Several models of crisis intervention are generally recognised as being of value in the recovery process. The Faith Community ministering at the scene of an emergency event are required to employ the Psychological First Aid (PFA) model in Victoria. Other States and Territories may use other crisis intervention models.

Psychological First Aid Strategies

- FIRST DO NO HARM
- Links people back to family, friends and existing supports
- Delivers information: about the event, simple and accessible, reactions to event and where to seek help
- Provides emotional comfort
- Renders practical assistance
- Creates the opportunity to tell the story
- Validates the experience.

PFA Procedure

- **Introduction** - establish contact, build rapport and trust and provide safety
- **Engagement** - Clarify the situation with the person. Seek for the most pressing concern or need and a way to assist
- **Assessment** - Understand the person’s crisis. Look for the points in the story which trigger emotional arousal. “Language is digestion for the mind” - therefore help the person convert experience and thoughts into words. Watch the emotional arousal de-escalate.
- **Expression** - Continue the process of supporting the person where they are at and the continued conversion of experience into words
- **Re engage with Self** - Support the affected person to observe themselves, their actions and reactions.
- **Assistance** - in the provision of practical assistance, remember the potential need to refer on to mental health services.
- **Disengagement** - an important part of engaging with a trauma affected person is the careful disengagement process. Be clear about your role and responsibilities and timelines. Do not encourage dependency (although a trauma affected person will trust you and want to maintain contact with the familiar).
- **Referral** - refer on where necessary.

Psychological First Aid Training

To be effective in the role of providing psychological first aid, it is important to become educated in various aspects of disaster response and recovery. Contact VCC EM at [www.vccem.org.au](http://www.vccem.org.au) or (03) 9650 4511 for more information about training programs.
Referral for Mental Health Services

When working with individuals who are coping with a disaster, personal support providers are in a unique position to help others identify mental health needs and to make referrals to services as required.

When to Refer

You should refer an individual when you realise that the individual needs help beyond your capability and level of training and experience. Refer people on when:

- A person hints at or talks openly about suicide
- A person is socially isolated
- A person presents imaginary ideas or details of persecution
- You become aware of child abuse or any criminal activity
- You see the development of persistent physical symptoms (psychosomatic)
- You become aware of dependency on drugs and alcohol
- The person is or talks about engaging in risky behaviour (carelessness toward self and others)

How to Refer

- Before contacting a mental health provider, inform the person concerned about your intentions
- Let the affected person know that you care for them and explain the reasons and process of referral
- Assure the person that you will continue your support of them until the referral is complete and a handover has taken place
- Ask the Centre Manager, DHS or Lead Agency about referral pathways.

Each Relief and Recovery centre managed by Local Government will have contact details for referring affected persons on for mental health support.

Adapted from NYDIS Tip Sheets