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Psychological First Aid Training

Three Dates and Locations in December

Freeport - 12/4 Auburn - 12/10 Bangor - 12/11

What is PFA? A full-scale public health response to disasters must attend to both the physical and mental health needs of affected groups. The latter set of needs is especially important because most authorities agree that far more individuals will report psychologically-related complaints than will report physical symptoms directly stemming from the injury-causing agent or event. Because a large scale emergency will overwhelm existing mental health response resources, psychological first aid - the provision of basic psychological care in the short term aftermath of a traumatic event - is an important skill set that all public health workers, emergency responders and natural community helpers should have.

About This Training ~ This program is a six hour, interactive, face-to-face training that provides public health professionals, emergency responders, and natural community helpers without former mental health education with the concepts and skills associated with psychological first aid. Additionally, this training is applicable to public health settings, the workplace, the military, mass disaster venues, and even the demands of critical incidents, e.g., dealing with the psychological aftermath of accidents, robberies, suicide, or community violence.

More Information and Registration

Disaster Behavioral Health in Action

Promoting resilience techniques and coping strategies for individuals, responders and communities

Kathleen Wescott, LMFTC



Disaster Behavioral Health and Medical Reserve Corps Support Vaccine Clinics

Last week, the Maine Center for Disease Control and Prevention (Maine CDC) conducted vaccine clinics and vaccinated just under 200 people as a precaution following a confirmed case of hepatitis A in an individual who stayed overnight in two Portland shelters and spent time during the day at Preble Street Resource Center during their infectious period. The case was of particular concern because several states in the U.S. are experiencing large outbreaks of Hepatitis A infections, especially among persons experiencing homelessness and persons who use drugs. Maine CDC held a free hepatitis A vaccination clinic at the Preble Street Resource Center for anyone who stayed at one of these shelters or used the Resource Center from October 1-21. Hepatitis A can be spread through the sharing of food, cups, eating utensils, towels, toothbrushes, cigarettes, syringes, and during sexual contact, according to Maine CDC. Infection typically occurs when a person ingests fecal matter — even in microscopic amounts — from contact with objects, food or drinks contaminated by an infected person. The close quarters of a shelter make an ideal breeding ground for the virus.

Six Maine Medical Reserve Corps and Disaster Behavioral Health volunteers assisted at the vaccine clinics with medical screenings, information and referrals, and to help individuals manage their anxiety, behaviors and distress. Melanie Sparks-Ide, DBH Volunteer, helped to support the clinics. Melanie reports, “It was great to see this Maine agency in action to meet the health care needs of a vulnerable population. I appreciated the opportunity to help out.” In addition, Maine CDC got a lot of thoughtful hepatitis education into the community; and was able to give those getting vaccines a positive interaction with health care that will hopefully reduce some barriers to this population seeking care in the future.

Mass Casualty Incidents: Understanding the Full Picture

Planners and Responders Gather to Explore Family Reunification

A Mass Casualty Incident Training held October 23rd focused on strategic planning to help the American Red Cross, Maine Medical Reserve Corps, Medical Examiner, Office of Attorney General Victim Compensations, Voluntary Organizations Active in Disasters, and Disaster Behavioral Health collaborate to identify agency roles and responsibilities within an MCI Strike Team to address family reunification. Twenty-five partners came together to learn about coordinated activities and resources, manage paid and volunteer staff, and management of a collaborative family

reunification program. Tara Hughes, LCSW-R and Ellin Ruffner, LCSW from the American Red Cross Disaster Mental Health Services, and Angela Jackson, MS from the FBI Victim Specialist Rapid Deployment Team shared their knowledge, experiences and expertise related to setting up a Family Reunification / Assistance Center.

On October 24th and 25th Mass Casualty Incident Training was held for responders. Over 200 registrants from emergency management, healthcare, Fire/Police/EMS, MRC/DBH, Red Cross, National Guard, Amtrak Security, Maine CDC, MEMA and other organizations signed up to participate. The goal of the trainings was to ensure that emergency operations plans for MCIs include provisions for notification and reunification between family members and their loved ones. This training received high praise for the facilitators and their practical applications to assist victims and survivors in the most effective, coordinated fashion while working under the operational direction of the Maine Medical Examiner's office, MEMA & Maine CDC.

Pictured below: Ellin Ruffner, LCSW, Tara Hughes, LCSW-R and Angela Jackson, MS



Spontaneous Volunteers



Register as a volunteer before a disaster strikes.

Did you know that during major disasters and emergencies that receive significant media attention, one of the biggest challenges for emergency responders is actually managing folks that "appear out of nowhere" to help? These well-intentioned people are alternately called Event-Based Volunteers (EBVs) and Spontaneous Unaffiliated Volunteers (SUVs) - but no matter their name, they create a volunteer surge that sows confusion and creates extra demands for responders. Emergency management professionals often remind us to "never self-deploy!" to avoid these sorts of issues.

For these reasons, persons with critical skill sets - such as behavioral health professionals - should register in advance of a crisis and affiliate with an appropriate volunteer response organization. Such an organization will be sure to deploy you appropriately, where you are needed the most.

Maine Responds is our state's Emergency System for the Advance Registration of Volunteer Health Professionals (ESAR-VHP). Becoming affiliated is pretty easy and straightforward - and can be accomplished with just a computer and an internet connection. Your first step in signing up with Maine's volunteer registry is to visit maineresponds.org and complete a basic profile that includes your name, contact information, professional experience, and background check information. The next step is to take IS-100 and IS-700 trainings at training.fema.gov. Getting ready for your role in disaster response is as simple as that!

RESOURCES

Prepare Children and Families for Winter Weather

With colder weather approaching, now is the time to start preparing for the winter months. During winter, children require protection from extreme temperatures. The likelihood of carbon monoxide poisoning increases when gasoline or diesel-powered generators may be more frequently used to supply power to generate heat. The AAP

urges clinicians, families, and communities to work together to protect children against carbon monoxide poisoning. This fact sheet describes the symptoms of carbon monoxide poisoning, highlights concerns of carbon monoxide poisoning in pregnancy, and discusses sources of carbon monoxide in a disaster setting. As part of general preparedness planning discussions, pediatricians can refer families to the AAP Family Readiness Kit and to discuss ways to prepare ahead for power outages.

Visit this AAP Carbon Monoxide Fact Sheet

Family Readiness Kit

A kit provided by the American Academy of Pediatrics (AAP) designed to help families get disaster-ready. This kit includes general guidelines for readiness that can be used in most situations. A disaster can cause a lot of stress and confusion. Community preparedness begins with each family. Fear and anxiety can be reduced when there is a disaster plan. A disaster plan will help everyone know how to respond.



Visit this AAP Family Readiness Kit

UPCOMING EVENTS & TRAINING

Learning opportunities for behavioral health, spiritual care, substance abuse professionals as well as disaster responders and natural community helpers.

Topics and Presenters Wanted: 11th Annual Maine Partners in Emergency Preparedness Conference

Maine Emergency Management Agency seeks presentation proposals for the **11th Annual Maine Partners in Emergency Preparedness Conference** to be held Tuesday April 23, 2019 at the Augusta Civic Center, Augusta, Maine.

Presentations are provided during breakout sessions, which are typically 60 minutes long, but a double session can be requested. Topics may be presented in a variety of ways. In previous conferences, presentation styles have ranged from "Lessons Learned" from exercises and events, to traditional classroom presentation, to panel discussions with experts on a particular subject. Based on your evaluations from

previous conferences, the most popular sessions have been those that draw on real-world experiences. Other popular sessions take a concept and describe how the audience can implement the concept.

The Conference is part of the "Maine Prepares" initiative, which focuses on building emergency preparedness across a wide range of audiences. Sessions are generally split into targeted "tracks" so that attendees can easily identify the sessions relevant to their role or interest. In addition to tracks specifically designed for first responders and emergency management personnel, this year's conference will include a track specifically for the citizens of Maine in an effort to increase preparedness and response initiatives for individuals and families.

[More Information](#)



Trainings Supported by AdCare

Medical Countermeasures: Points of Dispensing (POD), Planning, and Response

MGT-319

January 31, 2019 - February 1, 2019
Hilton Garden Inn, Bangor, Maine

Program Description: This training course is to enhance jurisdiction preparedness and emergency response efforts by providing the knowledge of how to exercise and revise a plan that utilizes an all-hazards, whole community approach toward a medical countermeasures event. Assists with coordination of planning, training and responding to a Medical Countermeasure (MCM) response for a public health incident. This course responds directly to the National Preparedness Goal; as it applies to delivery of medical countermeasures to exposed populations.

Topics

- * Category A, B, C Agents, natural hazards, man-made, or terrorism events.
- * Point of Dispensing Command Structure for planning, execution, and demobilization of a jurisdictional response
- * Emergency Use Authorizations (EUA)
- * Discussions as it applies to local Emergency Support Function (ESF-8 and ESF-6)
- * Public Health Preparedness Capabilities

Prerequisites - FEMA / SID Number - Students must register and bring a copy of their SID number to class. Register online: cdp.dhs.gov/femasid

Recommendations - WMD/Terrorism Awareness for Emergency Responders (AWR-160-W)

CE Credits - This course is approved and accredited for continuing education hours from:

ENA- Emergency Nurses Association

AAFP - America Academy of Family Physicians

Texas Department of Health - EMS

*This continuing education activity was approved by the Emergency Nurses Association (ENA), an accredited approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Register Online

Ethics for Clinicians:

Turning Difficult Conversations into Learning Conversations

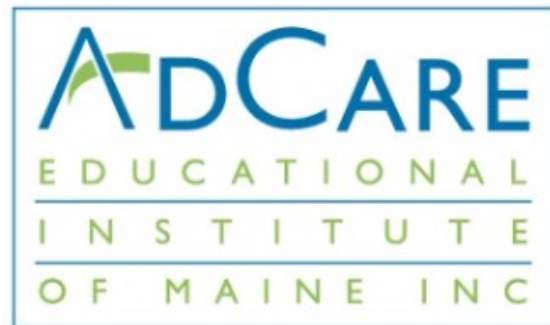
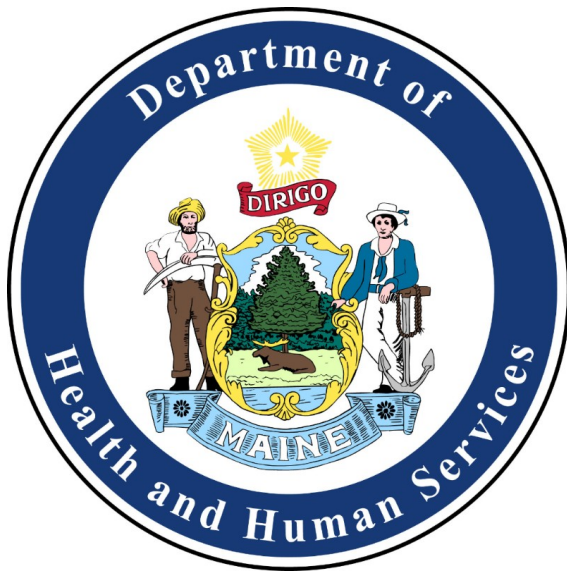
December 7, 2018

Jeff's Catering, Brewer

Ethical discussions by definition are difficult conversations. They often involve different and competing values, goals, understandings and priorities. Frequently there are strong feelings and identity issues at stake. When ethical issues arise, the clinician has an opportunity to move the difficult conversation into a learning conversation by using a structured approach. Through the introduction and regular use of Reamer's model for ethical decision-making, clinicians will strengthen skills for identifying and discussing ethical issues on a regular basis. When issues are examined in a methodical way, responsibilities and options become clearer, and next steps are developed and implemented. And while many gifted and ethical clinicians may not agree on the next step in any given situation, having a shared model to approach the conversation is crucial.

This one-day workshop will utilize two models as guides to how to discuss the most difficult issues in clinical practice. Case scenarios will involve boundaries crossings and violations; dual relationships; supervisor/supervisee relationship; organizational and worker ethics; discussing feelings and identity issues as they relate to specific clinical situation. The format is information sharing, individual reflection, case discussions and group exercises.

Target audience is clinicians, current and prospective supervisors and clinical directors in substance abuse, mental health and behavioral health settings.

[Register Online](#)

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