UNDER THE HELMET: Performing An Internal Size-Up
A Proactive Approach To Ensuring Mental Wellness
VCOS MISSION

To provide chiefs and chief officers who manage volunteers within a volunteer or combination fire, rescue or EMS delivery system with information, education, services and representation to enhance their professionalism.

VCOS VISION

To represent the interests of all volunteer and combination fire/rescue/EMS agencies. We will be a dynamic organization, characterized by our integrity, customer focus and membership development, with value placed on people and the superior utilization of technology. We will excel by creating educational programs, through unrivaled networking, and by helping VCOS members further their success and reach their potential.
AUTHORS

Elizabeth Anderson-Fletcher, Ph.D.
Associate Professor
Hobby School of Public Affairs
Bauer College of Business
University of Houston
Volunteer Firefighter
Cypress Creek Fire Department
Houston, Texas
efletcher@uh.edu

Chief John M. Buckman, III (Retired)
German Township Fire Department
Evansville, Indiana
jmbuckman3rd@gmail.com

Captain Jeff Dill (Retired)
Founder/CEO
Firefighter Behavioral Health Alliance
jdill@ffbha.org

Chief Charles “Chuck” Flynn
Suffield Fire Department
Suffield, Connecticut
cflynn@SuffieldCT.gov

Scott Geiselhart
Certified Peer Support Specialist
Frazee Fire Department
Frazee, Minnesota
st.autolive.com

Dr. Robin Grant-Hall
Trauma Psychologist, Treater and Trainer
of First Responders
Glastonbury, Connecticut
robingranthall@gmail.com

Chief Steve Heitman, MA, EFO, CFO
Mercer Island Fire Department
Mercer Island, Washington
steve.heitman@mercergov.org

Chief Patrick J. Kenny, EFO, CFO
Western Springs Fire Department
Western Springs, Illinois
p.kenny@wsprings.com

Chief Scott Kerwood, Ph.D
Hutto Fire Rescue
Hutto, Texas
sdkerwood@huttaffirerescue.org

Mike Macdonald
Vice President and Chief Operating Officer
SpecComm International
Apex, North Carolina
mikemac1821@gmail.com

Commander Emeritus Tim Pelton
Connecticut Statewide Honor Guard
Plantsville, Connecticut
tim@timpelton.com

J.C. ‘Skip’ Straus, BCC
Founder, CEO and Senior Chaplain
Emergency Chaplain Group
Spring, Texas
skip@emergencychaplain.org

Chief Jim Wamsley, EFO
Rock Springs Fire Department
Rock Springs, Wyoming
jim.wamsley@rswy.net

Chief Fred Windisch, EFO, CFO
Ponderosa Fire Department
Houston, Texas
fwindisch@ponderosavfd.org
VCOS BOARD OF DIRECTORS

EXECUTIVE COMMITTEE:

Chair
Chief Timothy S. Wall
North Farms (CT) Volunteer Fire Dept
dblack@townofduck.com

Vice Chair
Chief Charles Flynn
Suffield (CT) Vol Fire Dept
cflynn@suffieldct.gov

Secretary/Treasurer
Chief Norvin Collins
Sauvie Island (OR) Fire District
chief.collins@sifire.org

International Director
Chief J. Daniel Eggleston
Albemarle (VA) County Fire Rescue
deggleston@albemarle.org

AT-LARGE BOARD MEMBERS:

Chief Donna Black
Duck (NC) Fire Department
dblack@townofduck.com

Chief Jason Catrambone
Williston (ND) Fire Department
jasonc@ci.williston.nd.us

Chief Randy Larson
Pagosa (CO) Fire Protection District
rlarson81@gmail.com

Chief Ed Rush
Hartsdale (NY) Fire District
erush@hartsdalefire.org

Chief James P. Seavey, Sr.
Cabin John Park (MD) Volunteer Fire Department
mdfire0412@aol.com

Chief Fred Windisch
Ponderosa (TX) Fire Department
fwindisch@ponderosavfd.org
Developed by the IAFC Volunteer Combination Officers Section

**Slide**
Behavioral Wellness Firefighter Training

**Instructor Notes**
Welcoming comments. Thank the host.

**Slide**
VCOS Board Members

**Instructor Notes**
If you know any of the board members the Instructor could talk about that individual.

**Slide**
Contributing Authors
- John M. Buckman III
- Elizabeth Fletcher
- Pat Kenny
- Skip Straus

**Slide - Instructor Introduce themselves**

**Slide - Training Mission**
To provide education and training to firefighters through an interactive facilitated presentation style using four delivery levels.
- Awareness
- Operations
- Technician
- Chief

**Slide - Training Objectives**
The student:
- Impact of suicide on families
- Define acute stress
- Define chronic stress
- Identify support programs
- Identify family support programs
- Actions to take at the Company/Battalion level
Slide - Group Introductions

Instructor Notes - Ask students to introduce themselves.

Name - Rank - Years on the Job - Personal Experience with Emotional Stress

If there are more than 15 students you should modify and ask the large group - “What Experience They Have Had With Emotional Stress”?

Slide - Behavioral health affected firefighters for years…

Instructor Notes
Page 8 of the report is where this statement is located.
Ask students - why is it that we ignore our own mental health.

Slide - Cultural Change / Behavioral Health

Instructor Notes
Page 16 and page 27 of the report.

Ask students to review the organization size up questions and then facilitate a discussion about their organization and where they are in the behavioral wellness initiative?

Slide - Share the load

Instructor Notes
Discuss the contents of the video with the class. Instructor role is to get the students to open up and talk about the behavioral wellness initiative.

Slide - As firefighters, you will…

Instructor notes
From the Gary Ludwig book titled Blood, Sweat, Tears and Prayers.
Discuss with students. Who has experienced any of these issues? How did you deal with the event?

Slide - Action Statement 2
Fire departments need to become familiar with emotional and behavioral health issues and methods of reducing their impact on members.
Slide Stress Management

Instructor Notes
Page 14 of the YRR talks about stressors.
Ask students how they deal with stress? What works? What does not work?

Slide - “Everything good happens at the kitchen table.” Chief Alan V. Brunacini

Notes
Discuss the kitchen table and the value of those discussions.
- Real discussions about what we see / do / hear and how we react.
- Can’t be afraid to confront someone tactfully/diplomatically if you believe they are suffering.
- Ask the students to share some of their “kitchen table” conversations about behavioral wellness.

Slide - “It’s About Being Alone”
There is a difference between HELPING and FIXING.

Instructor Notes
- Explain to the students this is a new job duty.
- It is probably not in your job description.
- This new function is “Other duties as assigned”
- It’s a new critical task assigned to each of us.
Slide
John M. Buckman III - Grandfather
“You are in my mind. Not real but like a ghost to me. I sometimes believe you are there. You appear and disappear. These bones feel old, fragile, easily broken. I know I must remain strong for me. It is not easy. Sometimes that’s why I cry. I can’t crack. I must be strong for others. I will need and receive support.”

Instructor Notes
Abandonment disorder
“And I would hide my face in you and you would hide your face in me, and nobody would ever see us any more…” — Franz Kafka, “The Castle”
“You are a ghost to me. You appear and disappear at a whim. You float silkily in and out through the walls, haunting me, taunting me, with promises unkept and needs unmet. You are my skeleton, the very core beneath my flesh, literally holding me up from within. These bones feel old, fragile, easily broken. And I absolutely must not break this skeleton. Sometimes that’s why I try. I dare you, my haunted bones. I dare you to crack if I fall on you. And I will. Abandonment is a fear so constant that it’s almost comfortable now. It’s always with me, like a heartbeat. Over and over. Please. Don’t. Leave. Me. Real or imagined. Being abandoned is the worst thing in the world, a perceived abandonment can make one feel like they deserve the worst thing in the world.”
This story is from John M. Buckman III

Slide - Dramatizing What We Do May Not Be Healthy!

Notes
What we do in public safety deals often with life and death. Life is good. Death is bad. Public Safety personnel have to learn how to deal with death.

Slide
“It’s Not As Easy As Cleaning Your Gear”
John M. Buckman III

Notes
Explain to students that addressing behavioral wellness issues with firefighters will be an ongoing process requiring long term commitment. You can’t talk about a situation one time and wash away all of the dirt associated with that event.
Slide - How do you create a culture of trust?
What is your fire department behavioral wellness culture?

Notes
Ask students the question on the screen.
How is trust evident in your company? What actions show trust? Write student responses on an easel pad or white board.
Page 14 of the YRR has several actions for establishing trust.

Here are some additional examples of answers
Communicate often - listen more than talking
Recognize excellence
Show vulnerability
Trust is not optional within the company.
Expand the role of trust.
We trust each other during an emergency response.
Do they trust each other around the kitchen table.
Trust impacts your ability to recruit and retain the best for your company and department.

Slide
What is your fire department behavioral wellness culture?

Instructor Notes
Instructor pass out 3x5 cards
• Students anonymously write what they believe their FD behavioral wellness culture is within their fire department.
• Ask students for solutions to identified behavioral wellness issues.
• Do you have access to an EAP?
• Have you used the EAP?
• Was it helpful?
• Have you responded to events that impacted your relationship on the job?
• Have you responded to events that impacted your relationship at home?
• Do you feel comfortable discussing with your crew your behavioral wellness challenges?
• Do you feel comfortable discussing with your chief your behavioral wellness challenges?
• Do you feel comfortable discussing with anyone on your department your behavioral wellness challenges?

Collect the cards.
Tabulate the results!

Discuss the tabulated results?
Instructor Notes
Ask the students the following questions.
  • How did these incidents impact the first responders?
  • How did these incidents impact the community?
  • What was the role of the firefighter?

Mental impact
  • Walking through the blood?
  • Cell phones of deceased ringing incessantly.
  • Columbine High School, Columbine, Colorado: April 20, 1999, 15 dead, 24 injured, Eric Harrison and Dylan Klebold
  • Virginia Tech, Blacksburg, Virginia: April 16, 2007, 33 dead, 23 injured, Seung-Hui Cho
  • Las Vegas Strip (Mandalay Bay Hotel), Las Vegas, Nevada: October 1, 2017, 59 dead, 851 injured, Stephen Paddock
  • Marjory Stoneman Douglas High School, Parkland, Florida: February 14, 2018, 17 dead, 17 injured, Nikolas Cruz

What have you seen?
How did you deal with it?
Ask the students the 2 questions to generate discussion about their local experience.
Not just to the fire service. Could be family related, military and news reports.

Slide - Impact of Suicide on the Families
  • Leslie Dangerfield’s interview on WGN Chicago
  • https://www.youtube.com/watch?v=qngleqS5dts

Instructor Notes
Why is “Families” plural?
The home family – Lisa Dangerfield, wife and sons Christopher and Bryce
The fire family – Indian River County Fire Rescue: Station 8 (current Battalion Chief), Station 1 (Captain 3 years), Station 2 (Lieutenant for most of his 24-year career

Impact of Suicide on the Families
  • Why is “Families” plural?
  • Home family
  • Fire family
Slide - Physiological Stress Response

- “Fight or Flight” Response
- Four Mind-Body Changes:
  - Redirection of blood to the brain and large muscle groups from extremities
  - Heightened sense of alertness (e.g., vision and hearing sharpen)
  - Release of glucose and fatty acids for fuel
  - Shutting down of immune system and restorative processes (e.g., digestion)
- Return to “Rest and Digest” when threat is over

Instructor Notes
Ask students what are some of the symptoms of physiological stress
What does this mean?
“fight, flight, or freeze” response—some people actually shut down and become incapacitated.
This stress response impacts your job performance.

Ask students what are some of the symptoms of physiological stress / possible answers are…
- Low energy.
- Headaches.
- Upset stomach, including diarrhea, constipation, and nausea.
- Aches, pains, and tense muscles.
- Chest pain and rapid heartbeat.
- Insomnia.
- Frequent colds and infections.
- Loss of sexual desire and/or ability.

The mind does not know the difference between a real threat and a perceived threat.
What comes into the mind the body reacts?
“Fight or Flight” Response
Four Mind-Body Changes:
- Redirection of blood to the brain and large muscle groups from extremities
- Heightened sense of alertness (e.g., vision and hearing sharpen)
- Release of glucose and fatty acids for fuel
- Shutting down of immune system and restorative processes (e.g., digestion)
- Return to “Rest and Digest” when threat is over

Acute vs. Chronic Stress
- Acute Stress
  - Release of neurotransmitters in response to stressor (adrenalin, cortisol)
  - Body returns to normal after stressor is removed
- Chronic Stress
  - Stressor remains present (e.g., problems with work, family, money)
  - Body adapts to increased chemical presence
- Cumulative Stress Overload = Chronic Acute Stress
Instructor Notes

Explain to the students about stress and how to manage stress in day to day life.

- Anticipatory stress – you can trigger the stress response just by thinking about a potentially stressful event or situation.
  - Studies have shown that often the anticipatory anxiety is worse than that experienced during the actual event.
- It is how we talk to ourselves….
- Firefighters get the “double whammy” – chronic acute stress.
  - You take the normal stressors we experience as a human, and pile on top of that the stress in the line of duty.
- Natural reaction to an accident putting a job - fear anxiety worry panic
  - Chronic worry about stability financial, uneasiness in career ongoing chronic acuter is the cumulative PILE ON visual.
- When your pager goes off your body reacts.
  - Endorphins are produced when you smile and your body reacts positively
  - Dopamine is the feel good transmitter
  - Oxycotin is the positive drug.
  - Epinepherine is the negative drug.
- Not using the Adrenalin when we expect expect it to be a house fire
- Photo of a trash can
- Acute Stress
  - Release of neurotransmitters in response to stressor (adrenalin, cortisol)
  - Body returns to normal after stressor is removed
- Chronic Stress
  - Stressor remains present (e.g., problems with work, family, money)
  - Body adapts to increased chemical presence
- Cumulative Stress Overload = Chronic Acute Stress
Slide - Behavioral Reactions to Stress

Instructor Notes

Common short-term reactions:
- Emotional responses
- Disrupted sleep or insomnia
- Confusion or lack of clarity
- Denying or minimizing the event’s (or events’) impact on us
- Possible Long-term reactions:
- Worry and anxiety
- Lowered frustration tolerance and impatience
- Irritability
- Depression or feelings of numbness
- Denial or minimization of impact
- Sleep problems, insomnia
- Nightmares, night sweats
- Teeth grinding at night or even while awake

Ask the students to share some of their reactions to stressful situations. Discuss some of the issues listed below to make sure students understand the diversity of this issue.

Behavioral Reactions to Stress
- Short- and long-term reactions lead to behavioral health problems:
- Use of alcohol and/or drugs to “self-medicate”
- Increased risk taking and reckless behavior
- Increased addictive behaviors
- Work performance issues
- Problems functioning
- Suicide

Managing Stress - Discuss with students how to manage stress…

Explain and discuss the components of stress management…

Recognize the signs and symptoms of stress
- Nutrition, Exercise, and Sleep
- Express your emotions, write
- Do something you enjoy
- Relaxation – yoga, meditation, tai chi
- Breathe, unplug
- Talk it out – stay connected with family, friends
- Set goals and priorities (triage)
- Be realistic, resist perfectionism
- Cultivate gratitude and appreciation
- Be in the present – practice mindfulness, meditation
Slide - Psychological First Aid

Instructor Notes
Be proactive - accept responsibility for the emotional well-being of your firefighter/company.
The company officer or battalion chief is the administer of the psychological first aid.
You recognize there might be a problem because you have seen change in another person. It is that change in the other person that requires you to action. Ask “What is going on in your life that has made you change?”
Page 28 and 29 of the YRR. Have the students review the checklist. Ask if there are questions or comments about the checklist. Can it be implemented at your company/FD?
Page 29 Psychological First Aid Action Steps
Review those actions with the students.

Slide - Compassion Fatigue

Instructor Notes
Ask students who has “compassion fatigue” in their company or department?
Why is compassion fatigue becoming such a problem?
What are some of the symptoms of compassion fatigue?

Common symptoms of compassion fatigue may include:
- Chronic physical and emotional exhaustion
- Depersonalization
- Feelings of inequity toward the therapeutic or caregiver relationship
- Irritability
- Feelings of self-contempt
- Difficulty sleeping
- Weight loss
- Headaches
- Poor job satisfaction

Although compassion fatigue is sometimes called burnout it is a slightly different concept. Unlike burnout, compassion fatigue is highly treatable and may be less predictable. The onset of compassion fatigue can be sudden, whereas burnout usually emerges over time. Compassion fatigue can be a precursor or a symptom of other stressors. Because firefighters are trained to utilize compassion and empathy during their emergency response duties. Chief Brunacini - “Be Nice” to Mrs. Smith.
Firefighters because empathy and compassion are demanded of them on a daily basis, may experience compassion fatigue when dealing with heavy workloads, repetitive requests for service from the same person, excessive demands of patients, and long hours.
Several factors can put firefighters at higher risk for developing compassion fatigue:
- Responding frequently to extreme emergencies on each shift.
- Being physically threatened by a person under their therapeutic care.
- Providing emergency services to someone considered dangerous.
• Working exclusively with people who experience depression.
• Responding to events involving children.

**HOW CAN COMPASSION FATIGUE BE PREVENTED?**

Practicing self-awareness and self-monitoring to recognize changes in behavior, work, and life outside of work is the first step to preventing compassion fatigue. These practices can also help prevent compassion fatigue:

• Reducing stressful workloads
• Monitoring sleep patterns
• Taking regular vacations
• Meditation
• Journaling
• Seeking therapy
• Regular exercise
• Talking about feelings with a trusted person and/or a mental health professional.
• Making a commitment to regularly exercise.
• Developing a healthy diet.
• Getting restful sleep.
• Developing hobbies different from work.
• Developing positive coping strategies.
• Reaching out to support groups and networks.

---

**Slide - Professional Impact Behavioral Wellness**

**Instructor Notes**

Stress can create a positive response that can make a person happier. It is the negative reaction to stress that creates a negative effect on the job.

**Slide - Emerging Advocate?**

Who Is This?
What Is This?

Discuss with the students the designation process for a behavioral health and wellness coordinator.

Who should it NOT be?

• a die-hard “suck it up, buttercup” personality.
• someone who has had limited exposure to critical incidents (e.g. – person with less than –X- number of years in the field.
• someone who demonstrates lack of leadership capability.

The BHP Coordinator should be; an emerging leader!

• preferably someone who steps up and says, “I have been wanting to help address this forever… I’ll do it.” This is usually the department member who has experienced the effects of cumulative stress in themselves and/or in others.
• be someone that is well-respected within the department.
• no cookie-cutter answer – in the small department, it might be the chief. In the large combination department, it might be chief officer or even a line officer.
• regardless of who is in the position, the pre-requisite is this; there must be buy-in of the program from the Chief, the command staff, the line officers and the rank and file.
• it will start afresh in our academies as we introduce of ‘culture of change’ regarding Behavioral Health and Wellness.

Slide - Command Chart

Instructor Notes
Review the chart with the students.

Benchmarks - Incident Command Checklist - Risk Analysis - Resources - May Day - Unit Assignment.

Slides - Other Resources

Slide - Board with clown noses

Slide - Reading/Listening Sustain Your Inner Joy
• Zig Ziglar
• Jeff Foxworthy
• Denis Waitley
• Bill Engvall
• Larry the Cable Guy
• C. W. Metcalf
• Jim Gentil
• Joel Osteen
• Faith materials