



California Firefighter Joint Apprenticeship Committee  
 1780 Creekside Oaks Drive  
 Sacramento, CA 95833  
 (916) 648-1717 • CalJAC@cpf.org

## CALIFORNIA FIREFIGHTER PEER SUPPORT AND CRISIS REFERRAL SERVICES ACT CURRICULUM APPROVAL FORM

**Applicant:**

**Date:**

### I. AUTHORITY

For local or regional public fire agencies to be eligible for the confidentiality protections afforded by California Firefighter Peer Support and Crisis Referral Services Act (AB1116), the training shall be approved by the California Firefighter Joint Apprenticeship Committee and contain all of the following elements. **Please complete all sections.**

### II. COURSE REQUIREMENTS

**YES NO**

- Certificate of completion.....
- Course is delivered in-person by two fire service, culturally competent instructors who can answer and clarify student's questions, conduct activities and coaching skills .....
- Course curriculum consists of a minimum of 16 hours of instruction/activities/skills .....

### III. REQUIRED CURRICULUM ELEMENTS

**YES NO**

Course work must contain all, but not limited to, the following course objectives:

- **Pre-crisis education:**
  - Resiliency.....
  - Suicide intervention.....
  - Post-traumatic stress disorder & post-traumatic stress injury .....
  - Life altering events .....
  - Marriage and family.....
  - Workplace stressors.....
  - One-on-one support services.....
  - Practicing active listening skills .....
- **Crisis intervention techniques:**
  - One-on-one support services.....
  - Practicing active listening skills .....
- **At least two (2) additional crisis intervention techniques (all are recommended):**
  - Defusing .....
  - Debriefing.....
  - On-scene support services .....
- **Resource services:**
  - Identify local resources .....
  - Build relationships with local fire service culturally competent behavioral health providers .....
  - Consultation with a fire service culturally competent clinician .....
- **Referral services:** Including all, but not limited to the following:
  - Treatment programs.....
  - Self-help groups .....
  - Financial planning .....
  - Parenting.....
  - Victim of a crime.....



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- Grief support .....
- Understanding confidentiality requirements .....
- Substance abuse awareness and approaches .....
- Suicide risk assessment, support and referral .....

<b>IV. ADDITIONAL SUPPLEMENTAL INFORMATION (OPTIONAL)</b>	<b>YES NO</b>
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**Application letter (please attach)**

Contains the following:

- Experience in fire service crisis intervention, traumatic stress, and behavioral health .....
- Active membership in a fire service behavioral health peer support program .....
- Instructional experience .....
- Reasons for applying .....

**Reference letter(s) of recommendation and endorsement (please attach)**

- Fire Chief or Community College Coordinator or equivalent .....
- Union President or Employee Association President, or equivalent .....

**Applicants Signature:**

**Date:**

**Title:**

**Email:**

**Phone:**

Please return completed document to: [CalJAC@cpf.org](mailto:CalJAC@cpf.org)

### FOR OFFICE USE ONLY

Reviewed by:

Review date:

Approved

Not approved

Reason(s) not approved:

Additional notes:

Approved by Yvonne de la Peña, Executive Director

Date