

POST INCIDENT SUPPORT

Promoting resilience and keeping you well



The Rivers Centre for Traumatic Stress is proud to be working with SMR to provide support to mountain rescue volunteers and staff involved in challenging incidents. You've been sent this questionnaire because you were recently involved in a challenging and potentially traumatic incident and we want to check how you're doing. The information you provide will be treated in the strictest confidence and will be accessed only by Rivers Centre clinicians.



At the end of this form you can ask for an appointment with us. If you do, we will offer one within 10 working days. If you don't, but your answers suggest you may benefit from further support, then we may contact you.

Police Incident Number/MR activity:	Date:
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Some questions about you

Your name:
DOB:
A telephone number on which we can contact you:
Your address:
Your team:
Your role on the incident:

Some questions about the incident

1. Has this particular incident bothered you more than others?	YES:	NO:
2. During the incident, did you feel as if it wasn't happening or it wasn't real?	YES:	NO:
3. In the 2 or 3 days after the incident did you have a sense of unreality?	YES:	NO:
4. Do you feel you were able to help as much as you could have done?	YES:	NO:
5. Are there things you wish you had done differently?	YES:	NO:
6. Do you think other people could have helped more than they did?	YES:	NO:
7. Did things go according to plan as far as possible?	YES:	NO:
8. Did any of the victims remind you of anyone close to you?	YES:	NO:

Some questions about stress

1. Is there someone you would talk to if you thought you had a problem?	YES:	NO:
2. Do you feel particularly under pressure at the moment at home?	YES:	NO:
3. Do you feel particularly under pressure at the moment at work?	YES:	NO:
4. Do you continue to feel fulfilled in your volunteering role?	YES:	NO:
5. Did you feel you had the resources and capacity to respond prior to the incident?	YES:	NO:
6. Do you think you receive the support you need?	YES:	NO:

The following questions are about some of the reactions that people can experience after traumatic or challenging events. Please consider the following questions in relation to how you've been feeling since the callout. Please indicate whether or not you have experienced any of the following **AT LEAST TWICE IN THE PAST WEEK:**

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|---|------|-----|
| 1. Upsetting thoughts or memories about the event that have come into your mind against your will. | YES: | NO: |
| 2. Upsetting dreams about the event. | YES: | NO: |
| 3. Acting or feeling as though the event were happening again. | YES: | NO: |
| 4. Feeling upset by reminders of the event. | YES: | NO: |
| 5. Bodily reactions (such as fast heartbeat, stomach churning, sweatiness, dizziness) when reminded of the event. | YES: | NO: |
| 6. Difficulty falling or staying asleep. | YES: | NO: |
| 7. Irritability or outbursts of anger. | YES: | NO: |
| 8. Difficulty concentrating. | YES: | NO: |
| 9. Heightened awareness of potential dangers to yourself and others. | YES: | NO: |
| 10. Being jumpy or being startled at something unexpected. | YES: | NO: |

Please use the box below if you would like to tell us anything else about the incident or how you are feeling.

Contact with the Rivers Centre

If you would like to talk in confidence to someone at the Rivers Centre please indicate: YES: NO:

You can return this form by email loth.externalrivers@nhs.scot or by using the prepaid envelope. You can also call us on 0131 451 7407.

You can find out more information about the Rivers Centre and the service we provide to mountain rescue volunteers and staff at <https://services.nhsllothian.scot/riverscentre/>

This questionnaire and information about any contact we have with you is stored on securely. You can read more about how NHS Lothian will handle your personal information, uphold your rights here: <https://www.nhsllothian.scot/yourrights/data-protection-privacy/data-protection-notice/>