Mine Rescue Team Support for an Emergency: Preparation, Execution and Follow-up

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Mine Rescue Team Support for an Emergency: Preparation, Execution and Follow-up

- Team selection
- Training
- Briefings and De-briefings
- Follow-up

NEW MEMBERS

- Bring them up to speed without holding other members back
- 6 months minimum
- Medically fit
- Fit testing
- Right attitude and mental state





- Train as close to real life as possible
- Train in real smoke, don't just black the masks
- Train for critical tasks and repeat, repeat repeat to develop muscle memory



- Build trust within team and in the perception of others
- Cross train so you know the other person's role
- Actively practice mutual aid having them listed vs actually training with them
- Reading the mine maps vs knowing the mine

- Utilize diverse backgrounds (i.e., medics / engineers / mechanics / electricians / vent techs / rad techs / miners)
- Confirm all qualifications are in place ahead of time
- Many of the skills are the "use it or lose it" type

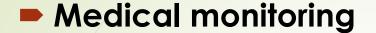
- Know personal limitations (weak link in the chain). Cannot be the cause of a team endangerment
- Use of high vs low tech equipment
- Use of old vs new techniques
- Clear and specific mission directives





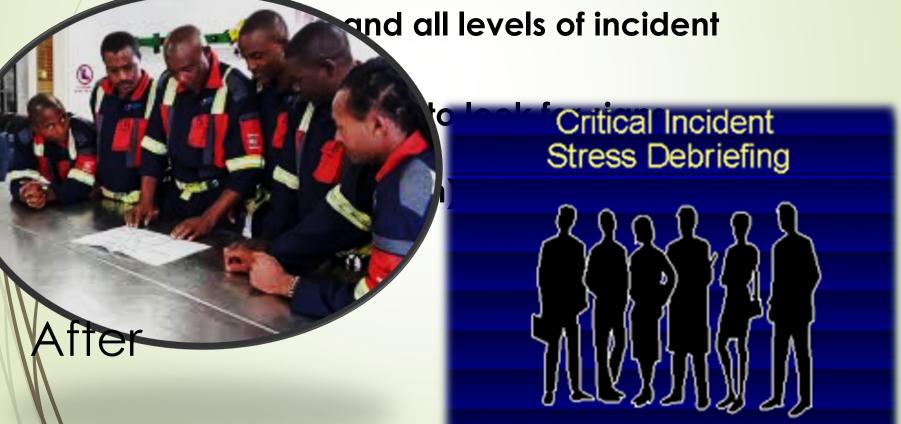
- Work to your training, don't freelance
- Communication protocols (3-way communications, phonetic alphabet etc.)
- Awareness of team fatigue
- Up to date maps and information
- Prepare mutual aid teams

Before and During



Debriefings, both mission and CISD

Open communication channels with



Use of a "quiet room" for teams to get their heads together

Previous team helping to brief the next team

Previous team helping management team to develop tactical objectives

What worked and what didn't QUIET ROOM

After

- Second guessing yourself did you do the best you could do?
- Having CISD, EFAP or similar programs in place
- Everyone is different, onset of issues may vary. Cannot assume everything is over and done with as soon as the mission or emergency is called down
- Have alternative members available

After

Post Traumatic Stress Disorder

- Occurs in response to the direct experience of extreme traumatic / stressful events, or being witness to people involved in them
- Can occur immediately after a traumatic event or develop months or years after the event
- More than just the feeling of sadness, shock or anxiety after a traumatic event

Typically between 3 and 9 percent of people will be

diagnosed with PTSD

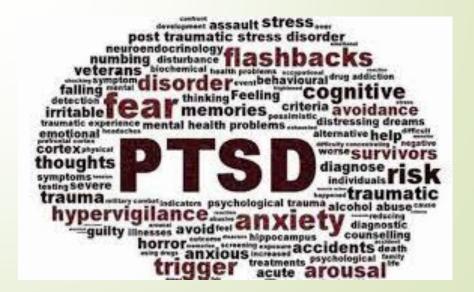


GREAT TO HIVE YOU HOME, BRO!

Typical Symptoms

- Intrusive memories
- Avoidance
- Emotional dampening
- Memory loss
- Disinterest
- Anxiety
- Insomnia
- Hyperarousal

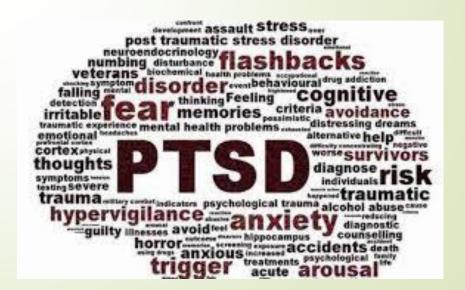
PTSD



Typical Manifestations

- Trouble concentrating
- More time needed to complete tasks
- Being and looking tired
- Angry outbursts
- Substance abuse/addiction

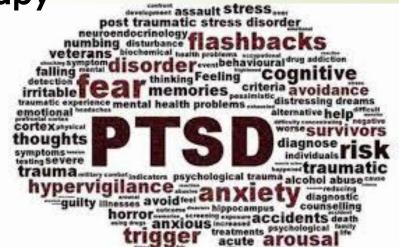




Potential Treatments

- Time
- Talking with friends, family, co-workers, teammates
- **EFAP**
- Non-Trauma based Psychotherapy
- Medication
- Trauma focused Psychotherapy

PTSD



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- Must include all components of the program
- Must involve all levels
- Must be ongoing

References

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Comments / Questions

