

Behavioral Health Program

Introduction: Most of us are aware of the physical demands that firefighters and EMS providers undergo through their career. Fire service leaders and behavior health professionals now recognize they face many of the following behavioral challenges because of their work such as anxiety, depression, burnout, stress disorders, and addiction. Clinical research and the claims experience of SDIS demonstrates that firefighter longevity and overall health are tied directly to strong behavioral health practices on both personal and agency-wide levels. The goal of creating a program is not to diagnose and cure individuals, but simply create an environment where tools and assistance are readily available, promoted, and utilized by everyone including family members. To that end, SDAO and SDIS have partnered with several professional organizations to provide mental health resources. SDAO Risk Management can assist you with accessing these resources. One such resource is: http://www.everyonegoeshome.com/wp-content/uploads/sites/2/2017/12/behavioral-health-mgmt-guide-122017.pdf

Board and Management Duties

	The di	strict has policies and guidelines in place that define the behavioral health program, such as:	
	0	Appropriate confidentiality and necessary disclosure (intention of self-harm, suicide, etc.)	
	0	Confidential tracking of usage	
	0	Minimum and preferred qualifications of peer support personnel	
	0	Wellness of peer supporters	
	0	Expectations for leadership support of the program	
	0	Financial support and funding of resources	
	The di	strict works with culturally competent and trained mental health professionals (i.e., EAP, local	
	clinicia	ans and clergy with a practice focused on or specialized training for public safety personnel).	
	The di	strict actively promotes behavioral health resources to members and their family (EAP, local	
	clinicians, chaplains, etc.).		
	0	SDIS provides low-cost access to www.PublicSafetyEAP.com for all fire district members.	
	The district has trained members actively involved in peer-support roles.		
	0	SDAO has partnered with www.nwpeersupport.org to assist in implementing peer-support.	
	The di	strict provides regular training on the following subjects to all members:	
	0	General understanding of behavioral health and the available resources	
	0	How to perform self-care	
	0	How to utilize an after-action report (AAR)	
	0	How to recognize individuals in crisis and connecting them to resources	
	The district provides appropriate and regular behavioral health training to supervisory personnel.		
	The dis	strict provides appropriate and regular behavioral health training to peer support personnel.	

Fire District Risk Management **Self-Assessment**



Sample Mental Health Self-assessment for personnel

This self-assessment was adapted from the Firefighter Behavioral Health Alliance self-assessment tool. https://www.ffbha.org/resources/suicide-questionnaire/ If you answer yes to 3 or more questions, we recommend that you seek care from a local chaplain, peer support team member, the Public Safety EAP, or a mental health clinician who has expertise in providing care to public safety professionals. If you answered yes to the last two bolded questions, please seek support immediately from 911, calling the National Suicide Prevention Lifeline 1-800-273-8255 or calling the Share the Load Program 1-888-731-3473. Once you receive help from one of these make contact with a trusted family member, friend, local chaplain, or counselor.

Have you recently attempted to kill yourself? *
Have you created a plan to kill yourself? *
Do you feel like killing or harming yourself?
Do you have feelings of hopelessness?
Does your family have a history of feeling depressed?
Does your family have a history of suicide?
Have family, friends, or co-workers told you that "you have changed" recently?
behavior toward others within the past two months?
Do you find yourself displaying unexpected angry emotions or been talked to about unprofessional
Have you found an increased or new interest in risky activities outside of work?
scene?
Do you find yourself thinking about or performing unnecessarily risky activities while on an emergency
Do you think "what's the use" when responding to emergency calls?
Have you or someone close to you noticed that your sleeping patterns have changed?
Do you find yourself turning to other addictive behaviors to make yourself feel better?
Do you find yourself turning to alcohol or other mood-altering drugs to make yourself feel better?
Do you isolate yourself from others at work or at home?
Do you feel the world would be better without you in it?
Do you feel like a burden to your family, friends, or your agency?