



Comparing Models for Responder Critical Incident Support

Best Practices Model

- Assessment-based: Tailored to the type and severity of the incident
- Multiple tools available: One-on-one support, peer connections, chaplain check-ins, CMBs, therapy referrals
- Voluntary participation: Responder choice is central
- Phased care: Recognizes that healing is a process, not a single event
- Emphasizes psychological safety and trust

Critical Incident Stress Debriefing (CISD)

- Single-session: Typically occurs 24–72 hours post-incident
- Structured 7-phase process: Includes facts, thoughts, reactions, and coping
- Historically group-based and peer-led
- Participation may feel pressured or mandatory in some settings
- Mixed evidence of effectiveness—some benefit, others may feel retraumatized

Where Do Crisis Management Briefings (CMBs) Fit?

CMBs are a powerful tool in the Best Practices model. They are informational sessions offered early after a critical incident—usually within hours. These sessions provide accurate information, normalize stress reactions, reduce speculation, and connect responders with available resources—all without asking anyone to share personal emotions or trauma. CMBs help stabilize teams and lay the groundwork for follow-up care if needed.

Summary

While CISD has historical significance, many organizations now favor the more flexible, trauma-informed Best Practices model. This approach centers on psychological safety, choice, and long-term resilience. SC-RSI offers support, training, and guidance on implementing CMBs and a full continuum of care.

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