

Report Date: 28 Jan 2015

Summary Report for Individual Task

805D-211-1392

Provide Religious Support in conjunction with Traumatic Event Management (TEM) Support Activities (56M)

Status: Approved

Distribution Restriction: Approved for public release; distribution is unlimited.

Destruction Notice: None

Foreign Disclosure: FD5 - This product/publication has been reviewed by the product developers in coordination with the Chaplain School foreign disclosure authority. This product is releasable to students from all requesting foreign countries without restrictions.

Condition: Given a tactical or non-tactical environment, a traumatic event and medical personnel conducting TEM support activities. This task should not be trained in MOPP 4.

Standard: Provide religious support (RS) in conjunction with TEM support activities conducted by behavior health (BH) or other medical personnel by identifying Soldiers and units exposed to a potentially traumatic event, providing RS tailored to each Soldier and unit, and by referring Soldiers to appropriate medical, counseling and chaplain resources as needed.

Special Condition: None

Safety Risk: Low

MOPP 4: Never

Task Statements

Cue: None

DANGER

None

WARNING

None

CAUTION

None

Remarks: This task trains chaplain assistants how to provide religious support in conjunction with Traumatic Event Management support activities that are being conducted by medical personnel. This task does not train Traumatic Event Management support activity; for instance, it does not train psychological debriefings (PD). Research is divided on the helpful versus potentially harmful effects of PDs such as: Critical Event Debriefing (CED), Critical Incident Stress Debriefing (CISD), Group Crisis Intervention National Organization for Victim Assistance (GCI NOVA), etc. Do not lead or participate in leading any PD unless you have been formally trained in that model.

Walter Reed Army Institute of Research (WRAIR) has developed event-driven, time-driven, and post-deployment PD steps that are considered military specific, detailed in MEDCOM Pam 40-17, dated 16 July 2014. WRAIR PDs are recognized by the U.S. Army Medical Department as a best practice endorsed for use with military populations.

Notes: None

Performance Steps

1. Identify unit or Soldier who was exposed to the potentially traumatic event (PTE).
2. Coordinate with behavioral health personnel or appropriate medical personnel in conjunction with the chaplain in order to assist in TEM support activities.
3. Identify religious support (RS) activities which coordinate with TEM support activities, including but not limited to any of the following: reassuring conversation, calming personal presence, and referrals to Family Life, hospital or unit chaplains as needed.
4. Determine RS tailored to the needs of the unit or Soldier.
 - a. Establish a list of individuals affected by the PTE.
 - b. Assess the cohesion of the unit.
 - c. Assess the peer support and social support of the Soldiers.
5. Integrate RS with Combat and Operational Stress Control principles known as BICEPS: Brevity, Immediacy, Contact, Expectancy, Proximity and Simplicity.
6. Check on the Soldier(s) basic physical needs such as: security, food, hydration, shelter, sleep, and communication with family and friends.
7. Advise the chaplain and the Soldiers' unit leaders of any Soldier needs not being met.
8. Provide RS in conjunction with TEM individual support activities.
 - a. Establish a human connection in a non-intrusive, compassionate manner.
 - b. Enhance immediate and ongoing safety and provide physical and emotional comfort.
 - c. Calm and orient emotionally-overwhelmed or distraught Soldier(s).
 - d. Help Soldier(s) express their immediate needs and concerns.
 - e. Offer practical assistance and information to help Soldier(s) address their immediate needs and concerns.
 - f. Connect Soldier(s) to support networks including family and friends, unit chaplains or and behavioral health providers, as requested.
 - g. Support positive coping efforts, encouraging the Soldier(s) to take an active role in their recovery.
9. Refer Soldier(s) to behavioral health and other medical providers for medical evaluation as needed and Family Life or hospital chaplains for follow-on RS.
10. Participate in group education support activities as needed such as: informing Soldier(s) on predictable reactions they may experience after a PTE, how to take care of themselves and their buddies and what resources are available.
11. Support leader-led after action debriefing(s) or a cool-down meeting(s) in conjunction with the chaplain as needed for units affected.
 - a. Assist TEM providers in setting up the meeting area.

b. Provide non-stimulating beverages and convenient food if available.

(Asterisks indicates a leader performance step.)

Evaluation Guidance: The Soldier is evaluated orally or in written form after a real or simulated event; in either case. Soldier must state what he/she did to complete each step or explain why a step(s) was not needed.

Evaluation Preparation: Set-up: Tell Soldier to brief orally or in written form how he/she performed each performance step and why any step he/she did not perform was not needed.

PERFORMANCE MEASURES	GO	NO-GO	N/A
1. Identified unit or Soldier who was exposed to the potentially traumatic event.			
2. Coordinated with behavioral health personnel or appropriate medical personnel in conjunction with the chaplain in order to assist in TEM support activities.			
3. Identified RS activities which coordinate with TEM support activities.			
4. Determined RS tailored to the needs of the unit or Soldier.			
5. Integrated RS with Combat and Operational Stress Control principles known as BICEPS.			
6. Checked on the Soldier(s) basic physical needs.			
7. Advised the chaplain and the Soldier's unit leaders of any Soldier needs not being met.			
8. Provided RS in conjunction with TEM individual support activities.			
9. Referred Soldier(s) to behavioral health and other medical providers for medical evaluation as needed and Family Life or hospital chaplains for follow-on RS.			
10. Participated in group education support activities as needed.			
11. Supported leader-led after action debriefing(s) or a cool-down meeting(s) for units affected as needed.			

Supporting Reference(s):

Step Number	Reference ID	Reference Name	Required	Primary
	AR 165-1	Army Chaplain Corps Activities	Yes	No
	FM 1-05	Religious Support	Yes	No
	FM 4-02.51	COMBAT AND OPERATIONAL STRESS CONTROL	No	No
	FM 6-22.5	COMBAT AND OPERATIONAL STRESS CONTROL MANUAL FOR LEADERS AND SOLDIERS	No	No
	JP 1-05	Religious Affairs in Joint Operations	Yes	No
	MEDCOM PAM 40-17	Medical Services, US Army Medical Command Traumatic Event Management Facilitator Guide	No	No

Environment: Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT. Environmental protection is a continual process. Always be alert to ways to protect our environment and reduce waste.

Safety: In a training environment, leaders must perform a risk assessment in accordance with ATP 5-19, Risk Management. Leaders will complete the current Deliberate Risk Assessment Worksheet in accordance with the TRADOC Safety Officer during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, Multiservice Tactics, Techniques, and Procedures for Nuclear, Biological, and Chemical (NBC) Protection, FM 3-11.5, Multiservice Tactics, Techniques, and Procedures for Chemical, Biological,

Radiological, and Nuclear Decontamination. Everyone is responsible for safety. A thorough risk assessment must be completed prior to every mission or operation.

Prerequisite Individual Tasks : None

Supporting Individual Tasks : None

Supported Individual Tasks : None

Supported Collective Tasks : None