

**ARLINGTON COUNTY FIRE DEPARTMENT  
STANDARD OPERATING PROCEDURES  
SUBJECT: Traumatic Exposure Recovery Program  
(TERP)  
Initiated  
08/08/13**

**SOP#  
A.48/Cat 3**

## **A. PURPOSE**

To provide specific information, and guidelines for the Traumatic Exposure Recovery Program (TERP).

## **B. BACKGROUND**

The goal of the TERP Peer Team is to provide a positive and functional mechanism that contributes to the safety and well-being of County Fire and EMS personnel. Originally created as the Critical Incident Stress Management (CISM) Peer Team, the scope and functional capacity of the team has continued to evolve and refine its ability to provide substantive and positive effect to members of the department in limiting the impact of exposures to traumatic incidents. In an effort to recognize this evolvment and growth of the team away from the CISM model, and to provide a more accurate depiction of how they would benefit Fire and EMS responders, the program has been renamed.

## **C. PROCESS OVERVIEW**

TERP has proven to be an effective tool in limiting the impact of exposures to traumatic incidents, subsequently enhancing the quality of life for Fire and EMS providers. The overall success of the TERP program relies on the involvement of the Emergency Communications Center (ECC), incident commanders, emergency responders and the members of the TERP Team working together to identify the need, and to deliver the service. The TERP team is a partnership between the County Fire Department and New Millennium.

## **D. DEFINITIONS**

**TERP Team.** The TERP Team is comprised of individuals indoctrinated in the Basic and Advanced Level Critical Incident Stress Management Courses for Group Crisis Intervention as per the International Critical Incident Stress Foundation (ICISF) certification and training program, and having completed the TERP Model training module. The TERP Team consists of representatives from the following agencies:

- ACFD Fire/EMS Peer Team members
- New Millennium Mental Health Professional Team members

**TERP Team Coordinator.** A member of the Fire Department is designated by the Fire Chief to serve as the TERP Team Coordinator. This person is responsible for evaluating whether or not incidents require a TERP Team activation based on program criteria. The TERP Team Coordinator will work with the respective Battalion Chief(s) to ensure that logistical issues for that particular shift are considered when scheduling a debriefing. In the event that the TERP Team Coordinator is unavailable, it will be his or her responsibility to assign a substitute qualified member during his or her absence, and to notify ECC and appropriate ACFD

members.

**Mental Health Professional Team Member.** A mental health professional trained in TERP and serving on the team. These members are currently provided by contract with New Millennium. The mental health professional may recommend placing an individual off duty by notifying their respective Battalion Chief.

**Debriefing Team.** The debriefing team will be composed of two or more ACFD Fire/EMS Peer Team members, and at least one New Millennium Mental Health Professional Team member. Members of the TERP Team will be selected to perform a debriefing of an incident.

**Debriefing.** This meeting is a facilitated discussion amongst members with like exposures stemming from a specific traumatic event. It is led by a Debriefing Team and will generally last one to two hours. It is most effective when conducted within four to seven days of the incident. However, it has been proven to have a positive impact even if conducted a week or longer after the incident. Debriefing is deemed to be a highly confidential process; therefore, no documentation or record of the proceedings will exist.

**Traumatic Exposures.** These incidents will be evaluated to determine the need for TERP activation based on which category they fall into. **Category 1** incidents, which are listed below, are deemed to have the highest potential impact and **will** require that the TERP Team Coordinator be notified. **Category 2** incidents, which are also listed below, are considered to have a high degree of potential impact as well, and **may** require that the TERP Team Coordinator be notified. The Incident Management Team (IMT) **shall be required** to evaluate the potential impact of an incident based on how it is categorized and have the TERP Team Coordinator notified when necessary. The means for initiating activation of the TERP Team will be covered later in this SOP.

**NOTE:** The Categories specified below are not to be considered “all inclusive” as to the potential traumatic exposures members may be subjected to. It is imperative that every member be diligent in safeguarding themselves and each other by identifying and addressing significant stress reactions or behaviors when observed.

a. Category One

- Serious injury or death of infant(s) or children.
- Violent death to person(s) with significant visual impact.
- Mass casualty incident(s).
- Line of duty injury or death of co-worker.
- Incidents lasting extended periods with unfavorable outcomes.
- Suicide of a member’s family member or co-worker.
- Multiple homicides within a community.
- Fatal fires.
- Any incident involving multiple fatalities.

b. Category Two

- Single victim homicides.
- Multiple significant injuries.
- Extreme traumas.
- Threat of serious harm to a responder or their crew members.
- “Near Miss” of a responder or their crew members.
- Cumulative exposure from repeated call types for the same members.

**In-Station Rehabilitation.** A 20-40 minute respite period immediately following a traumatic exposure event to allow the affected crew an opportunity to collect themselves (rehydrate, shower, or take in sustenance), and to initiate notification of the incident to the TERP Team. The need to place units out of service for this rehab will be at the discretion of the company officer and/or the on duty Battalion Chief, and will require that the TERP Team Coordinator is notified so that a debriefing can be scheduled.

**NOTE:** An incident may still generate the need for a debriefing even if the in-station rehab is not utilized. This will be decided at the discretion of the TERP Team and/or the incident management team.

## **E. RESPONSIBILITIES AND PROCEDURES**

**1. TERP Team Activation:** Activation of the TERP Team begins with a request for notification being sent through the chain-of-command and/or to ECC which will result in the TERP Team Coordinator or designated representative, being contacted. Ideally, the incident management teams will identify the need for activation of the TERP Team as weighed by the traumatic exposures criteria listed. However, **any member of the fire department may initiate notification** of the TERP Team. The member should first consider submitting the request through the chain-of-command, but alternatively may opt to contact a peer member from the TERP Team directly. Outside of normal business hours, weekends and holidays the Incident Commander or Duty Chief may have ECC contact the TERP Team Coordinator.

**2. Debriefing Attendance:** Selection of individuals for attendance at any debriefing will be based on like exposure to potentially traumatic incidents. This will be determined through evaluation of incident specifics by the IMT and/or a TERP representative. Attendance for those members/crews selected to attend is mandatory, however their participation is voluntary.

**3. Recordkeeping and Documentation:** While no record of TERP Team activations will be kept, it will be the responsibility of the company officer or the medic in charge to identify any call deemed to be a **potential** exposure by documenting it in the Fire Records Management System (FRMS). The *critical incident* designator is found in the *actions taken* drop down list and **must** be checked by the reporting officer. Even if no TERP process results from exposure to a specific incident, it still needs to be documented in the FRMS.

## **F. GENERAL**

**1.** To maintain the proficiency and viability of the TERP Team, members will meet monthly.

- 2.** TERP Team membership will be evaluated annually by the TERP Team Coordinator to ensure that it meets the needs of the department.
- 3.** On large-scale incidents, which require multiple operational periods, the TERP Team may conduct modified debriefings to ensure effective service delivery to the individual members and crews.
- 4.** If there is potential for legal, criminal, or disciplinary implications resulting from an incident, subject parties will be debriefed individually by New Millennium Mental Health Professional Team members.