

INCIDENT COMMAND SYSTEM

Critical Incident Peer Support Team
Operating System Description
ICS 180

July 2026

This document contains information relative to the Multi-Agency Coordination System (MACS) and the Incident Command System (ICS), developed by FIRESCOPE and adopted as the framework of the National Incident Management System (NIMS). ICS products are designed to be compatible with and compliant with NIMS, as directed by the National Response Framework and adopted by the FIRESCOPE Board of Directors.

Additional information and documentation can be obtained from the following source:

FIRESCOPE
Document Control
23300 Castle Street
Riverside, Ca 92518
951-782-4174
www.firescope.caloes.ca.gov

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INTRODUCTION

The Critical Incident Peer Support (CIPS) Team is a group of highly respected, trusted, and qualified people assigned to a significant All-Hazard incident to support the behavioral health and welfare of the first responders engaged on the incident. This team is ordered by the Incident Commander (IC) or Incident Management Team (IMT) and reports directly to the Incident Commander/Command Staff as a Command Advisor. Team members are assembled at the time of the request and shall be composed of qualified personnel appropriate to the type of critical incident. CIPS consists of a Critical Incident

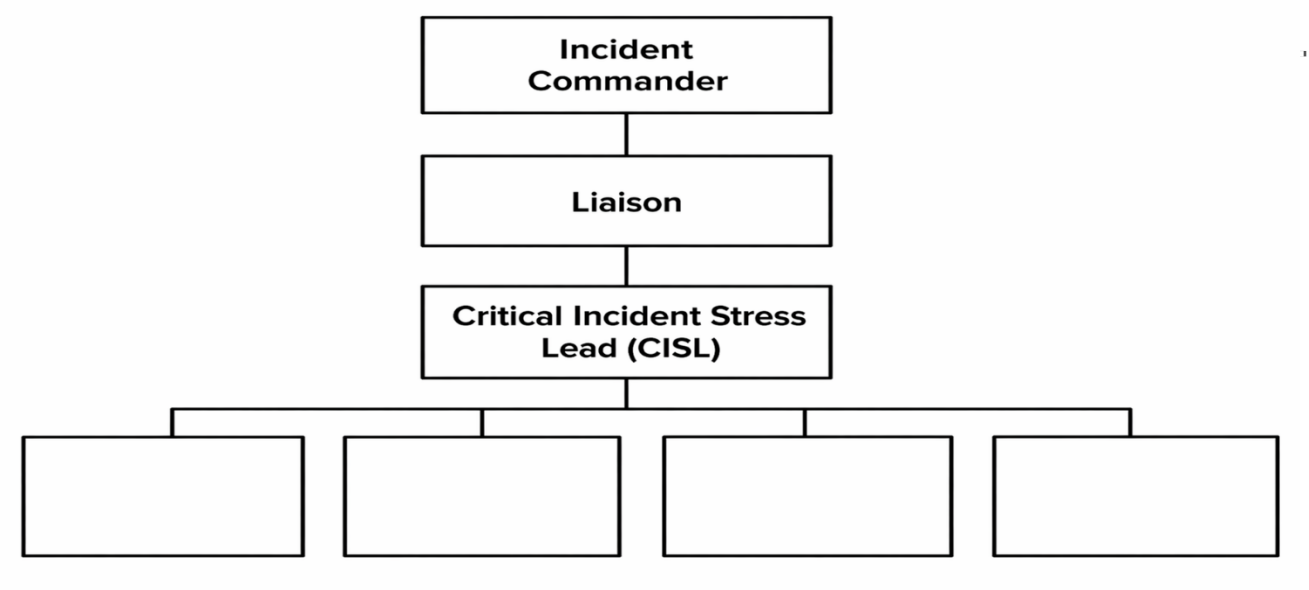
Stress Lead (CISL), Critical Incident Stress Management (CISM) members, and Critical Incident Clinician (CICL). The CISL will assess the need for and reporting time necessary for the clinician and may or may not have Critical Incident Stress Chaplain(s) (CISC) or Critical Incident Stress K9(s) (CISK) as part of the team. This team may consist of qualified personnel from multiple agencies. CIPS is based on the idea of people helping people (firefighters helping firefighters) and is built on trust, respect, and mutual understanding. CIPS personnel assist individuals by way of listening and discussing personal reactions and concerns after a critical incident. CIPS then refers individuals to the appropriate level of continuing care. A clinician shall be part of those discussions as an initial higher level of care on or after the incident. CIPS is not psychotherapy or counseling; it is stabilization. CIPS is not a tool for critiquing or investigating a traumatic event.

MODULAR DEVELOPMENT

Initial Response Organization:

The Incident Commander(s) (IC) manage all initial response resources and all Command and General Staff responsibilities. A possibility, concern, specific event, or policy may indicate the need to notify and/or activate the Critical Incident Peer Support (CIPS) Team based on the incident circumstances. A Critical Incident Stress Lead (CISL) or a Critical Incident Stress Management (CISM) designee shall contact the IC to determine, at a minimum, the needs and the type of activation warranted. A Critical Incident Peer Support (CIPS) Team follow-up may be warranted and/or Critical Incident Clinician (referral as needed).

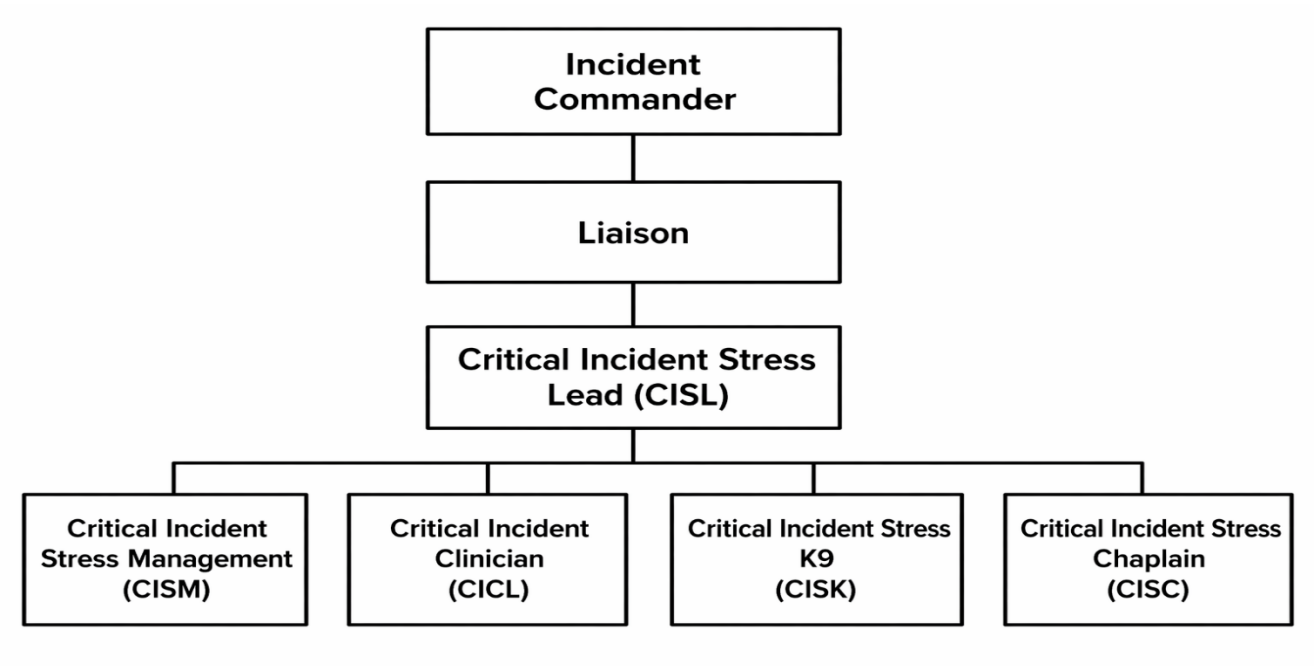
Initial Response Organization Chart



Reinforced Response Organization:

In addition to the initial response, the responsible agencies have met and established a Unified Command. They have established a Critical Incident Peer Support Team with a Critical-Incident Peer Support Lead (CISL) to manage all behavioral health activities based on the incident and future needs. The (CISL) reports directly to the Incident Commander/Command Staff as a Command Advisor. Critical Incident Stress Management (CISM) positions are filled based on incident needs and future needs. Activation for a Critical Incident Clinician is based on the incident and future requirements, if not part of the Critical Incident Peer Support (CIPS) Team. Critical Incident Peer Support (CIPS) Team and/or clinician follow-up after the incident may be required based on the needs of individuals due to the incident's complexity.

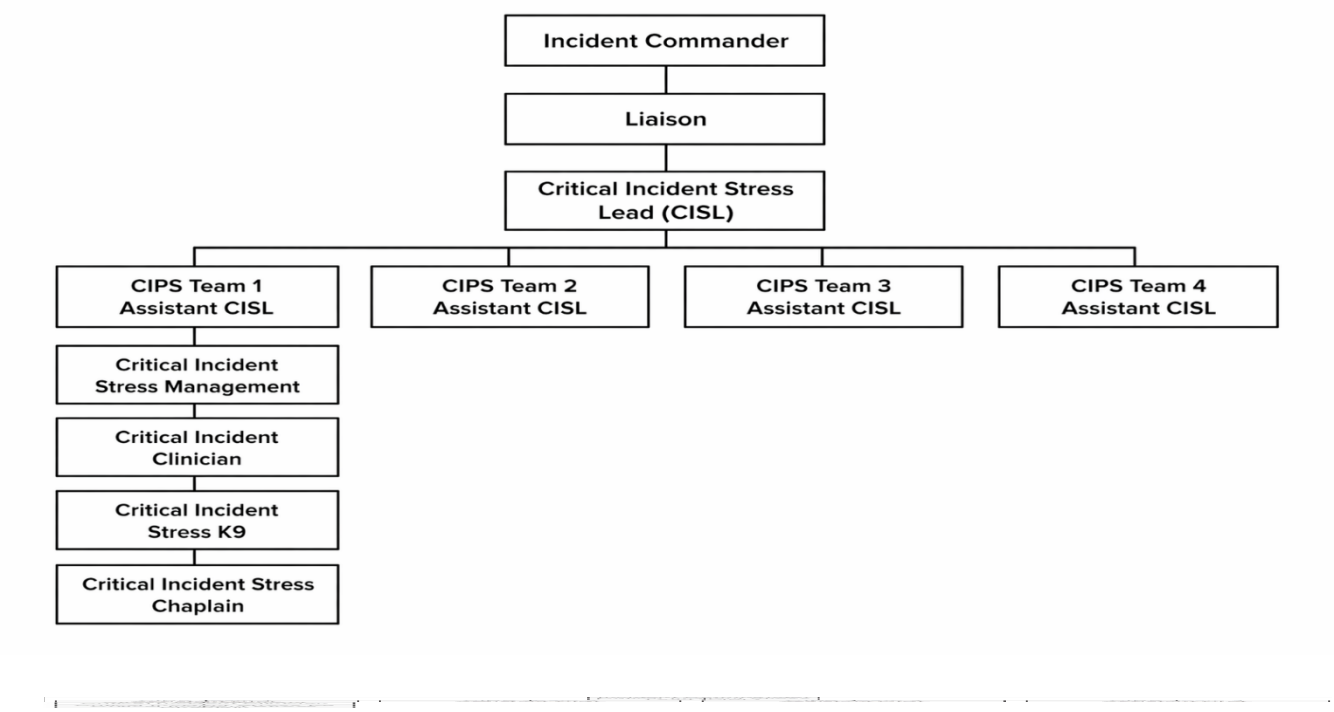
Reinforced Response Organizational Chart



Multi-Division / Multi-Branch Response Organization:

The Incident Commander(s) (IC) have activated multiple branches. The incident has a Critical Incident Stress Lead (CISL) managing multiple CIPS Teams. The (CISL) reports directly to the Incident Commander/Command Staff as a Command Advisor. Each CIPS Team has an Assistant CISL position for that individual CIPS Team. Critical Incident Stress Management (CISM) positions are filled to meet the needs and duration of the incident. Multiple Critical Incident Clinician(s) are utilized based on incident complexity and duration. Critical Incident Stress Chaplain(s) and Critical Incident Stress K9(s) are utilized based on incident needs and complexity.

Multi-Division / Multi-Branch Organizational Chart



POSITION CHECKLISTS

Critical Incident Peer Support Team (CIPS)

The Critical Incident Peer Support Team (CIPS) is a group of qualified individuals assembled to assist first responders after a critical incident. The Critical Incident Peer Support (CIPS) Critical Incident Stress Lead (CISL) reports to the Incident Commander/Command Staff as a Command Advisor. The Critical Incident Peer Support (CIPS) team is organized to meet the specific needs of the incident. A Critical Incident Peer Support (CIPS) team consists of a Critical Incident Stress Lead (CISL), Critical Incident Stress Management (CISM) members, Critical Incident Clinician(s) (CICL), Critical Incident Stress Chaplain(s) (CICS), and Critical Incident Stress Canine (CISK) team(s). A Critical Incident Peer Support (CIPS) Team can expand and contract, as necessary, depending on the incident dynamics. A Critical Incident Peer Support (CIPS) Team must have at a minimum, a qualified CISL and a qualified CISM. The Clinician position shall be filled if any form of debriefing is utilized and if a clinician determines that a higher level of care is warranted. Chaplains are utilized if a faith-based response is requested. Some chaplain roles are also CISM qualified members. Critical Incident Stress K9 resource(s) are a valuable tool if utilized, based on the incident's current and/or future needs.

a. Review Chapter 1 *Common Responsibilities.*
b. The Incident Commander recognizes the need or potential need for a CIPS team notification or activation based on:
    - Type of call.
    - The potential impact on first responders (current and future impact potential). Significant event.
    - Any other circumstance the Incident Commander deems necessary to warrant the need for a Critical Incident Peer Support (CIPS)Team.
c. As a Command Advisor, reports directly to the Incident Commander/Command Staff on the behavioral health expectations/needs of an incident. This shall be performed by the CIPS Critical Incident Stress Lead (CISL).
d. Locate or designate an area away from the incident that can be utilized for incident personnel. Initial comfort needs should be met. Food, water, a place to decompress, etc. Utilization of a space that allows individuals to speak privately with Critical Incident Peer Support (CIPS) Team members, if needed. Examples: Fire Stations, Police Substations, Schools. This location should be away from the scene so that individuals can let their guard down and feel secure, if needed.
    e. Team members, once requested, shall communicate with the CISL on their mobilization time frames. Logistical considerations should be considered based on the team members' response times.
f. Ensure that both the incident and team objectives are identified and understood.

g. CIPS members work together as a team to meet the Incident Commander and team expectations set forth.
h. Ensure effective communications between individuals seeking help and CIPS Team members.
i. Provide active listening skills to individuals and maintain a safe environment for those being assisted.
j. Develop an action plan for those who require one for their care.
k. Discuss and assist individuals with the implementation of action plans as needed.
l. Maintain individual and group confidentiality unless it is in violation of any mandated law (Child Abuse, Adult Abuse, Immediate danger to self or others).
m. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident.
n. Establish a system to provide confidential follow-up with individuals for any future behavioral health needs.
o. Lead and participate in the following:
    - Assist with or lead a defusing.
    - Critical Management Briefing. Assist with or lead a Critical Management briefing.
    - Assist with or lead a debriefing.
    - Any other task that requires behavioral health assistance, either assisting or leading.
p. Team members will be able to recognize risk factors and stressors and engage individuals with possible suicide ideations in a safe manner for all involved.
q. Organize and support assigned resources including clinician(s), chaplain(s), and K9 team(s).
r. Provide safety and situational awareness as a team.
s. Coordinate activities with team members as needed, reviewing assignments with additional CIPS Teams for coordination of efforts and any additional needs required.
t. Provide daily generic contact information to the Lead at the end of each day and any additional needs that may be required.
u. Maintain radio communications with Division/Group Supervisors when in the field, traveling in and out of divisions.
v. Provide point of contact information and be familiar with media policy as well as team lead or incident direction.
w. Utilize proper demobilization procedures for team members.
x. Maintain all qualifications and certifications as required for the position.
y. Follow all required policies and directives as applicable.
z. Follow all state and federal behavioral health laws as applicable.
aa. Maintain Unit/Activity Log (ICS Form 214).

Critical Incident Stress Lead (CISL)

Critical Incident Stress Lead (CISL) reports directly to the Incident Commander/Command Staff as a Command Advisor. The CISL is the lead for the Critical Incident Peer Support Team (CIPS). The CISL is responsible for the implementation of all information in the Incident Action Plan dealing with behavioral health. The CISL is responsible for the assignment of resources within the CIPS Team, reporting on the progress of CIPS operations and the status of resources within the team. The CISL directs the overall operations of the Critical Incident Peer Support Team.

a. Review Chapter 1 *Common Responsibilities.*
b. Communicate directly to the Incident Commander/ Command Staff as a Command Advisor on the incident's behavioral health expectations/needs.
c. Order required personnel for the incident based on current and anticipated needs.
d. Identify personnel and specialty types needed for the incident. Determine follow-up needs after the incident's operational phase.
e. Utilize Critical Incident Clinician(s) as required for higher behavioral health care stabilization.
f. Establish a work location that has adequate space for the team and a space to ensure confidentiality.
g. Ensure that both the incident and team objectives are identified and understood.\
h. Utilize ICS-215 for daily team growth during the incident.
i. Utilize standard best practices for the incident needs.
j. Provide active listening skills to individuals and maintain a safe environment for those being assisted.
k. Maintain individual and group confidentiality unless it is in violation of any mandated law (child abuse, adult abuse, immediate danger to self or others).
l. Maintain transparency with individuals and groups seeking behavioral health assistance during the incidents.
m. Establish a system to provide confidential follow-up with individuals for any future behavioral health needs.
n. Lead and participate in the following:

    - Assist with or lead a defusing.
    - Assist with or lead a critical management briefing.
    - Assist with or lead a debriefing.
    - Any other task that requires behavioral health assistance, either assisting or leading.

o. Recognize risk factors and stressors, and be able to engage individuals with possible suicide ideations in a safe manner for all involved.
p. Supervise Critical Incident Peer Support (CIPS) Team(s) throughout the incident duration.

q. Ensure an individual's confidentiality is adhered to during the incident, and follow-up care is rendered as needed.
r. Ensure proper span of control.
s. Ensure the Critical Incident Peer Support (CIPS) Team works in pairs and has at least one member qualified as a CISM.
t. Ensure the development and implementation of the Behavioral Health page(s) for the Incident Action Plan.
u. Attend meetings and briefings as required. Anticipate speaking at morning Operational Briefings.
v. Prepare a daily report of general contacts made and a brief overview of incident needs. Reports are general in nature and do not include names. Determine to whom the daily report be submitted to and any specifics requested.
w. Prepare an after-action summary of all contacts and general actions on the incident and consider additional needs that may arise after the incident.
x. Prepare evaluations for Critical Incident Peer Support (CIPS) Team members, as needed.
y. Act as team lead for media relations, as needed. Ensure incident and agency policies are adhered to, and team members are aware of policies, procedures, and directions.
z. Provide a CIPS Team debriefing as required due to incident complexity and/or duration. Utilize clinician(s), as needed.
aa. Utilize proper demobilization procedures for team members when transitioning from the incident.
bb. Maintain all qualifications and certifications as required for the position.
cc. Follow all applicable policies and directives, as applicable.
dd. Follow all applicable state and federal behavioral health laws, as applicable.

ee. Maintain Unit/Activity Log (ICS Form 214) or other non-confidential documentation, as required.

Critical Incident Stress Management (CISM)

Critical Incident Stress Management (CISM) members report to the Critical Incident Stress Lead (CISL). CISM members are part of the Critical Incident Peer Support Team (CIPS). The CISM members are responsible for the operational aspects of the CIPS Team on the incident. This position should work in pairs with another CISM, Critical Incident Clinician, Chaplain, K9 team, or CISL. At least one member of a two-person team shall be qualified. CISM should never be used as a replacement for a professional behavioral health clinician. The primary focus is on listening, assessing, stabilizing the individual(s), and referring to clinicians.

a. Review Chapter 1 *Common Responsibilities.*
b. Work as a member of the Critical Incident Peer Support (CIPS) Team.

c. Provide active listening skills to individuals and maintain a safe environment as needed for those being helped.
d. Utilize Critical Incident Clinician as required for higher behavioral health care stabilization.
e. Effectively communicate with individuals seeking help and with fellow team members.
f. Develop an action plan for those who require one for their care.
g. Discuss and assist with the implementation of action plans as needed.
h. Maintain individual and group confidentiality unless it is in violation of any mandated law (child abuse, adult abuse, immediate danger to self or others).
i. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident.
j. Develop a plan to provide confidential follow-up with individuals for any future behavioral health needs.
k. Participate in the following:
    - Assist with or lead a defusing.
    - Assist with or lead a critical management briefing. Assist with or lead a Debriefing.
    - Any other task that requires behavioral health assistance, either assisting or leading.
l. Recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for all involved.
m. Organize and support assigned resources.
n. Work as a team member in pairs. One member must be CISM qualified.
o. Provide situational awareness and safety as a team for non-fire personnel.
p. Coordinate activities with adjacent team members, as needed. Review assignments with the additional team to coordinate efforts and address any additional needs.
q. Communicate with the Critical Incident Stress Lead (CISL) or designee while in the field or after completing a task. Provide the Lead with daily generic contact information at the end of each day and any additional needs that may be required.
r. Maintain radio communications with Division/Group Supervisors when in the field, traveling in and out of divisions.
s. Provide point of contact information for any media-related questions and be familiar with media policy as well as team lead or incident direction.
t. Always represent your agency with professionalism while assigned.
u. Utilize proper demobilization procedures for team members when transitioning from the incident.
v. Maintain all qualifications and certifications as required for the position.
w. Follow all required policies and directives, as applicable.
x. Follow all state and federal behavioral health laws, as applicable.
y. Maintain Unit/Activity Log (ICS Form 214) or other non-confidential documentation as required.

Critical Incident Clinician (CICL)

A Critical Incident Clinician is a licensed Mental Health Professional who is culturally competent within the fire service and first responder culture. The clinician serves as a member of the Critical Incident Peer Support (CIPS) Team and is supervised by the Critical Incident Stress Lead (CISL). The Clinician is the higher level of care on the incident for the CIPS team. The clinician is utilized on the incident to provide stabilization of individuals. Future long-term care assistance and referrals for individuals may also be provided.

Clinician(s) shall be utilized in any briefings and should be considered for any other formal group discussions, as needed. Clinician(s) should be available to assist in individual one-on-one sessions, as needed. A secure, confidential location shall be made available for established incidents for clinician utilization to conduct one-on-one stabilization of individuals, as needed. Clinician(s) not assigned to a Critical Incident Peer Support (CIPS) Team must have a payment mechanism in place either through established contracts, agreements, policies, or vendor lists.

a. Review Chapter 1 *Common Responsibilities.*
b. Work as a member of the Critical Incident Peer Support (CIPS) Team.
c. Report to the CISL or, in the absence of CISL, may report to Command Staff as a Command Advisor.
d. Effectively communicate with individuals seeking help and with fellow team members.
e. Develop an action plan for those who require one for their immediate and follow-up care.
f. Discuss and assist with the implementation of action plans, as needed.
g. Maintain individual and group confidentiality unless it is in violation of any mandated law (child abuse, adult abuse, immediate danger to self, or others).
h. Maintain transparency with individuals and groups seeking behavioral health assistance during the incident.
i. Develop a plan to provide confidential follow-up with individuals for any future behavioral health needs.
j. Lead and/or participate in the following:
    - Defusing, crisis management briefings, and debriefings.
    - Understand the ICS model and the chain of command
    - Be prepared to speak at morning briefings regarding mental health issues.
    - Aid in providing educational information to be added to the IAP.
k. Work as a team member in pairs. One member must be CISM qualified.
l. Work with team members if the clinician is a member of a non-life safety position while maintaining situational awareness. Proper safety gear must be obtained for field operations.
m. Communicate with the Critical Incident Stress Lead (CISL) or designee while in the field or after completing a task. Provide the lead with daily

generic contact information at the end of each day and any additional needs that may be required.

n. Maintain communications with/accountability to CISL and local supervision when in the field, i.e., traveling in and out of divisions.
o. Provide point of contact information for any media r elated questions and be familiar with media policy as well as team lead or incident direction.
p. Always represent your agency with professionalism while assigned.
q. Utilize proper demobilization procedures when transitioning from the incident.
r. Maintain all qualifications and certifications as required for the position.
s. Follow all required policies and directives, as applicable.
t. Follow all state and federal behavioral health laws, as applicable.
u. Maintain Unit/Activity Log (ICS Form 214) or other non-confidential documentation as required.

Critical Incident Stress Chaplain (CISC)

Critical Incident Stress Chaplains are non-denominational Chaplains who provide faith-based care when required or requested to assist individuals on the incident. The Chaplain works as a member of the Critical Incident Peer Support (CIPS) Team and under the supervision of the Critical Incident Stress Lead (CISL). Chaplain(s) may also have Critical Incident Stress Management (CISM) qualifications and may be utilized in dual roles as required.

a. Review Chapter 1 *Common Responsibilities.*
b. Work as a member of the Critical Incident Peer Support (CIPS) Team.
c. Effectively communicate with individuals seeking help and with team members.
d. Develop an action plan for those who require one for their care.
e. Discuss and assist with the implementation of individual action plans, as needed
f. Maintain individual and group confidentiality unless it is in violation of any mandated law (child abuse, adult abuse, immediate danger to self, or others).
g. Maintain transparency with individuals and/or groups seeking behavioral health assistance during the incident.
h. Provide confidential follow-up with individuals for any future behavioral health needs.
i. Provide faith-based care to individuals, as requested. All faiths shall be recognized for an individual's needs.
j. Participate in the following:
    - Assist or lead a defusing, if qualified.
    - Assist or lead a critical management briefing, if qualified.
    - Assist or lead a debriefing, if qualified.
    - Any other task that requires behavioral health assistance, either assisting or leading.
k. Recognize risk factors, stressors and be able to engage individuals with possible suicide ideations in a safe manner for all involved, if qualified.

l. Work with team members if the chaplain is a member of a non-life safety position while maintaining situational awareness. Proper safety gear must be obtained for field operations.
m. Coordinate activities with adjacent team members, as needed. Review assignments with additional teams to coordinate efforts and address any additional needs.
n. Work as a team member in pairs. One member must be CISM qualified.
o. Communicate with the Critical Incident Stress Lead (CISL) or designee while in the field or after completing a task. Provide the lead with daily generic contact information at the end of each day and any additional needs that may be required.
p. Maintain radio communications with Division/Group Supervisors when in the field, i.e., traveling in and out of divisions.
q. Provide point of contact information for any media-related questions and be familiar with media policy as well as team lead or incident direction.
r. Act in a professional manner as an Agency Representative.
s. Utilize proper demobilization procedures when transitioning from the incident.
t. Maintain all qualifications and certifications as required for the position.
u. Follow all required policies and directives, as applicable.
v. Follow all state and federal behavioral health laws, as applicable.
w. Maintain Unit/Activity Log (ICS Form 214) or other non-confidential documentation as required.

Critical Incident Stress K9 (CISK)

Critical Incident Stress K9 and handlers should be trained to respond to intense and emotional situations. Teams should hold a Therapy Dog (complex rating) and/or Animal-Assisted Crisis Response (AACR) certification(s) and be considered certified as a crisis response canine. The canine team serves as a member of the Critical Incident Peer Support (CIPS) team and is supervised by the Critical Incident Stress Lead (CISL). Crisis K9(s) not assigned to a Critical Incident Peer Support (CIPS) Team must have a request in place either through established contracts, agreements, policies, or vendor lists. It is recommended that the crisis K9 handler be trained as a CISM. Crisis Response K9 nonprofit organizations have been used with great success in large-scale incidents. Utilization of the current national crisis response canine certification process shall be considered as acceptable training and standard until additional training or standards are recognized and/or required.

a. Review Chapter 1 *Common Responsibilities.*
b. Works as a member of the Critical Incident Peer Support (CIPS) Team
c. Effectively communicate with individuals seeking help and with team members.
d. Maintain individual and group confidentiality unless it is in violation of any mandated law (child abuse, adult abuse, immediate danger to self, or others).
e. Maintain transparency with individuals and/or groups seeking behavioral health assistance during the incident and with follow-up.

f. Provide confidential follow-up with individuals for any future behavioral health needs.
g. Crisis K9 teams must be able to tolerate and cope with stress and changing environments.
h. Crisis K9 handlers must be able to recognize stress in their dogs through awareness and implementation of skills for preventing and managing the stress.
i. Handlers must recognize the dog's behavior encompassing an understanding of canine body language.
j. Crisis K9 teams provide all the necessary equipment required for the incident and must be proficient in its use.
k. Handlers will respect individuals' personal space unless requested by the individual or approached by the individual.
l. Handlers will recognize and respect the individual's wishes if they decline the canine services.
m. Handlers are the advocate for their dog and will always put that into consideration on incidents. If a situation is questionable, the handler will notify the CISL or designee and disengage, as required.
n. Participate in the following:
    - Assist with a defusing, if qualified.
    - Assist with a critical management briefing, if qualified.
    - Any other task that requires behavioral health assistance, either assisting or leading.
    - Crisis K9 teams may assist in the above examples if qualified to do so as a CISM.
o. Recognize risk factors, stressors, and be able to engage individuals with possible suicide ideations in a safe manner for all involved.
p. Work with team members if the crisis K9 is a member of a non-life safety position while maintaining situational awareness. Proper safety gear must be obtained for field operations.
q. Coordinate activities with adjacent team members as needed. Review assignments with additional teams to coordinate efforts and address any additional needs.
r. Work as a team member in pairs. One member of the pair must be CISM qualified.
s. Logistical needs for the dogs will be provided by the handler unless a contract, agreement, policy, or procedure is in place.
t. A proper work/rest cycle will be communicated to the CISL or designee daily during the incident.
u. Maintain radio communications with Division/Group Supervisors when in the field, i.e., traveling in and out of divisions.
v. Provide point of contact information for any media-related questions and be familiar with media policy as well as team lead or incident direction.
w. Act in a professional manner as an Agency Representative.
x. Utilize proper demobilization procedures when transitioning from the incident.
y. Maintain all qualifications and certifications as required for the position.

z. Follow all required policies and directives, as applicable.
aa. Follow all applicable state and federal behavioral health laws, as applicable.

ab. Maintain Unit/Activity Log (ICS Form 214), or other non- confidential documentation, as required.

APPENDIX 1

TERMINOLOGY

Animal-Assisted Crisis Response (AACR):

Teams are specially trained, evaluated, and credentialed dog teams who have at least 12 visits providing animal-assisted therapy in various settings. These caring comfort dogs demonstrate healing qualities to assist responders in facilitating crisis intervention.

Critical Incident:

Is not defined by the event itself; it is defined by the individuals and/or the organization's response to what occurred. A critical incident is any unexpected, traumatic event that affects an individual's feelings of personal safety, their ability to perform daily activities, and their ability to concentrate on their normal job duties. Simply put, a critical incident is a traumatic event (or perceived life-threatening event) that has enough power to overwhelm an individual's or organization's ability to cope.

Examples, but not limited to:

- Line of Duty Death
- Off Duty Death (in some instances)
- The suicide/attempted suicide of a co-worker or colleague
- Aviation accident
- Entrapment
- Burn-Over
- Shooting
- Serious accident or injury
- Shelter Deployment
- Exposure to fatalities and injuries
- Disaster recovery work
- A significant event involving children
- Acts of Terrorism
- Threats of Violence and to personal safety
- Events charged with profound emotions

Crisis Intervention:

Temporary, active, and supportive entry into the life of individuals or groups during a period of extreme distress.

Crisis Management Briefing:

Is a large, homogeneous group intervention used before, during, and after a crisis to present facts, facilitate a brief, controlled discussion, Q&A, and information on stress

survival skills and/or other available support services. May be repeated as the situation changes.

Critical Incident Peer Support (CIPS) Team

Is a team of qualified people assembled to assist first responders after a critical incident. The CIPS reports to the Liaison Officer (LOFR) or directly to the Incident Commander at the IC's discretion. Critical Incident Peer Support (CIPS) Team is organized to meet the needs of the specific event. A Critical Incident Peer Support (CIPS) Team will have a qualified Critical Incident Stress Team Lead (CISL).

Critical Incident Stress Chaplain (CISC):

Is a non-denominational faith-based qualified peer supporter who responds to a critical incident and works within the Critical Incident Peer Support Group. Chaplain members should also have required training in behavioral health. CISC members work under the CISL.

Critical Incident Clinician (CICL):

Is a licensed Mental Health Professional who has been qualified to work as a member of the Critical Incident Peer Support Group. Critical Incident Clinician members work under the CISL. Qualified licensed clinicians are Licensed Marriage and Family Therapists (MFT), Clinical Social Workers (LSW), Licensed Professional Clinical Counselors (LPC), and fall under the jurisdiction of the Board of Behavioral Sciences (BBS). Psychologists fall under the authority of the Board of Psychology (BOP). State requirements for a licensed Mental Health Provider are as follows.

- Licensed PhD or PsyD
- Board of Psychology, www.psychology.ca.gov
- Must earn a Doctorate Degree: PhD or PsyD
- Successfully Complete Number of Supervision Hours (for specifics, refer to psychology.ca.gov)
- Research Requirement (many programs require completion of dissertation research in the field.)
- Pass National Examination
- Pass State Examination

OR

- Marriage and Family Therapist (MFT), Licensed Social Worker (LSW), and Licensed Professional Counselor (LPC)
  Board of Behavioral Sciences, www.bbs.ca.gov
- Must earn a master's degree
- Successfully Complete Number of Supervision Hours (for specifics, refer to bbs.ca.gov)

- Pass National Examination
- Pass State Examination

Critical Incident Stress K9 (CISK):

Is a canine and handler trained in crisis response work. The dog and handler will be qualified to serve as members of the Critical Incident Peer Support Group. Critical Incident Stress K9 members should also have the required training in behavioral health. Dogs and handlers work under the CISL.

Critical Incident Stress Management (CISM):

Is a qualified peer supporter who responds to a critical incident and works within the Critical Incident Peer Support Team. CISM members work under the CISL.

Critical Incident Stress Team Lead (CISL):

Is a qualified peer supporter who has extensive training and experience that leads the Critical Incident Peer Support Team (CIPS) and reports to the Liaison or the Incident Commander at the IC's discretion. The lead organizes and directs the CIPS team's operations on the incident.

Culturally Competent Clinician:

Culture is defined as patterns of human behavior that are part of a racial, ethnic, religious, or social group. Behaviors can include thoughts, language, customs, beliefs, and institutions. For example, first responders are a culture characterized by communication styles, worldviews, belief systems, language, traditions, and values that differ drastically from those of the mainstream population.

Cultural competence is an acknowledgement and incorporation of, on the part of clinicians and healthcare systems, the importance of culture, the assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge, and the adaptation of services to meet culturally unique needs.

Debriefing:

Is a proactive intervention involving a group meeting or discussion about a particularly distressing critical incident. Based on the core principles of crisis intervention, a Critical Incident Stress Debriefing (CISD) is designed to mitigate the impact of a critical incident and assist individuals in recovery from the stress associated with the event. The CISD is facilitated by a specially trained team that includes Mental Health Professional(s) and peer support personnel. Ideally, it is conducted between 24 and 72 hours after the incident, but may be held later under exceptional circumstances.

Defusing:

Is an intervention that is a shorter, less formal version of a debriefing. It generally lasts 30 to 60 minutes but may go longer, and is best conducted within 1 to 4 hours after a critical incident. It is not usually conducted more than 12 hours after the incident. Like a debriefing, it is a confidential and voluntary opportunity to learn about stress, share reactions to an incident, and vent emotions. The main purpose is to stabilize people affected by the incident so that they can return to their normal routines without unusual stress. Where appropriate, a formal debriefing is also required.

International Association of Fire Fighters (IAFF):

The IAFF Foundation's mission is to support members and their families in their time of need, promote fire and burn prevention, advocate for firefighter health and safety, and provide public education on how to prevent and recover from traumatic events.

International Critical Incident Stress Foundation (ICISF):

The mission of the International Critical Incident Stress Foundation is to provide leadership, education, training, consultation, and support services in comprehensive crisis intervention and disaster behavioral health services to the emergency response professions, other organizations, and communities worldwide.

K9:

The term K9 is the accepted verbiage for a “working” class dog.

Psychological Distress:

Unpleasant feelings or emotions that impact your level of functioning, such as sadness, anxiety and distractions. Symptoms of mental illness are manifestations of unmanaged psychological distress.

Psychological Trauma:

This is a person's emotional response to a critical incident such as suffering life-threatening danger, injury, or abuse, witnessing the death of others, or losing a colleague in the line of duty. Experiencing a traumatic incident does not mean someone is impaired or will develop Post-Traumatic Stress Disorder (PTSD). Such an experience simply means that the event occurred, is now part of a person's sensory memory, and needs to be processed and integrated.

Therapy Dog:

A therapy dog is a dog that is trained to provide affection, comfort, and support to people in hospitals, retirement homes, nursing homes, schools, libraries, hospices and/or disaster areas.

APPENDIX 2

POSITION REQUIREMENTS

Critical Incident Stress Lead (CISL)

*REQUIRED TRAINING**

1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. Intermediate ICS (I-300)
4. Advanced ICS (I-400)
5. NIMS: An Introduction (IS-700)
6. NRF: An Introduction (IS-800)
7. NFFF Stress First Aid training (online)
8. ICISF Advanced Group Crisis (Two-Day Course) * **and** ICISF Suicide Prevention, Intervention and Postvention course

* **And**

IAFF Basic Peer Support Class (Two-Day Course) *

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE

1. Agency Required-Satisfactory performance in Peer Support.
2. Qualified Critical Incident Peer Supporter (CISM).
3. **2 quality assignments shadowing a qualified Critical Incident Stress Lead.

PHYSICAL FITNESS LEVEL

- Light

OTHER POSITION ASSIGNMENTS THAT MAINTAIN CURRENCY

- Critical Incident Peer Support (CISM)

RECOMMENDED TRAINING WHICH SUPPORTS THE DEVELOPMENT OF KNOWLEDGE

- Any position or discipline training endorsed by IAFF or ICISF.

*** Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on their complexity.*

Critical Incident Stress Management (CISM)

REQUIRED TRAINING

1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. NIMS: An Introduction (IS-700)
4. NRF An Introduction (IS-800)
5. NFFF Stress First Aid training (online)
6. ICISF Assisting Individuals in Crisis (Two-Day Course)
7. ICISF Group Crisis Intervention (Two-Day Course) **or**

ICISF Assisting Individuals in Crisis & Group Crisis Intervention

(Three-Day Course) **or** IAFF Basic Peer Support Class

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE

1. Agency Required-Satisfactory performance in Peer Support.
2. Two quality assignments shadowing a qualified CISM*

PHYSICAL FITNESS LEVEL

- Light

RECOMMENDED TRAINING WHICH SUPPORTS THE DEVELOPMENT OF KNOWLEDGE

1. Intermediate ICS (I-300)
2. Advanced ICS (I-400)
3. ICISF Suicide Prevention, Intervention, and Postvention (Two-Day course)
4. Any position or discipline training endorsed by IAFF or ICISF.

CISM applicants should understand that these required trainings may not meet the requirements for confidentiality under the CA state law at this time.
www.healingourown.org/department-resources

** Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on their complexity.*

Critical Incident Clinician (CICL)

Future Resource Ordering System Addition and Task Book Required

Minimum Licensure, Experience, and Professional Standing

Clinicians deployed to incidents must:

- Hold an active California license in good standing as:
  - LMFT, LCSW, LPCC, or
  - Licensed Psychologist (PhD or PsyD).
  - Associates are not eligible for deployments.
- Have at least 1 year working directly with public safety, emergency services, or disaster/MCI environments (e.g., fire, law, EMS, emergency departments, disaster response).
  - Direct work with high-acuity presentations (suicidality, psychosis, severe mood disorders, substance use, and interpersonal violence).
  - Ability to provide a written endorsement letter from a public safety/disaster agency or equivalent program leadership.
- Have no current Board actions, significant malpractice findings, or active ethics investigations.
  - Any changes in licensing status are to be reported immediately for removal from the deployment roster*. *IROC vs name request through agency/individual recommendation

Core Clinical & Operational Competencies

Clinicians must demonstrate competence in:

- Evidence-informed crisis and trauma skills
  - Proficiency in Psychological First Aid (PFA) for immediate post-disaster support.
  - Familiarity with Skills for Psychological Recovery (SPR) or similar stepped-care approaches for the early recovery phase.
  - Ability to assess and manage:
    - Acute stress reactions
    - Suicidality/self-harm risk and danger to others
    - Substance use/withdrawal concerns
    - Interpersonal/relational conflict and domestic violence risk
    - Emergencies outside deployment/at home.
- Triage and scope-of-practice discipline

  - Ability to distinguish between:
    - Individuals who need brief crisis support and monitoring vs.
    - Those needing urgent psychiatric/medical intervention or follow-up clinical care.
  - Capacity to work in brief, task-focused contacts rather than traditional therapy settings.

- Operational / field competence
  - Understanding of the Incident Command System (ICS) structure (e.g., reporting to Behavioral Health Group/Unit Leader or equivalent) and ability to function without disrupting operations.
  - Understanding of:
    - Scene safety and personal safety (inquire on assignment regarding incident-specific needs [Lead Peer/Senior Clinician/Safety Officer]
    - Awareness that PPE use may be required, appropriate to the incident
    - Hot/warm/cold zones (conceptual) and staying within assigned operational areas
    - Mass casualty triage realities (priority goes to life-saving operations; behavioral health supports are secondary but essential).
- Team & role clarity
  - Understanding of roles, scope, and limitations of:
    - Peer Support Members
    - Chaplains / spiritual care providers
    - K9/handler teams
    - Non-licensed helpers, vendors and volunteers
  - Ability to provide clinical guidance, coaching, and real-time consultation to those associated with the incident.
- Ethics and legal awareness
  - Strong working knowledge of:
    - Confidentiality and limits and exceptions in disaster context
    - Mandated reporting (child/elder abuse, Tarasoff)
    - Documenting crisis contacts in a way compatible with agency/city practices while maintaining individuals' rights to confidentiality
    - Any recording/notes kept by clinical staff are to be kept in accordance with PHI legal and ethical standards. Incident logs (ICS 214) will be required but should not include PHI (name, contact info, etc.).

Required Training (Prior to Deployment) or demonstrated competency within the ICS structure.

ICS / NIMS Core:

- ICS-100: Introduction to ICS
- ICS-200: Basic ICS
- IS-700: NIMS: An Introduction
- IS-800: National Response Framework (NRF)
- NFFF Stress First Aid training (online)

ICISF Courses:

- Assisting Individuals in Crisis (Two-Day Course)
- Group Crisis Intervention (Two-Day Course)

Disaster Behavioral Health Core:

Recommended Continuing Education

- Advanced ICS: ICS-300 and ICS-400
- IAFF Peer Support Training
- ICISF Suicide Prevention, Intervention, and Postvention
- Psychological First Aid (PFA) – standardized course based on the NCTSN/NCPTSD model.
- Firefighter Training (S-130): Entry-level Wildland fundamental skills.
- Disaster-specific or responder-specific modules, such as:
  - FEMA / NCTSN/SAMHSA disaster behavioral health courses (online)
  - Courses on responder resilience, moral injury, acute substance use and secondary traumatic stress.
- Fire/EMS Culture Orientation, preferably:
  - Training on fire service culture, terminology, operations, and behavioral health needs.
  - Ride-along or station-based orientation (non-operational) to understand tempo and environment

Insurance Requirements ask Agency Risk about insurance requirements*

It is suggested that clinicians maintain the following but could be required to provide additional insurance at the request of the incident.

Clinicians must maintain current insurance with appropriate endorsements before deployment and throughout their affiliation.

Insurance limits and carrier ratings shall meet or exceed City Risk Management standards for professional services contracts. Final limits should be set in conjunction with City/Department Risk Management, but typical minimums for professional services contracts in State of California are:

- Professional Liability / Malpractice

  - Minimum: $1,000,000 per claim / $2,000,000 aggregate
  - Must cover services delivered in the field, at incident sites, and at any associated facilities (Family Assistance Center, reunification centers, base camps, etc.).
- Commercial General Liability
  - Minimum: $1,000,000 per occurrence / $2,000,000 aggregate
  - Agency/City to be listed as additional insured.
- Automobile Liability
  - If operating vehicles in the course of deployment (beyond normal commuting):
    - Minimum: $1,000,000 combined single limit per occurrence.
- Workers' Compensation and Employers' Liability
  - As required by California law; Employers' Liability typically $1,000,000.
- Health Insurance
  - Evidence of comprehensive health care coverage (for deployments in physically taxing or hazardous conditions).

****Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased based on the complexity of the assignment.*

Critical Incident Stress Chaplain (CISC)

Future Resource Ordering System Addition and Task Book Required.

REQUIRED TRAINING

1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. NIMS: An Introduction (IS-700)
4. NRF An Introduction (IS-800)
5. NFFF Stress First Aid training (online)
6. Federation of Fire Chaplain Basic Chaplain 40-hour course
7. ICISF Assisting Individuals in Crisis (Two-Day Course)
8. ICISF Group Crisis Intervention (Two-Day Course) **or** ICISF Assisting Individuals in Crisis & Group Crisis Intervention (Three-Day Course) **or** IAFF Basic Peer Support Class

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE

1. Chaplain (Licensed Minister) **or** Associate Chaplain (Non-Licensed or Lay Minister).
2. Agency Required-Satisfactory performance in Peer Support.

3. Two quality assignments shadowing a qualified Critical Incident Stress Chaplain. **

PHYSICAL FITNESS LEVEL

- Light

RECOMMENDED TRAINING WHICH SUPPORTS THE DEVELOPMENT OF KNOWLEDGE

1. ICISF Suicide Prevention, Intervention and Postvention course is highly desirable.
2. Any position or discipline training endorsed by IAFF or ICISF.

** Position will need to be created, added into a Resource Ordering system, and a task book built.*

***Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position. The number of assignments can be increased depending on the task's complexity.*

Critical Incident Stress K9 (CISK)

Future Resource Ordering System Addition and Task Book Required.

REQUIRED TRAINING

1. Introduction to ICS (I-100)
2. Basic ICS (I-200)
3. NIMS: An Introduction (IS-700)
4. NRF An Introduction (IS-800)
5. NFFF Stress First Aid training (online)
6. Nationally Recognized Therapy Dog Complex rating requirements
7. Pet First Aid (Basic)
8. ICISF Assisting Individuals in Crisis (Two-Day Course) **OR** ICISF Group Crisis Intervention (Two-Day Course) **OR** ICISF Assisting Individuals in Crisis & Group Crisis Intervention (Three-Day Course) **OR** IAFF Basic Peer Support Class

~~**OR an approved peer support training course(s)** **that includes confidentiality protections.** www.healingourown.org/department-resources~~

CISM and CISK applicants should understand that these required trainings may not meet the requirements for confidentiality under the CA state law at this time. www.healingourown.org/department-resources

REQUIRED EXPERIENCE, CERTIFICATE OR LICENSE

1. Nationally recognized Therapy Dog (complex rating) and/or Animal Assisted Crisis Response (AACR) certification **OR** Current certification or letter from the certifying agency confirming the K9 team has successfully completed the required annual proficiency testing ***(See Appendix A).***
2. Agency Required: Satisfactory performance in Peer Support as a CISK
3. Two quality assignments shadowing a qualified Critical Incident Stress K9.
    - *Quality assignments are those that exercise the full range of responsibilities of the assigned trainee position.*

PHYSICAL FITNESS LEVEL

- Light

RECOMMENDED TRAINING WHICH SUPPORTS THE DEVELOPMENT OF KNOWLEDGE

- ICISF Suicide Prevention, Intervention and Postvention course is highly desirable

APPENDIX 3: CISK Proficiency Testing Standards

ANNUAL CERTIFICATION AND PROFICIENCY TESTING

All Critical Incident Stress K9 (CISK) teams must successfully complete an annual proficiency demonstration to maintain their certification status. It shall be the responsibility of the K9 handler trainee to provide a current, valid certification issued by a recognized certifying agency.

Goal of Testing

The goal of this annual testing is to provide a clear outline and expectation for peer support dog providers and handlers to follow. The assessment will evaluate the dog's behavior and responsiveness to the handler, and ensure the team can perform its duties safely, without posing a hazard to the handler or the public. The dog should be able to perform all items on command or with minimal direction.

Scoring Criteria

CISK Trainees will be evaluated by a certified CISK Team member to ensure competency.

The team will be scored on a 1–3 scale for each testing item:

1: Perform 100% of the time (Pass)

2: Perform more than 75% of the time (Acceptable, with limits)

3: Perform less than 75% of the time (Fail)

Disqualifying Behaviors (Automatic Failure)

1. The team receives a score of **3** on **any** single testing item.
2. The team receives a score of **2** on more than **10** testing items.
3. The dog eliminates during any portion of the testing that is not appropriate.
4. The leash is tight (i.e., the dog is pulling) more than 25% of the time.
5. The handler cannot maintain peer support dog etiquette (e.g., barking inappropriately, showing extreme stress or fear, showing aggression of any kind, jumping, greeting or interacting with other dogs while working).
6. The dog is not clean or groomed appropriately.
7. The dog does not appear to be in a healthy condition.

Proficiency Assessment Checklist (Summary)

Assessment Category	Testing Item Highlights
Obedience Assessment	Heel (position and distance), Sit/Down on command, Stays, Recall, and overall on-leash control.
Vehicle Travel	Load/Unload safely, maintain calm position, allow approaches, remain calm under distractions and during travel.
In Public and Indoors	Controlled entry/exit/heeling in buildings, unaffected by people, distractions, sounds, and other animals. Confident on different surfaces (stairs, elevators, etc.). Walk through crowds calmly.
Exposure Control	Unaffected by the evaluator stepping over the dog or dropping the clipboard. Ignores dropped food items.
Traffic and Environmental Control	Unaffected by traffic/vehicles, bicycles/strollers. Cross a public street under control.
Task Training	Performs a minimum of 1 task used for Peer Support purposes, i.e., "Go Visit."

Export to Sheets

Description of Task(s)

- **"Go Visit":** The dog is cued by the handler to calmly and passively interact with an individual or small group (such as a defusing session). The dog moves into a comfortable proximity, is receptive to petting, and remains calm and unobtrusive, providing a non-judgmental presence to facilitate emotional regulation and stress reduction.

Role and Responsibilities

Critical Incident Stress K9 and handlers should be trained to respond to intense and emotional situations. Teams should hold a Therapy Dog (complex rating) and/or Animal-Assisted Crisis Response (AACR) certification(s) and be considered certified as

a crisis response canine. The canine team serves as a member of the Critical Incident Peer Support (CIPS) team and is supervised by the Critical Incident Stress Lead (CISL).

Common Responsibilities

- Works as a member of the Critical Incident Peer Support (CIPS) team.
- Effectively communicate with individuals seeking help and with team members.
- Maintain individual and group confidentiality unless it is in violation of any mandated law.
- **Maintain a minimum distance of 2 feet from other working K9 teams** while the Peer Support Dogs are engaged in a working capacity.
- Crisis K9 teams must be able to tolerate and cope with stress and changing environments.
- Crisis K9 handlers must be able to recognize and manage stress in their dog through awareness of canine body language.
- Handlers are the advocate for their dog and will always put that into consideration on incidents.
- Handlers will recognize and respect the individual’s wishes if they decline the canine services.
- Work as a team member in pairs (one member must be CISM qualified).
- A proper work/rest cycle will be communicated to the CISL or designee daily.
- Maintain all qualifications and certifications as required for the position.
- Maintain Unit/Activity Log (ICS Form 214), or other non-confidential documentation as required.