

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES  
NOTICE OF PUBLIC HEARING

September 30, 2019  
1:00 p.m. Central Time  
Gold's Building, Room 534  
1033 O Street, Lincoln, Nebraska

The purpose of this hearing is to receive comments on proposed changes to Title 176, Chapter 1 of the Nebraska Administrative Code (NAC) – *Critical Incident Stress Management Program*. The proposed amendments will remove all duplicative statutory language from the regulations and will refer to the Critical Incident Stress Management Act, Neb. Rev. Stat. §§ 71-7101 to 71-7113. There are no substantive changes to the regulations due to the statutes being self-executing.

Authority for these regulations is found in Neb. Rev. Stat. § 81-3117(7).

Interested persons may attend the hearing and provide verbal or written comments or mail, fax or email written comments, no later than the day of the hearing to: DHHS Legal Services, PO Box 95026, Lincoln, NE 68509-5026, (402) 742-2382 or [dhhs.regulations@nebraska.gov](mailto:dhhs.regulations@nebraska.gov), respectively.

A copy of the proposed changes is available online at <http://www.sos.ne.gov>, or by contacting DHHS at the mailing address or email above, or by phone at (402) 471-8417. The fiscal impact statement for these proposed changes may be obtained at the office of the Secretary of State, Regulations Division, 1201 N Street, Suite 120, Lincoln, NE 68508, or by calling (402) 471-2385.

Auxiliary aids or reasonable accommodations needed to participate in a hearing can be requested by calling (402) 471-8417. Individuals with hearing impairments may call DHHS at (402) 471-9570 (voice and TDD) or the Nebraska Relay System at 711 or (800) 833-7352 TDD at least 2 weeks prior to the hearing.

## FISCAL IMPACT STATEMENT

Agency: <b>Department of Health and Human Services</b>	
Title: 176	Prepared by: Sue Medinger
Chapter: 1	Date prepared: 2/13/19
Subject: Critical Incident Stress Management	Telephone: 402-471-0191

	State Agency	Political Sub.	Regulated Public
No Fiscal Impact	( <input checked="" type="checkbox"/> )	( <input checked="" type="checkbox"/> )	( <input checked="" type="checkbox"/> )
Increased Costs	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Decreased Costs	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Increased Revenue	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Decreased Revenue	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )
Indeterminable	( <input type="checkbox"/> )	( <input type="checkbox"/> )	( <input type="checkbox"/> )

Provide an Estimated Cost & Description of Impact:

State Agency: **None**

Political Subdivision: **None**

Regulated Public: **None**

If indeterminable, explain why:

TITLE 176 EMERGENCY MEDICAL SERVICES

CHAPTER 1 CRITICAL INCIDENT STRESS MANAGEMENT PROGRAM

~~001. Introduction~~ **SCOPE.** In recognition of the stressful nature of providing emergency response, a Critical Incident Stress Management (CISM) Program has been developed to provide stress management and crisis support services when requested by emergency response, correctional, hospital and emergency management personnel throughout Nebraska. The CISM Program provides services to public safety personnel to help prevent and to ameliorate stress-related symptoms. It is not the function of the Program to replace on-going professional counseling or psychotherapy, but to provide education, prevention and crisis intervention. These regulations are authorized by The Department will administer the Critical Incident Stress Management Program this program consistent with Neb. Rev. Stat. sections 71-7101 to 71-7113. Individuals providing gratuitous assistance pursuant Neb. Rev. Stat. §71-7111 shall do so in compliance with state law.

**002 Definitions**

**Committee** means the Interagency Management Committee.

**Council** means the Critical Incident Stress Management Council.

**Critical Incident Stress Management (CISM) Program Regions** mean administrative geographic boundaries that have been established by the Council.

**Mental Health Support Personnel** means mental health professionals and specifically qualified clergy members who have been appointed to the CISM Program in accordance with these regulations, program standards, policies and guidelines. The terms Mental Health Professional and Mental Health Worker mean the same as Mental Health Support Personnel.

**Peer Support Personnel** means emergency service personnel who are appointed to the program in accordance with these regulations, program standards, policies and guidelines.

**Program** means the Critical Incident Stress Management Program.

**003 Administration**

**003.01 Organization**

**003.01A Critical Incident Stress Management Council.** The Council shall be composed of the Director of Regulation and Licensure, the Director of Health and

~~Human Services, the State Fire Marshal, the Superintendent of Law Enforcement and Public Safety, and the Adjutant General as director of the Nebraska Emergency Management Agency. Each member of the Council shall designate a representative of his or her agency to be a member of the Interagency Management Committee. The Council shall:~~

~~**003.01A1** Specify the organizational and operational goals for the Program;~~

~~**003.01A2** Provide overall policy direction for the Program; and~~

~~**003.01A3** Appoint a Statewide Clinical Director who shall be a member of the Committee.~~

~~**003.01B Interagency Management Committee.** The members of the Committee and alternates are designated by the directors of the agencies comprising the Council. The Committee shall be responsible for:~~

~~**003.01B1** Planning and budget development;~~

~~**003.01B2** Program development and evaluation;~~

~~**003.01B3** Coordination of program activities and emergency response;~~

~~**003.01B4** Providing a mechanism for quality assurance, which may include certification of CISM Program members;~~

~~**003.01B5** Identifying program regions;~~

~~**003.01B6** Developing regulations and standards;~~

~~**003.01B7** Arranging for and supporting training of CISM Program members; and~~

~~**003.01B8** Providing support to the regional programs.~~

~~**003.01C Department of Health and Human Services Regulation and Licensure.** The department shall:~~

~~**003.01C1** Be the lead agency for the program;~~

~~**003.01C2** Provide office support to program activities at the state and regional levels;~~

~~**003.01C3** Provide necessary equipment for the program and participants;~~

~~**003.01C4** Provide staff support to the Council;~~

~~**003.01C5** Adopt and promulgate rules and regulations to implement the program;~~

~~**003.01C6** Recruit CISM Program members; and~~

~~**003.01C7** Appoint a director for the program who shall be an employee of the department. He/she shall be the chairperson of the Committee.~~

~~**003.01D Department of Health and Human Services.** The Department of Health and Human Services shall:~~

~~**003.01D1** Participate as a member of the Council and the Committee;~~

~~**003.01D2** Recruit program members, particularly mental health support personnel; and~~

~~**003.01D3** Participate in the training and continuing education of peer and mental health support personnel.~~

~~003.01E Nebraska State Patrol.~~ The Nebraska State Patrol shall:

- ~~003.01E1~~ Participate as a member of the Council and the Committee;
- ~~003.01E2~~ Receive all initial requests for debriefings and make contact with the Regional Clinical Director or designee;
- ~~003.01E3~~ Coordinate transportation requirements for critical incident stress debriefing team members;
- ~~003.01E4~~ Recruit program members, particularly members of the law enforcement profession;
- ~~003.01E5~~ Participate in the training and continuing education of the peer and mental health support personnel; and
- ~~003.01E6~~ Appoint a member of the Nebraska State Patrol to each CISM Regional Management Committee.

~~003.01F State Fire Marshal.~~ The State Fire Marshal shall:

- ~~003.01F1~~ Participate as a member of the Council and the Committee;
- ~~003.01F2~~ Cooperate in providing transportation for critical incident stress debriefing teams;
- ~~003.01F3~~ Recruit program members, particularly firefighters;
- ~~003.01F4~~ Participate in the training and continuing education of CISM peer and mental health support personnel; and
- ~~003.01F5~~ Appoint a member of the State Fire Marshals Office to each CISM Regional Management Committee.

~~003.01G Nebraska Emergency Management Agency.~~ The Nebraska Emergency Management Agency shall:

- ~~003.01G1~~ Participate as a member of the Council and the Committee;
- ~~003.01G2~~ Support recruitment of CISM Program members;
- ~~003.01G3~~ Promote stress management planning as part of emergency management preparedness;
- ~~003.01G4~~ Promote pre-incident education programs to acquaint emergency service personnel with stress management techniques; and
- ~~003.01G5~~ Participate in the training and continuing education activities of CISM mental health and peer support personnel.

~~003.01H Regional Management Committee.~~ Each CISM region shall have a Regional Management Committee composed of the Regional Clinical Director, and representatives of the Department of Health and Human Services Regulation and Licensure, the State Fire Marshal and the Nebraska State Patrol. The Regional Management Committee shall:

- ~~003.01H1~~ Be responsible for implementation and coordination of the program in the region according to the specifications developed by the Council and Interagency Management Committee; and

~~003.01H2~~ Develop a CISM program to facilitate the stress management process.

~~003.01I~~ **CISM Program Director.** The Director of the Department of Health and Human Services Regulation and Licensure appoints the Statewide CISM Program Director. This person shall be an employee of the department and shall be chairperson for the Committee.

~~003.01J~~ **Statewide Clinical Director.** The Council shall appoint the Statewide Clinical Director.

~~003.01J1~~ **Qualifications.** The Statewide Clinical Director shall have the skills to:

~~003.01J1a~~ Supervise and evaluate professional and peer support program members;

~~003.01J1b~~ Supervise and evaluate the Regional Clinical Directors; and

~~003.01J1c~~ Conduct critical incident stress management training and continuing education activities.

~~003.01J2~~ **Responsibilities.** The Statewide Clinical Director:

~~003.01J2a~~ Shall be a member of the Committee, and working with the Committee, shall supervise and evaluate the mental health and peer support program members, including the Regional Clinical Directors; and

~~003.01J2b~~ May conduct critical incident stress management training and continuing education activities.

~~003.01K~~ **Regional CISM Coordinator.** The Regional CISM Coordinator shall be an employee of the Department of Health and Human Services Regulation and Licensure, the Nebraska State Patrol or State Fire Marshals office, and in regard to this assignment, shall report to the CISM Program Director or designee. This person is assigned to one or more CISM Program regions to work with the Regional Clinical Director in arranging CISM interventions, coordinating training, continuing education and organizational meetings.

~~003.01L~~ **Regional Clinical Director.** The Regional Clinical Director shall have a graduate degree in a mental health discipline. The Regional Clinical Director shall:

~~003.01L1~~ Assure the provision of an organized CISM regional program;

~~003.01L2~~ Develop and implement CISM continuing education opportunities for program members;

~~003.01L3~~ Assist in the recruitment and selection of program members;

~~003.01L4~~ Monitor and evaluate regional mental health and peer support personnel;

~~003.01L5~~ Maintain quality assurance;

~~003.01L6~~ Assure timely responses to requests for CISM interventions; and  
~~003.01L7~~ Provide access to debriefings for debriefers when necessary.

~~003.01M~~ **Mental Health Support Personnel.** Mental health support personnel who are qualified CISM Program members on the effective date of these regulations may continue in their current role as long as they meet any subsequent regulatory education or experience requirements and comply with general membership requirements.

As used below, the terms “license” and “certified” shall include full and provisional licenses, provisional certification, or if working toward a psychology license, demonstration of having a supervisory registration form on file with the Nebraska Department of Health and Human Services Regulation and Licensure, Board of Examiners of Psychologists. In addition to meeting the general program requirements, mental health support personnel shall meet the following minimum qualifications:

~~003.01M1~~ Demonstrate an understanding of group process; acute, chronic and cumulative stress; post-traumatic stress; and crisis intervention or psychological first aid. Assessment skills are also necessary; and

~~003.01M2~~ Be licensed or certified by the State of Nebraska as a physician, psychologist, social worker, professional counselor, mental health practitioner, or as a nurse practitioner with a clinical specialty in psychiatric nursing or mental health; or

~~003.01M3~~ Be licensed by the State of Nebraska as a Registered Nurse who holds a Clinical Nurse Specialist Credential in psychiatric nursing or mental health; and demonstrate five or more years of full time mental health/psychiatric experience within the most recent six years; or

~~003.01M4~~ Be certified by the Nebraska Department of Education with an endorsement as a school psychologist or as a school guidance counselor; or

~~003.01M5~~ Be a clergy member of a recognized denomination and provide documentation of completion of a generally recognized Clinical Pastoral Education program which includes a practicum, or current or recent membership in the American Association of Pastoral Counselors or an equivalent organization.

~~003.01N~~ **Peer Support Personnel.** Peer support personnel who are qualified CISM Program members on the effective date of these regulations may continue in their current role as long as they meet any subsequent regulatory education or experience requirements and comply with general membership requirements. In addition to meeting the general program requirements, qualified peer support personnel shall be experienced within their declared professions, respected by their peers, able to keep confidences, willing to learn and participate in psycho-social processes, and able to adhere to established program standards. Peer support personnel must document past or present active duty with an emergency service agency.

**003.02 Personnel**

~~**003.02A Appointment to the CISM Program.** To be appointed as a CISM Program member, an individual shall:~~

~~**003.02A1** Complete the basic CISM training;~~

~~**003.02A2** Meet applicable minimum education and/or experience requirements;~~

~~**003.02A3** Provide, at a minimum, the following written information:~~

~~**003.02A3a** Biographical information, including full legal name, home and mailing addresses, home phone number, work phone numbers, fax number and e-mail address, if any;~~

~~**003.02A3b** Post-high school technical and academic educational experience, including the name of the institution, dates attended, and degree or certificate awarded;~~

~~**003.02A3c** Recent employment history, including the name of the employer, dates of employment and position title for the past five years;~~

~~**003.02A3d** Current membership in professional organizations; and~~

~~**003.02A3e** Professional and community activities in which the applicant has participated during the past five years;~~

~~**003.02A4** Submit a letter of recommendation from an active member of the applicant's profession;~~

~~**003.02A5** Submit three character references;~~

~~**003.02A6** If applying for a mental health support personnel position, submit a copy of a current license or certificate;~~

~~**003.02A7** Certify that all information provided is true and accurate to the best of his/her knowledge;~~

~~**003.02A8** Be appointed by a Regional Management Committee; and~~

~~**003.02A9** Provide a statement of intention to participate in the CISM Program for a minimum of two years.~~

~~**003.02B Resignation.** Any program member wishing to resign from the program shall surrender all forms of CISM Program identification to the Regional Clinical Director or Regional CISM Coordinator. A member who has resigned and wishes to be reinstated must reapply.~~

~~**003.02C Standards of conduct.** The CISM Program may take disciplinary action for any of the following:~~

~~**003.02C1** Failure to follow regional or program standards, policies and guidelines;~~

~~**003.02C2** Failure to be present at an assigned debriefing when the member made the commitment to do so;~~

~~**003.02C3** Knowingly misrepresenting the affairs or operations of the CISM Program;~~

~~**003.02C4** Continued absenteeism at CISM Program meetings or training;~~



- ~~003.02C5~~ Continued unavailability or refusal to participate in Program interventions;
- ~~003.02C6~~ Failure to maintain confidentiality regarding debriefings or other crisis interventions;
- ~~003.02C7~~ Organizing or in any way attempting to organize a CISM Program debriefing or other intervention or activity without the prior approval of the Regional Clinical Director and a specific invitation from authorized personnel;
- ~~003.02C8~~ Going to the scene of an incident to act on behalf of the CISM Program without the prior knowledge and consent of the Clinical Director and a specific invitation from authorized personnel;
- ~~003.02C9~~ Using program membership for unauthorized purposes that are, or give the appearance of being, motivated by a desire for personal financial gain;
- ~~003.02C10~~ Use of alcohol or a drug that impairs one's ability to participate in a CISM Program activity;
- ~~003.02C11~~ Conviction of a felony;
- ~~003.02C12~~ Showing disrespect to those served by the program, other program members, the general public, a Clinical Director or any other program official while acting as a representative of the CISM Program;
- ~~003.02C13~~ Failure to follow the expressed directions of the Regional or Statewide Clinical Director, the CISM Program Director, or their designees;
- or
- ~~003.02C14~~ Having one's professional certificate or license disciplined.

~~003.02D~~ **Disciplinary Actions.**

~~003.02D1~~ Violations of the standards as stated above shall result in any one or a combination of the following disciplinary actions:

- ~~003.02D1a~~ Verbal warning;
- ~~003.02D1b~~ Written warning;
- ~~003.02D1c~~ Retraining;
- ~~003.02D1d~~ Probation;
- ~~003.02D1e~~ Suspension; or
- ~~003.02D1f~~ Revocation of membership.

~~003.02D2~~ Serious violations of the standards listed above may be grounds for immediate dismissal from the program by the CISM Program Director, in consultation with the Statewide Clinical Director.

~~003.02D3~~ Verbal warnings, written warnings, and mandated retraining must be approved by the Statewide Clinical Director upon recommendation of the Regional Management Committee.

~~003.02D4~~ Probation, suspension and revocation of membership must be approved by the CISM Program Director upon recommendation of the Regional Management Committee.

~~003.02D5~~ When membership is suspended or revoked, the CISM Program member will immediately surrender the photo identification card and any

~~other CISM Program identification. The suspended member will not be allowed to participate in any CISM Program activities.~~

~~**003.02D6** A written statement defining the violations and action taken shall be placed in the member's file.~~

~~**003.02E** **Appeal of Disciplinary Actions.** Any disciplinary action may be appealed by the disciplined member in writing to the Regional Clinical Director within 15 days from such action. If the member makes no appeal the action becomes final.~~

~~**003.02E1** **Review Board.** Upon notice of appeal being received by the Regional Clinical Director, the Regional Clinical Director shall immediately notify the CISM Program Director. Within 15 days the Program Director will appoint a Review Board to conduct a hearing. The Review Board shall:~~

~~**003.02E1a** Be led by a mental health support person from a region other than that of the appealing party; and~~

~~**003.02E1b** Include two other program members from regions other than that of the appealing party, at least one of whom shall be a peer support person.~~

~~**003.02E2** **Hearing.** Within one week of being selected the Review Board shall set a hearing date. The hearing is to be held within three weeks of the date the Review Board is selected. The appellant shall be notified of the hearing date at least ten days prior to the hearing. At the hearing any person shall have the right to testify or present evidence. Pending resolution of the appeal, all documents, testimony, evidence or other information concerning the matter are to be treated as confidential.~~

~~**003.02E3** **Decision.** The Review Board will issue a written decision within 10 days of the hearing. The decision will include their findings and decision to affirm, reverse or modify (reduce or increase) the disciplinary action. The decision shall be mailed to the appealing party, the Regional Clinical Director, the Statewide Clinical Director and the CISM Program Director. This decision shall be final unless appealed by the appellant or the Regional Clinical Director.~~

~~**003.02E4** **Appeal of Peer Review Board's decision.** This decision may be appealed by the member or by the Regional Clinical Director. The appeal must be in writing and must be submitted to the Statewide Management Committee within 15 days of receipt of the Peer Review Board's decision. Within 15 days of receiving the notice of appeal the Statewide Management Committee shall hear the appeal de novo on the record and shall issue a written decision affirming, reversing, or modifying (reduce or increase) the determination of the Peer Review Board. The~~

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~~decision shall be mailed to all parties within 30 days of hearing the appeal and shall be a final determination of the matter. Any appeal of this decision shall be to district court as set out in Neb. Rev. Stat. Sections 84-917 to 84-919.~~