

## TRAINING ANNOUNCEMENT

The Western New York Stress Reduction Program, the MMRS Emergency Mental Health Subcommittee, the Specialized Medical Assistance Response Team, and the Erie County Department of Mental Health are pleased to announce the following 2-day course:

### ADVANCED GROUP CRISIS INTERVENTION

**Dates:** Friday April 12<sup>th</sup>, 2019 & Saturday April 13<sup>th</sup>, 2019  
**Time:** 8:30am - 4:30pm both days  
**Location:** Erie County Emergency Services Training & Operations Center (Fire Training Academy)  
3359 Broadway  
Cheektowaga, New York 14227

This is an International Critical Incident Stress Foundation (ICISF) developed curriculum. Advantages of attending are:

- Participants will learn strategies and tactics for complex situations
- Participants will receive a certificate of completion from the ICISF
- Participants will receive continuing education credits from the University of Maryland at Baltimore
- This course is required for persons pursuing the ICISF Certificate of Advanced Training

### LEARNING OBJECTIVES

- Describe key terms and concepts relevant to the practice of advanced group crisis intervention
- List relevant recommendations for practice in managing complex group oriented crisis interventions
- Describe the nature and importance of incident assessment and strategic intervention
- Discuss the key concepts of enhanced group processes
- Discuss the risks of adverse outcome associated with crisis intervention and how to reduce those risks

**Presenter:** Bonita S. Frazer, MS, CTS, FAAETS is the former Mental Health Emergency Planning Coordinator for Erie County. Through professional and volunteer venues, she has provided crisis intervention and critical incident stress management services to survivors of critical incidents & disasters, and to emergency personnel who respond to these events. Bonita is a volunteer for the Western New York Stress Reduction Program, the Specialized Medical Assistance Response Team and the Canine Therapy Teams of Western New York. She also serves on the Board of Directors for the Association of Traumatic Stress Specialists.

**Please do not register if you cannot commit to attending both days in their entirety. Registration is limited to 30 persons. Only persons who are registered by 8:30am and stay until 4:30pm both days will receive credit for the course and a certificate of completion.**

**Lunch will be provided both days.**

Questions about registration can be directed to Cheryl Kennedy at 716-864-8101 or via email at [clkennedy72@yahoo.com](mailto:clkennedy72@yahoo.com)

Questions about the curriculum can be directed to Bonita Frazer at 716-235-7565 or via email at [bonitafrazer@yahoo.com](mailto:bonitafrazer@yahoo.com)

**REGISTRATION FORM**  
**ADVANCED GROUP CRISIS INTERVENTION**  
Friday April 12<sup>th</sup>, 2019 & Saturday April 13<sup>th</sup>, 2019

Persons who are interested in attending the training must complete the registration form and send the appropriate payment. Please complete a new registration form for each registrant. Registrations will be handled on a first come, first serve basis. *All registrants will be notified whether or not they have been accepted into the class.* REGISTRATION CLOSES ON FRIDAY APRIL 5<sup>TH</sup>, 2019 AT 4:30PM.

**Two-Day Course Fee Schedule:**            \$75.00 USD

**PAYMENT MUST BE RECEIVED BY THE APRIL 5<sup>th</sup>, 2019 DEADLINE** and can be made by personal check, business check, money order or purchase order payable to Western New York Stress Reduction Program Inc. **Cancellations received by April 5<sup>th</sup> will be accepted and the check returned or destroyed. For all others, payment will be retained for costs already accrued from your initial registration.**

Please LEGIBLY PRINT your name *exactly* as you would like it to appear on your certificate of completion, and complete all sections listed below.

Full Name: \_\_\_\_\_  
Agency: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

<b><u>Prerequisite Course Completion</u></b>
<b>Please check if you have completed the following course:</b>
<input type="checkbox"/> <b>Group Crisis Intervention</b>

WNY Police Helpline Peer:    YES    NO

Discipline(s):	_____ Police	_____ Clergy / Chaplaincy
	_____ Fire	_____ Medical / Hospital
	_____ EMT / Paramedic	_____ Public Health
	_____ Dispatch	_____ Mental Health
	_____ Corrections	_____ Employee Assistance Program
	_____ Probation	_____ Elementary / Middle / High School
	_____ Military	_____ College / University
	_____ HazMat	_____ Other - Please Specify

Please submit the completed form to Cheryl Kennedy via mail or email:  
Address: 7118 Michael Road, Orchard Park, New York 14127  
Phone: 716-864-8101  
Email: [clkennedy72@yahoo.com](mailto:clkennedy72@yahoo.com)

**PLEASE NOTE:** If you submit your registration via mail, please email Cheryl Kennedy at [clkennedy72@yahoo.com](mailto:clkennedy72@yahoo.com) to inform her that your registration(s) will be forthcoming.

**Should you need to cancel, please notify Cheryl Kennedy as soon as possible so that we may fill your slot with another registrant.**