Crisis Counseling Assistance and Training Program Trainer's Toolkit

Handout 7

Organizational Approaches for Stress Prevention and Management



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration Center for Mental Health Services www.samhsa.gov



Organizational Approaches for Stress Prevention and Management		
Dimension	Immediate Response	Long-Term Response
Effective Management Structure and Leadership	 Clear chain of command and reporting relationships Available and accessible clinical supervisor Shifts no longer than 12 hours, with 12 hours off Briefings provided at beginning of shifts as workers exit and enter the operation Necessary supplies available (e.g., paper, forms, pens, educational materials) Communication tools available (e.g., mobile phones, radios) 	 Full-time, disaster-trained supervisors and program director with demonstrated management and supervisory skills Clear and functional organizational structure Program direction and accomplishments reviewed and modified, as needed
Clear Purpose and Goals	 Clearly defined intervention goals and strategies appropriate to assignment setting (e.g., crisis intervention, debriefing) 	 Community needs, focus, and scope of program defined Periodic assessment of organizational health and service targets and strategies Crisis Counseling Assistance and Training Program Guidance integrated into service priorities Staff trained and supervised to define limits and make referrals Staff provided feedback on number of contacts, program accomplishments, etc.
Functionally Defined Roles	 Staff oriented and trained with written role descriptions for each assignment setting If another agency (e.g., Red Cross, Federal Emergency Management Agency) has authority over the setting, staff are informed of their roles, contacts, and expectations 	 Job descriptions and expectations for all positions Participating disaster recovery agencies' roles understood, and working relationships with key agency contacts maintained
Team Support	 Buddy system for support and monitoring stress reactions Positive atmosphere of support and tolerance with "good job" said often 	 Team approach avoids program design with isolated workers from separate agencies Informal case consultation, problem solving, and resource sharing Regular, effective meetings with productive agendas, personal sharing, and creative program development Clinical consultation and supervision Inservice training appropriate to current recovery issues provided

Adapted from U.S. Department of Health and Human Services (2000). *Training manual for mental health and human service workers in major disasters*. (DHHS Publication No. 90–538). Washington, DC: Substance Abuse and Mental Health Services Administration and Center for Mental Health Services.