



Gulf Coast Health Information Management Association

What's Inside

- President's message for our inaugural on-line edition!
- Missed the last business meeting? Catch up with meeting minutes.
- Earn 1 hour CEU.

Highlights:

President's Message

- page 1

CEU Feature: CISD

- page 1

Next Meeting Date

- page 2

Business Meeting

Minutes

March 18, 2009

- page 6

CEU Quiz

- page 5

President's Message

Members of GCHIMA it is my pleasure to serve you this year as President of YOUR association. My goal, with your help, this year is to reach out to our members with access to more information, CEU and networking opportunities. We are a group who believe in sharing knowledge, experience and direction in our lives and profession. It is essential that as HIM professionals we are prepared for the future with confidence.

To best allow us to accomplish our goals and put our knowledge into practice we must join together and take an active role to improve ourselves personally as well as professionally. What better or easier way to do this than to become an active member of your association?

Continued on Page 2

Critical Incident Stress Debriefing *....Not just for Emergency Workers!*

Another hurricane season looms, and we will soon be see harrowing images of what "might" happen this year to jolt us into preparedness. For longtime residents, it is easy to be complacent to the annual parade of images that splash across television screens and the internet (no pun intended). Most workplaces, particularly healthcare facilities, have action plans to accommodate an influx of victims as well as to protect its equipment and records. These plans rely on volunteers (or "volunteers") to carry them out should the area be threatened by natural disaster.

Continued on Page 3

President's Message (continued)

"I long to accomplish a great and noble tasks, but it is my chief duty to accomplish humble tasks as though they were great and noble. The world is moved along, not only by the mighty shoves of its heroes, but also by the aggregate of the tiny pushes of each honest worker."

Helen Keller

. Being a member of GCHIMA means:

- *Professional Development*
 - Lifelong learning essential to continued success.
- *Keeping Active*
 - Learn something new, join a committee, and take that first step with enthusiasm.
- *Building Relationships*
 - Network with friends and colleagues. Invest in building solid relationships and starting new ones.
- *Personal Growth, Accomplishment and Success*
 - Step out in faith and challenge yourself. You will grow and prove your uniqueness and value to the group.
- *Having FUN!*
 - Who doesn't want to have a good time? Take a break from the office and be prepared to share and smile, encourage and laugh.

I thank you in advance for your continued service to our organization.

Becky Scutro, RHIA
GCHIMA President 2009-2010

*Our next meeting will take place after the state convention on
September 16, 2009 at Town & Country Hospital, Tampa, FL
from 12:30 – 3:30 pm*

*Further details to be announced on the website:
<http://www.gchima.org>*

Critical Incident Stress Debriefing (continued)

“Things” and “places” are prepared, but what steps are taken to prepare the volunteers emotionally?

Often action plans rely on nonclinical volunteers to be on stand by should a disaster threaten the area. While they are trained through disaster drills on where to report and what steps to take, the emotional impact of a disaster is not addressed. For any volunteer, witnessing firsthand the aftermath of a disaster will be a shocking experience. During that time, resources will be limited and focused on those who most need help. There will be little time or patience, especially for nonclinical volunteers, who are unprepared for the sights and sounds of a natural disaster. As part of preparation, it is essential to prepare emotionally prior as well as how and where to ask for help after the fact.

Critical Incident Stress Debriefing (CISD) is a method developed for use by EMS personnel in the late 1970's through early 1980's. It is used by mental health professionals to help those who have experienced major loss or suffering to handle the physical and psychological symptoms associated with that experience. Basically, any incident that results in the sudden death, serious injury or physical or nonphysical threat to the safety

and wellbeing of an individual or the community as a whole is considered a critical incident.

Most approaches to CISD include 7 key points. These steps are incorporated into the debriefing process when providing assistance to emergency services and survivors. The debriefer will:

1. Assess the impact of the critical incident on support personnel and survivors.
2. Identify issues surrounding problems regarding their safety and security.
3. Allow participants to vent their thoughts, emotions and experiences associated with the events that occurred and provide validation for the experiences shared.
4. Predict events and reactions that are still to occur in the aftermath of the event. What comes next?
5. Conduct a review of the incident(s) and its impact emotional, cognitively and physically on survivors and watch for counterproductive behaviors or responses to the crisis.

Continued on Page 4

Critical Incident Stress Debriefing (continued)

6. Bring closure to the support personnel and survivors and will encourage initiation of the rebuilding process.
7. Assist in the re-entry process back into the community or workplace.

Debriefing can be performed in one-to-one, small or large groups.

Janet McGuire of the Tampa Bay Chapter of the American Red Cross said those who volunteer for the Red Cross undergo required training classes to prepare for a crisis situation. Their goal is to be proactive in preparing responders to cope with any situation that could arise during a crisis. She does not recommend placing any volunteer in a crisis situation without specific training. She points out doing so actually creates more victims of trauma, adding that the Red Cross never places a volunteer without training into any situation where either serious injury or death are witnessed firsthand. Such situations range from a single house fire to a natural disaster, such as Hurricane Katrina.

Any disaster plan that involves placing nonclinical personnel in the position of patient or victim contact should include emotional preparedness. This includes those

who will have only minimal contact, such as assistance with patient transport or the gathering of identifying information.

Ms. McGuire said the Tampa Bay Chapter of Red Cross has put together a team, reaching out to any and all agencies involved in disaster response to coordinate the recovery process. Critical stress debriefing is an integral part of the proactive plan. She said the proactive portion of CSDI involves coordinating mental health professionals, knowing where they will be just prior if a disaster should strike (e.g., hurricane) and more importantly where they can be reached after a crisis situation occurs to ensure that the most people will have these services available.

Research on the CSDI effectiveness has shown when it is available within 24-72 hours after the initial incident, both short term and long term psychological trauma are lessened.

By Joan Warner, RHIT, CCS
DRG Analyst, VIANT

Sources:

Janet McGuire, Media Contact for the Tampa Bay Chapter of the American Red Cross

American Academy of Experts in Traumatic Stress
"Providing Critical Incident Stress Debriefing (CISD) to Individuals and Communities in Situational Crisis
(<http://www.aaets.org/article54.htm>)

FOR GCHIMA MEMBERS ONLY - CEU QUIZ – Critical Incident Stress Debriefing

1. Critical Incident Stress Debriefing (CISD) was developed after September 11 to help EMS cope with the substantial losses.
True / False
2. CISD is a method available to all volunteers who help in the aftermath of a disaster.
True / False
3. A situation is considered "critical" only if it involves the deaths of many. True / False.
4. CISD includes all but which of the following components (a) assessment of the overall impact on survivors (b) prediction of events still to occur in the aftermath of the disaster (c) constructive critique on how volunteers reacted or (d) assistance in re-entry into the workplace.
5. The Red Cross Chapter of Tampa Bay (a) provides specific classes to all of their volunteers to provide coping skills prior to their assignments to assist (b) provides specific classes to volunteers on an as needed basis depending on the type of disaster (c) does not recommend training for every volunteer or (d) only recommends CSDI for specific types of disasters.
6. The Red Cross coordinates with mental health professionals (a) only after a crisis situation has occurred (b) only when it is determined CISD is needed (c) only when CISD is requested by the support personnel or (d) prior to a crisis, if it is known or expected one will occur.
7. CISD should only be performed in small groups or on an individual basis. True / False
8. The timing of a critical incident debriefing has no bearing on the long term impact of exposure to a trauma or crisis. True / False

Answer Sheet Continuing Education Quiz

Circle the correct answer. For True / False, use (a) for True and (b) for False

If you prefer to have your certificate sent by e-mail, enter your e-mail address in place of your street address; please print. *Response due by September 30, 2009.*

1	2	3	4	5	6	7	8
a	a	a	a	a	a	a	a
b	b	b	b	b	b	b	b
c	c	c	c	c	c	c	c
d	d	d	d	d	d	d	d

To receive your continuing education certificate, submit your answers to:
Joan Warner
3249 Buckhorn Dr.
Clearwater, FL 33761
jewarner@tampabay.rr.com

Name: _____
 Address: _____

 Phone: _____
 AHIMA Member ID _____

GCHIMA Board

President:
Becky Scutro, RHIA

President-Elect:
Iris Alcantara, RHIA,
CCS

Past President:
Diane Lerch, RHIA,
CHPS, CCS, CHA

Treasurer:
Jeanna Hickey, RHIA

Secretary:
Gwen Clippard, RHIA

Visit our website at
<http://www.gchima.org/>

GCHIMA Business Meeting Minutes from March 18th

GCHIMA March 18, 2009
St Petersburg College – Caruth Health Education Center
Pinellas Park, FL
8 AM - PM – 11:45 AM

Becky Scutro opened the meeting, welcomed attendees and introduced the guest speaker, Barbara Mitchell, RN, Quality Director, Town & Country Hospital, who spoke about Joint Commission Standards for 2009.

Business Meeting

Minutes from the January 21, 2009 meeting were approved.

Committee Reports**Treasurer's report**

For details of the Treasurer's report, please refer to our Members only section.

Membership Committee

It was discussed that the membership committee had met and discussed different methods to address the challenge of servicing 10 counties. It was noted that previous attempt to send a mass mailing resulted in low response.

One suggestion was to hold a meeting at a location farther north to encourage participation.

It was agreed that there needs to be a concerted effort to reach out to HIM professionals in these counties.

Newsletter Committee

In response to membership concerns that the GCHIMA website could be used more effectively, the Board has approved formation of a Newsletter committee to create better and more current communication with the membership. Input from all members is encouraged.

There were no reports for the following committees: Nominating Committee, Program Committee, Fire Committee, Executive Committee, and Legislative Committee