department.

Slide

Optional: Facilitate a discussion with trainees by asking something like, "What actions have you noticed in yourself or others that indicated a need for Competence?" The goal is to have them start to reflect upon their own experiences with Competence and identify behaviors or situations that they think would indicate a need for Competence.



"When I'm under too much stress, I revert to doing something that is easy for me. It gives me a sense of accomplishment, like tidying the garage, or shoveling snow for a widowed neighbor. It doesn't take much thought, but it gives me a sense of accomplishment."

Slide #	<b>Discussion Points</b>	Slide
	widowed neighbor. It doesn't take much thought, but it gives me a sense of accomplishment.	Optional: Ask trainees if they can think of any other examples that they have seen where the Competence action has been used.
34	OPTIONAL SLIDE: Competence Example: Coworker Support Here is a real example of how Competence actions can be incorporated into coworker support: "If someone is second-guessing how they did something, I will share how I've done something similar. I think when we can share our experience, how it affected us and how we dealt with something, it probably helps the person to understand, 'all right, I'm going to be okay.' It's not permanent and it's a normalizing thing, and it's part of the process."	Competence Example: Coworker Support         If someone is second-guessing how         Whey did something, Vill Share how         New something, Vill Share how         When we can share our experience,         Not affected us and how we deat         going to be okay." It's not permanent         and It's a normalizing thing, and it's         art of the process."
35	<b>Confidence Actions</b> The final SFA action is Confidence, originally derived from research on "hope." There is a lot of overlap between Competence and Confidence, because when individuals feel more competent to handle what is in front of them, they usually feel more confident and	<section-header>Confidence ActionsHould• Trust in: • Cowrikers • Equipment • Leaders • Self • Mission • Hope • Forgiveness of others • Trogiveness of others • Imagining the future• Self • Porgiveness of others • Imagining the future</section-header>

hopeful. What distinguishes

Competence from Confidence is that

building, whereas Confidence actions

Competence actions often involve

are aimed at affecting or altering

inner states or thoughts a stressed

Confidence actions are intended to:

training or mentoring in skills

individual may be having.

The third component is aimed at rebuilding **self-worth**, which includes belief in self, an accurate and mostly positive self-image, self-respect, and an awareness of the steps necessary to begin to achieve priorities and goals.

The fourth component is aimed at rebuilding or facilitating **meaning-making**, which includes the process of making sense of life; having a feeling of purpose or faith; holding a spiritual perspective related to life or a belief in strong others and/or a

Slide #	<b>Discussion Points</b>	Slide
	<ul> <li>Promote realistic hope and build self-esteem that may have been damaged or lost as a result of stress</li> </ul>	higher power who will intervene on the person's behalf.
	• Promote confidence in core values and beliefs	All of these functions lead to a better sense of hope of confidence in self, others, life or spiritual sources of solace.
	• Bolster pride and commitment	
	This slide shows the four components of Confidence:	
	The first Confidence component is rebuilding <b>trust</b> in coworkers, equipment, leaders, self or mission.	
	The second component is rebuilding <b>hope</b> , which can often be done through forgiving oneself or others or imagining a hopeful future.	
36	Examples of a Need for Confidence	Examples of a Need for Confidence
	Here are three scenarios in which the Confidence action could be used. In all three cases, SFA will involve actions at multiple levels of engagement.	<ul> <li>Someone whose failure to take proper precautions contributes to the death of a patient. He feels extremely guilty and becomes self-destructive.</li> <li>An individual who develops wear-and-tear stress reaction loses respect for leaders and becomes angry and irritable.</li> <li>Someone who is regularly exposed to significant life threat suffers lowered functioning, loses spiritual faith, and becomes depressed.</li> </ul>
	<ul> <li>Someone whose failure to take proper precautions contributes to the death of a patient feels extremely guilty and becomes self-destructive.</li> <li>An individual who develops a wear-and-tear stress reaction loses respect for leaders and becomes angry and irritable.</li> </ul>	Optional: Facilitate a discussion with trainees by asking something like, "What actions have you noticed in yoursel or others that indicated a need for Confidence?" The goal is to have them start to reflect upon their own experiences with Confidence and identify behaviors or situations that they think would indicate a need for Confidence.
	Someone who is regularly exposed to significant life threat suffers lowered functioning, loses spiritual faith, and becomes depressed.	

#### 37 OPTIONAL SLIDE: Confidence Example: Self-Care

"Sometimes you have to do some self-talk, because there's only so much you can do and you're not going to change someone trying to blame things on you, so you have to be comfortable in saying, 'I know that I did everything that I could.' No matter how somebody else sees it, I have to get to the point where I'm okay with others thinking that I didn't do my job. I know I did my job."

## 38 *OPTIONAL SLIDE*: Confidence Example: Coworker Support

Here is a real example of how Confidence actions can be incorporated into work:

"There was a time where I dropped the ball. It was not earth-shattering, but it was significant. I was completely unable to connect the dots at all until one day my supervisor talked to me and said, 'During that same time period, your mom had been terminally ill and then passed away.' As obvious as it should have been, I was not able to see the connection until he said that to me."

## Stress First Aid Effect on Organizations: Example

39

Here is a real example of how Stress First Aid can affect a health care organization:

• "SFA creates an improved ability to identify issues, come together, and problem solve solutions. It



Slide

*Optional: Ask trainees if they can think of any other examples that they have seen where the Confidence action has been used* 



*Optional: Ask trainees if they can think of any other examples that they have seen where the Confidence action has been used.* 





The timing and context are important: what you can achieve with any interaction depends on how much time you have, where you are, how open a person is to hearing what you have to say, and how long after the incident the conversation takes place.

Mentoring and problem solving are highlighted: your role is to provide support and possible assistance helping someone get back on their feet and manage the tasks that might seem overwhelming to them when they're under a lot of stress.

result in more sense of connection and

accomplishment.

Slide #	Discussion Points	Slide
	SFA is not meant to address all ranges of issues: it is a first aid model, and not meant to deal with lifelong problems, personality issues, serious mental health issues, or complex problems that would require more intensive interventions.	Bridge to higher care when indicated: always think in terms of referring a person on to EAP or local mental health providers if they are having difficulty adjusting and experiencing strong stress reactions. Effective treatments are available and being a bridge to that care may be your most helpful SFA action.
41	<b>SFA Next Steps</b> As time allows, engage in a discussion of next steps with SFA, including the timing and location of the weekly booster sessions, and offering yourself as a resource for any questions.	<image/>

# Stress First Aid (SFA) Overview



# Seven C's

- 1. CHECK Assess: observe and listen
- 2. COORDINATE Get help, refer as needed
- 3. COVER Get to safety ASAP
- 4. CALM Relax, slow down, refocus
- 5. CONNECT Get support from others
- 6. COMPETENCE Restore effectiveness
- 7. CONFIDENCE Restore self-esteem and hope

SFA Action	Goals	When It Is Used	Examples
CHECK	<ul> <li>Identify Stress Zone and need for Stress First Aid</li> <li>Assess effectiveness of Stress First Aid actions</li> <li>Monitor recovery</li> </ul>	<ul> <li>After every significant stressor</li> <li>After applying Stress First Aid</li> <li>Whenever needed, repeatedly and often</li> </ul>	<ul> <li>Watch and listen for:</li> <li>Unusual stressors</li> <li>Severe distress</li> <li>Changes in normal functioning or behavior</li> </ul>
COORDINATE	<ul> <li>Inform others who need to know</li> <li>Refer for additional help</li> <li>Make sure help is received</li> </ul>	<ul> <li>Every time significant stress problems are identified</li> <li>Whenever needed, repeatedly</li> </ul>	<ul> <li>Inform chain of command</li> <li>Refer to care provider, if indicated</li> <li>Follow through</li> </ul>
COVER	<ul> <li>Get individual to safety as soon as possible</li> <li>Prevent others from being harmed</li> </ul>	<ul> <li>When stressed persons are at risk or place others at risk</li> <li>Then only briefly, until mental focus and self- control return</li> </ul>	<ul> <li>Recognize danger posed by or to a stressed person</li> <li>Neutralize the danger</li> <li>Keep person safe until they recover</li> </ul>

SFA Action	Goals	When It Is Used	Examples
CALM	<ul> <li>Reduce heart rate</li> <li>Reduce emotional intensity</li> <li>Regain mental focus</li> </ul>	<ul> <li>When a person's level of physical activation or emotions are too intense for a situation</li> </ul>	<ul> <li>Stop activity and relax</li> <li>Breathe slowly and deeply</li> <li>Refocus thinking ("grounding")</li> </ul>
CONNECT	<ul> <li>Promote peer support</li> <li>Prevent stressed individuals from isolating themselves</li> </ul>	<ul> <li>When stressful events cause loss of trust, respect and communication in crew or family</li> </ul>	<ul> <li>Spend time with them</li> <li>Ask how they are doing</li> <li>Encourage peer support</li> </ul>
COMPETENCE	<ul> <li>Restore mental and physical capabilities</li> <li>Restore role functioning</li> </ul>	<ul> <li>Stress injury or illness causes loss or change in normal functioning and abilities</li> </ul>	<ul> <li>Encourage and mentor back to full function, step by step</li> <li>Retrain if necessary</li> </ul>
CONFIDENCE	<ul> <li>Restore self-confidence</li> <li>Restore confidence in others, beliefs, values and/or God or a higher power</li> <li>Restore hope</li> </ul>	<ul> <li>Any time an individual loses confidence in self, peers, leaders, mission, values, and/or God or a higher power</li> </ul>	<ul> <li>Provide increasing responsibility and experiences of mastery</li> <li>Positive reframing</li> <li>Help make meaning</li> <li>Help set and achieve goals</li> </ul>