

### Life Safety Initiative #13 Psychological Support

# Firefighter Life Safety Initiative #13:

Firefighters and their families must have access to counseling and psychological support.

First Responders and their Families must have access to counseling and psychological support. These resources are needed to deal with the various complications brought on by events associated with emergency services. Additionally, there are resources that can help dealing with everyday issues such

as family dynamics, finances, drug/alcohol abuse, etc.

This quarter's newsletter includes articles on some of the resources available to the fire service be it career or volunteer. Remember, stressful events can happen anywhere, they are not just associated with an emergency incident.

## DON'T IGNORE YOUR WARNING SIGNS



- STRESSFUL EXPOSURES
- PROLONGED DEPRESSION
- AGGRESSION ANGER
- SUICIDAL THOUGHTS
- SUBSTANCE ABUSE
- SOCIAL WITHDRAWING
- EXTREME FATIGUE
- · FLASHBACKS AND NIGHTMARES
- EMOTIONAL TRIGGERS
- HIGH ANXIETY
- · RELATIONSHIP BREAKDOWN
- HYPER-VIGILANCE
- FEELING TRAPPED
- SLEEP DISORDERS



REACH OUT. TALK. SEEKING HELP IS NOT A SIGN OF WEAKNESS

#### My Story Isn't Over

Hello, my name is Susan Hilton, I am a 14-year member of Damascus Vol. Fire Department Auxiliary, I am a past MSFA and MFCA Miss Fire Prevention and most proud to say I am a suicide survivor.

I was struggling with past events. Nobody knew, I did not tell anyone. I was dealing with it all myself, from 2009 through 2018. I was living with a mask on. Fake it till you make it. Always a smile, always laughing. Making it look as if I was fine but really, I was not ok, I was hurt inside, I was lost, I was num.

In treatment they use the example of a boiling pot of water. The pot keeps getting more filled with water every time something happens and finally it bubbles over. During this time, I was in dangerous situations. selfharming, had lots of anger, had high impulses, and I was out of control. I did not know if I was going to make it till the next day. If you asked me during this time if I would live to see 30, I would tell you no. During this time, in 2014 I attempted suicide by driving off a bridge. No one knew it was a suicide attempt till 2018. They thought it was a "crash". I had so much shame, I didn't know how people would react; would they still accept me? Would they judge me? The thoughts were racing through my



head daily. Then the suicidal thoughts would race. I'm not good enough. I don't belong. I am just a burden. I'd be better off dead. The list goes on and on. I was in treatment for some of this time, but I was not telling my whole story. I was only telling parts of it and telling the doctors what they wanted to hear.

I was in and out of psychiatric units, partial hospitalization (PHP) day treatment level of outpatient care at different hospitals, on multiple different medications, along with multiple misdiagnosis. I was going to different doctors and different

therapists, each time I went somewhere new I had to tell my story all over again and I felt like I was starting at zero.

In 2018, following a stay at Montgomery General Hospital in the psych unit, I attended a Maryland Fire Chiefs event because I knew I would see friends. At the event John Long, Tom Musgrove & Dave Lewis were sitting around the table. This day started my recovery journey. In this moment I felt safe. I felt it was time to reach out and time to start letting some water out of the pot.

#### My Story Isn't Over ....cont.

John Long made a quick phone call to a friend of his in Oklahoma named Chuck Robison, Chuck helped to get me into residential treatment center called Timberline Knolls in Christian Lemont. Illinois. а based facility. My stay Timberline was 30 days, March – April 2018. My mother and father drove me out and came back and got me. My days there were hard and long.

Between 2018 - 2021 I would have good and bad days. I was in a 6-month Dialectical Behavior therapy (DBT)process. I had Transcranial Magnetic Stimulation (TMS) performed, which is a procedure that uses magnetic field to stimulate nerve cells in the brain to improve symptoms of major depression. This was done 3 times a week for 30 minutes for 3 months. I stayed in therapy and saw multiple doctors and therapists at different practices and was on numerous medications including some very strong ones. I was still numb.

In early 2021, I was put into Brooke Lane in Hagerstown Maryland; I was there for 9 days. One day the therapist came in and we talked. She had a tombstone on a piece of paper. I really didn't know where she was going with that. Well, it turned out the tombstone had my name

on it. We talked and cried, and she opened my eyes, to the fact that it is where I was headed. I wasn't just hurting myself; I was hurting loved ones and those around me. I needed to take control of my life.

A LIFE UPDATE: As of today, I can officially say I made it to 30, I still have ups and downs, still have bumps in the road, still riding the roller coaster of life. I am still in therapy, still see the doctors, take my meds every day and still work on grounding skills. Most importantly, I have removed myself from dangerous situations and focused on becomina stronger. I take each day as it comes, and each day is a new day.

When you're born into the fire department, everyone becomes your family. The first place my mom and dad stopped on the way home from the hospital with me was the fire house. Growing up in this family, you have multiple moms and dads and lots of brothers and sisters. I have had the support of so many, some I see only a couple times a year, but we always pick up where we left off. They are always a phone call or text away.

To all those who have been there for me, you were there for me through good days and bad days, but you never gave up on me. You were there while I was

in a crisis. Thank you for being my safe place, thank you for listening, thanks for reaching out. Because of all of you I'm still here. I'm still here to tell my story.

Mental health matters, there is a strong stigma against mental health, people who have not been through it sometimes don't understand it. Reach out to each other just to check in on them. Ask them how they are and be there and listen when they want to talk. Be there for each other.

The 988 suicide and crisis helpline are also available. 988 is a lifeline that provides 24/7 free and confidential support for people in distress. You can call or text twenty-four hours a day.

In summary, if you are struggling, find those people who you can talk to and share things with. Find someone who you can be open with. Find someone who you feel safe with. They might not even be your family. Everyone has open arms. Welcome someone who needs Be there for them. You never know what someone is going through. Remember tomorrow needs you, it's ok to say I am not ok. You are not alone and just breathe.

Susan Hilton, Damascus Vol. Fire Dept. Auxiliary,

#### **Ten Years of Seeing In Color Again**

July 22<sup>nd</sup>, 2014 was the day that I found out that I had PTSD after a suicide attempt. For years I had been a person that I didn't recognize and wanted life to be over. I was angry all the time and just wanted people to leave me alone. I thought about suicide and in my mind I felt that the world would be better off without me in it.

Once I reached out and accepted help is when everything changed and I was able to start living my life again. After a month of EMDR (six sessions) I had my smile back and people commented on how much better I looked and the difference in mγ attitude. However, EMDR therapy was just part of my recovery. There was peer support and most important was my faith. I was given a second chance and I didn't take it lightly because there are so many that lost their lives to suicide. I wanted to make a difference and bring awareness to the issue of suicide in the fire service. I started out by sharing my with experiences local departments and it didn't take long before I was speaking at national events. What I wasn't expecting was all the calls from first responders that were having of suicide. thoughts Having people tell me that I'm their "last call" and that they just wanted to talk with someone that "gets it".



Over the last ten years I have talked with hundreds of people that were suicidal and it has truly been an honor to have them to reach out and trust me. Over the years it has been awesome to follow some of them on social media as they fell in love, got married and now have kids. I receive calls from others that check in with me to see how I'm doing or they will share about how they helped someone else through a dark time in life.

Not a day goes by that I don't think about everything that I would have missed and how I would have hurt so many others.

It's been a blessing to be able to travel around the country sharing with others about the importance of reaching out and accepting help. I have been able to love and let others love me and I'm not afraid to talk with others when I have a bad day. Being able to use healthy coping skills and allowing myself to process events instead of burying them feels like a super power. To be able to take a very dark time in my life and turn it into something positive to help others is an amazing feeling.

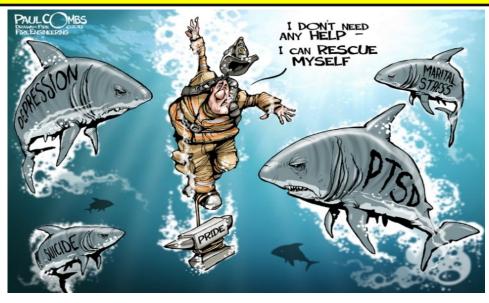
Scott Geiselhart

Www.seeingincoloragain.com

#### Resource Highlight-First Responders' Bridge

The mission of First Responders' Bridge is to support all active and retired First Responders and their families, loved ones, or caregivers who are experiencing, experienced, have traumatic or life-altering event. Bridge helps promote personal growth and healthy relationships with a multi-faceted safe approach in а and confidential environment. The Bridge offers educational and informative retreats for first responders and their significant others.

The First Responders' Bridge was created after several first responders got together and discussed how the services do a good job supporting families and community when a first responder dies in the line of duty and recognizing that we should do more to help prevent the loss of a loved one who has experienced stress and trauma



that has affected their mental wellness.

First Responders' Bridge Corp. is a nonprofit made up of First who Responders have traumatic events experienced first-hand, clinicians who have counseled multiple first responders, and business and community leaders who have a heart for helping our first responder heroes and their families.

The First Responders' Bridge operates across the State of Ohio but is available to all first responders who are able to travel to locations where retreats are being hosted. The Bridge regular retreats hosts that feature keynote speakers, and presentations on topics interest to first responders seeking assistance with mental wellness. The retreats are free to attend, and include the retreat, lodging, food, and all activities. The Bridge is able to provide this service through the generous contributions of sponsors who seek to help the well-being of first responders. The next retreat is scheduled for December 13-15. 2024. For additional information, reference the QR link provided with this article.

**David Lewis** 



THERE IS NO SHAME IN ADMITTING YOU'RE HUMAN.

1st Responders'
Bridge



### **Highlights from 2024 NFFF FF Life Safety Summit**

The National Fallen Firefighters Association (NFFF) hosted the 2024 Firefighter Life Safety Summit (FLSS) on August 27-29, 2024, in St. Louis, Missouri. This was the fifth FLSS held, each with a goal of reducing firefighter line-of-duty injuries (LODI's) and line-of-duty deaths (LODD's).

The first FLSS was held in Tampa, FL, in 2004, bringing together more than 200 fire service leaders to develop initiatives to reduce firefighter line of duty injuries and deaths. The goal of the first summit was to define policies and training programs directed at reducing line of duty injuries and deaths. The result was a set of 16 Firefighter Life Safety Initiatives (FLSI's) that have served as a model for changing the culture of the fire service with an emphasis on safety.

A second summit was held in 2007 in Novato, CA, the third summit back in Tampa in 2014, and more recently, the fourth summit was held in San Antonio in 2022. Each summit focused on a review of the 16 FLSI's and assess progress on reducing LODI's and LODD's.

Everyone should agree that much has changed in the fire service over the last twenty years and the fifth FLSS identified the need to reengage the fire service leadership to revisit the 16 FLSI's and determine if it was time for a

change. During this fifth FLSS, it was agreed that a new view was needed of the firefighter safety challenges and a new set of FLSI's resulted.

The FLSI 2024 Framework is designed to provide а comprehensive approach to enhancing the safety, health, and well-being of firefighters. The framework uses the concept of "balanced scorecard" to establish a foundation representing the vision and strategy and then looking at the organization from multiple perspectives so that no one area dominates the decisionmaking process.

The foundation is based on four "pillars" which represent the vision and strategy for firefighter safety. The four pillars of the FLSI 2024 Framework are:

- Survival Culture and Leadership – Fostering a survival-oriented mindset and strong leadership within the organization.
- Health and Wellness Addressing the physical, mental, and emotional wellbeing of firefighters.
- Training and Competency –
   Ensuring ongoing training and development of competencies necessary for effective firefighting.
- Government and Community
   Enhancing firefighter safety
   through policy, legislative

support, and community engagement.

The next step in developing the balanced scorecard was to define the multiple perspectives that will guide the initiatives needed to build upon the framework (pillars). These perspectives are:

- Firefighter Well-Being –
  Directly support and improve
  the experience, safety and
  well-being of firefighters.
- 2. Practices and Standards Developing, implementing, and standardizing practices and procedures to ensure efficient, consistent, and effective operations.
- Organizational Capacity Building and enhancing the capabilities of the fire service organizations to support their mission effectively.

The four foundation pillars each represent a critical area of focus for improving firefighter survival well-being. The and three perspectives are intended to tie the pillars together for a cohesive structure that represents the needs of the fire service. When put together, the matrix results in 12 "objective intersections" that address the challenges faced by fire service. These the intersections become the new Firefighter Life Safety Initiatives.

Much work still lies ahead. In the months ahead, the NFFF will be processing the inputs collected

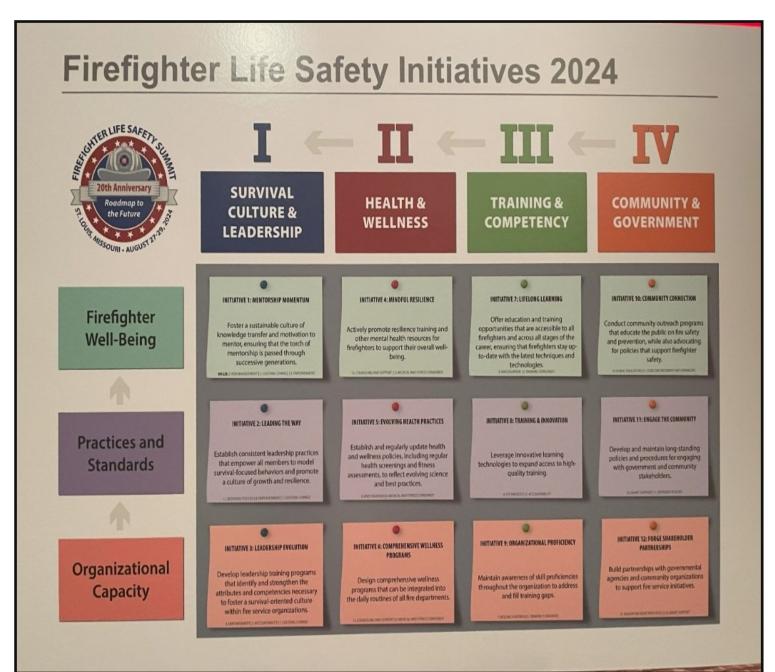
### **Highlights from 2024 NFFF FF Life Safety Summit**

from the FLSS attendees and developing an implementation plan for the new initiatives. Each member of the fire service is encouraged to watch out as these new initiatives to be rolled out and assess the best methods to implement them in their

departments and their own personal lives. By implementing the Life Safety Initiatives, we can reduce line of duty injuries and deaths and reach the goal that "Everyone Goes Home".

Firefighter Life
Safety Initiatives.





#### **National Fallen Firefighters Foundation 2024 Life Safety Summit**

I had the honor of being one of the Chaplains representing the Federation Of Fire Chaplains at the National Fallen Firefighters Foundation 2024 Life Safety Summit in St. Louis, MO. We had representation from across the fire service. I was assigned to the Health and Wellness Pillar. We reviewed Firefighter Well-Being. Practices Standards, and Organizational Capacity. Each of these was paired with a Working Short Firefighter Well-Being: Title. Initiative 4: Mindful Resilience. Practices & Standards was paired with a Working Short Title of Initiative 5: Evolving Health Practices. Organizational Capacity: was paired with a Short Title Initiative 6: Comprehensive Wellness Programs.

After working on this in smaller groups we came back together in one large group to review and come up with a comprehensive plan. While all of the small groups came up with almost the same information there were some variants due to the knowledge and backgrounds associated within each group.

But the overall consensus was that no matter the size of the department, or whether it is a paid or volunteer, we found that leadership is lacking in their knowledge or willingness to acknowledge that there is a need. Many leaders do not know what resources are available to their members and how to utilize them. Many leaders don't have the support of elected officials to provide the funding needed to implement programs like annual physicals and Employee Assistance Programs, exercise equipment or gym memberships.

We found that there was also a lack of knowledge by the individuals in attendance on the programs available like the IAFF's Center of Excellence and the National Volunteer Fire Councils Membership Insurance Coverage through Provident Insurance EAP program. Many folks in attendance did not know that there are classes available to support a Peer Support program.

We also discussed the three circles of the VENN Diagram (Physical, Mental, Spiritual). Anytime one of these categories is affected it overlaps into the other.

In conclusion we came up with a plan:

1. Everyone in the service is an Ambassador for change.
2. Everyone needs to be trained in Peer Support (not saying everyone needs to be a peer, but has to have a working knowledge of what it means. The best place to do this is in the beginning, i.e. recruit class,

- firefighter one class.

  3. Leadership must work to promote annual physicals (get funding, make it mandatory).

  Physicals must continue after retirement
- 4. Leadership must follow a job performance standard.
- 5. Leadership must work to provide mental health counseling (EAP, Insurance, etc.)
- 6. Leadership must work to have Peer Support available to the members.
- 7. Leadership must work to have trained Chaplains available to the members.
- 8. Members must have a working knowledge of why physicals are important and take responsibility for their physical health
- Members must have a working knowledge of Peer Support.
- 10. Members must take an active role in reducing calls for service by educating the general public.
- 11. Leadership and Members must educate family members on the resources available to them and what to look for in their loved ones phycological health.

John Franklin Long, Jr.

Firefighter Life
Safety Initiatives.

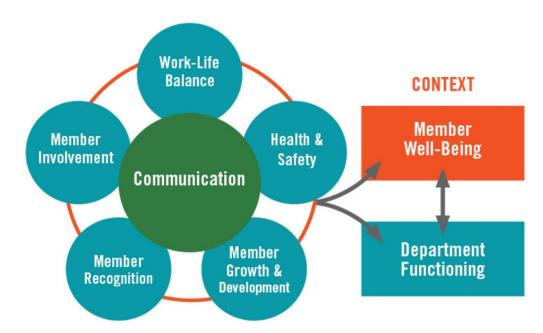


#### **Towards a Psychologically Healthy Fire Department**

National Volunteer Fire The Council (NVFC) launched the Psychologically Healthy Department (PHFD) initiative to provide support to firefighters and EMS departments to help develop a healthy and highperforming environment. It is critical that department leaders understand the link between the well-being of its members and the performance and success of the department.

Creating healthy, highperformance department requires more than just promoting the awareness of health issues offering or wellness activities. The PHFD initiative is built on the following six principles that are necessary to support well-being and highperformance:

- Member Involvement A PHFD should empower its members, give them a voice in decision-making, and encourage them to work together to make the department better.
- 2. Health and Safety Health and Safety initiatives improve the physical and mental wellbeing of firefighters and EMTs through prevention, assessment. and treatment potential of health risks and problems.
- Member Growth and Development – A PHFD provides training and



development opportunities beyond the minimum requirements and helps members expand their knowledge, skills, and abilities.

- Work-Life Balance Work

   Life Balance involves
   providing flexible
   scheduling arrangements
   and resources to help
   members manage their
   other life demands.
- 5. Member Recognition -Recognition efforts reward members both individually and collectively for their contributions the to department the and community.
- Effective Communication

   Communication plays a key role in the success of any department program or policy and serves as the foundation for the other five psychologically healthy department practices.

The NVFC is making available a collection of resources to enable departments to work towards a Psychologically Healthy Department. These include: the Psychological Health Fire Department: **Implementation** Toolkit, a directory of behavioral health professionals to help address challenges with mental wellness issues, and training (both on-line and in-person). Use the QR references included with this article to access these resources.

**David Lewis** 

Psychologically Healthy
FD Toolkit



Directory of Behavioral Health Professionals



Creating Psychologically Health FD



#### **Cup of Joe, Friend or Foe**

#### Effects of Caffeine on 1st Responder Resilience.

Due to long shifts, sleepless nights, and rising call volumes, it is no wonder that the coffee machine is just as important to first responders as the Jaws of Life. Caffeine, found in the leaves, seeds, and fruits of many plants, is the most widely consumed psychoactive substance in the world. It is found in foods and beverages including coffee, tea, soda, energy drinks, and chocolate, as well as some sport supplements, gums, and medications.

Caffeine is a central nervous system stimulant that acts on natural sleep promoting adenosine receptors found in the brain. Due to its similar structure to adenosine, caffeine binds to adenosine receptors, reducing tiredness and increasing alertness. Additionally, caffeine increases the neurotransmitters adrenaline, dopamine, and norepinephrine (the fight or flight hormones), promoting focus, cognition, and enhanced energy and concentration.

The FDA recommends up to 400 mg of caffeine per day, and no more than 200 mg per serving for healthy people. This is equivalent to four to five cups (30-40 ounces) of coffee per day. Negative side effects of caffeine can occur in people who are genetically predisposed to caffeine sensitivity, and for habitual consumers of 600 milligrams a day or more. These side effects include insomnia. anxiousness. nervousness, jitters, increased blood pressure and pulse rate, palpitations, stomach upset, nausea, and headaches.

While caffeine is most often ingested from coffee, the consumption of energy and pre-workout drinks have received increased scrutiny over the past two decades. This is due to the fact that these beverages are not considered an appropriate means of hydration, potentially contain other non-regulated ingredients, and that the quantity of caffeine adds up much faster due to the high volume of caffeine per beverage. Additionally, energy drink consumption has been associated with cardiac arrest and myocardial infarction

Given that caffeine is most often used to combat tiredness, prioritizing sleep on and off duty is a way to limit caffeine from all sources, primarily energy drinks. While the short term effects of caffeine may promote temporary alertness and focus, the timing and dose of caffeine intake is crucial as late day consumption can worsen sleep quality and duration. Following ingestion, the effects of caffeine peak in 45-60 minutes, with an average half-life of five hours. This means the intended effects of caffeine will peak approximately an hour after ingestion, but will remain active in the body for approximately ten hours. It is important that first responders leave at least a fivehour time frame between their last caffeinated beverage and bed time to prevent controlled sleep disturbances.

Many first responders are napping to help combat fatigue, improve cognitive performance, and improve decision making abilities. Most people feel a decline in energy between 1:00 pm and 4:00 pm. This is the time where taking

a nap, or having a cup of coffee may help combat fatigue. Coffee naps have proven beneficial to restore energy until bedtime. Coffee naps involve taking a short 20-30 minute nap immediately after drinking a cup of coffee. By napping before caffeine binds to the adenosine receptors. a first responder can maximize on the therapeutic benefits of a short nap and the stimulant effects from caffeine. If a nap is not possible, a cup of coffee may be beneficial, recognizing that this should be the last caffeinated beverage of the day to promote better sleep quality.

If consuming over 600 mg of caffeine daily, consider reducing your intake by consuming a half decaf and half caffeinated beverage, and increasing your daily water intake. It is important to reduce caffeine gradually avoid withdrawal. Symptoms of withdrawal include changes in mood, headaches, fatigue, nausea, and body aches that can last up to ten days. Because caffeine is a stimulant, gradual reduction can lead to depression. If needed, mental health providers can assist in managing symptoms of withdrawal. Additionally, first responders need to pay attention to sleep quality. If symptoms of sleep disorders are noted, they should be discussed with a medical professional.

Summarized by MFF/EMT Rhonda Cohen MS, RDN, LDN, CSN

#### Save the Dates

The Art of Reading Smoke: Aberdeen Fire Department, October 5, 2024

The Art of Reading Smoke: Hollywood Volunteer Fire Department, October 6, 2024

MFCA General Membership Meeting: October 19, 2024 @10 AM Lunch Provided

Federation of Fire Chaplains Annual Conference: Annapolis, MD October 25-31, 2024

MFCA Company Officer Leadership Seminar: Howard County Public Safety Training Center, October 26, 2024

MFCA Company Officer Leadership Seminar: Huntingtown Volunteer Fire Depart & Rescue Squad, October 27, 2024

Symposium In the Sun: Clearwater Florida November 14-17, 2024

MFCA General Membership Meeting: January 19, 2025 @ 10 AM Lunch Provided

Fire Department Safety Officers Association (FDSOA) Conference: St. Pete, FL, January 13-16, 2025

MFCA Leadership Training Weekend, Ocean City, MD, December 14-15, 2024

Mark G. Falkenhan Leadership Seminar, Carroll County Public Safety Training Center, Westminster, MD, January 18, 2025.

> **Maryland Fire Chiefs Association**

Firefighter Close Calls

Maryland Weekend at the National Fire Academy: February 22-23, 2025

#### **Contact Us!**

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First Responder

**National Volunteer Fire Council** 



**Maryland State Fire**fighters Association



The number of fallen firefighters through September 30, 2024.

**US Fire Administration** 

**Center for Excellence** 





**Back Step Talks Back Issues** 



The number of 1st responder suicides through September 30, 2024.

> Firefighter Behavioral **Health Alliance**



## **NVFC First Responder Helpline**

The NVFC First Responder Helpline, offered through Provident, provides assistance to National Volunteer Fire Council (NVFC) members and their household family for a variety of behavioral health issues and work-life stresses.

Call the Helpline for 24/7 access to confidential counseling, resources, and referrals for issues including:

- · Stress management
- Depression
- Family conflict
- Anxiety
- Relationships

- · Financial or legal concerns
- Substance misuse
- Grief or loss
- · Problem gambling
- Child or elder care

To access the helpline, **NVFC members** can go to the <u>NVFC web site</u> and login to the NVFC portal. Go to the membership benefits page to find the number.

If you are not an NVFC member, join for just \$21 at <a href="www.nvfc.org/join">www.nvfc.org/join</a> to access the First Responder Helpline and all membership benefits.

## **Learn More**

The NVFC First Responder Helpline is brought to you by:



