

# Responding to Critical Incidents

## **Resource Materials for Schools**





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These materials may be used with school staff, students, and parents as appropriate. They are referenced in the texts of the ‘*Guidelines for Psychologists*’ and the ‘*Guidelines for Schools*’. The code R1, R2 etc is used in the text for brevity.



## SAMPLE CONSENT LETTER - INDIVIDUAL OR GROUP SUPPORT SESSION

Resource for schools: R2

*This letter can be used as a template for schools when they are seeking parental consent for a child to be seen in a group or individually by a NEPS psychologist.*

Dear parents

You may already know that our teachers and staff have been providing support to our students following (specific reference to the incident).

Additional support is also being provided to our school by psychologist/s from the National Educational Psychological Service (NEPS).

The psychologist will be available, where necessary, to meet with individuals or with groups of students to help them during this difficult time.

The aim of such sessions will be to:

- a) Provide information about dealing with grief and loss in a healthy way
- b) Allow students the opportunity to express their thoughts and feelings in a safe environment
- c) Allow students time to comfort and support each other, under the guidance of experienced staff from .....
- d) Help students resume their normal routines as soon as possible.

If you would like for your son/daughter to participate in such a session and any follow-up meetings that might be scheduled, please give your consent by signing below.

**You should return it to the school immediately.**

If you have any questions, please contact **(Name and phone number of contact person)**.

I give my consent for \_\_\_\_\_ to participate in a Group/Individual Session  
Student Name

\_\_\_\_\_  
Parent or Legal Guardian

\_\_\_\_\_  
Date

Sincerely

School Principal,

# SAMPLE LETTER - SEEKING ADVANCE PARENTAL AGREEMENT TO CHILD BEING SEEN

Resource for schools: R3

*This letter can be used as a template for schools which decide to seek advance parental consent so that a child may be seen by a NEPS psychologist (in a group or individually) in the aftermath of a critical incident. It is to cater for the situation where parents cannot be immediately contacted.*

Dear Parent

(..... name of school) has developed a plan for responding when a tragedy occurs.

When such an event happens, schools are offered support by psychologists from the National Educational Psychological Service (NEPS), an agency of the Department of Education and Science. If we feel it is necessary, we would like to be in a position to have your child seen by the psychologist who can offer advice and support.

Before any child is seen by a NEPS psychologist parental consent is usually required. We will make every effort to obtain this. However, in the unlikely event of being unable to contact you, we are writing to seek your consent to your child being seen by a member of NEPS as part of our school's immediate response. This is to allow us to support your child in the best way possible. Your child may be seen individually, in a small group or as part of a class group.

If you wish to discuss this, please contact me at your convenience.

Yours sincerely

Principal's name

*Schools should choose whether to use Option A or B below, or a more general letter (see 1.3 in the Schools Guidelines)*

### Option A.

Please fill in the form below confirming that you have read this letter and stating whether **you wish** or **do not wish** to have your child seen by a NEPS psychologist and return to .....

I have read this letter and

I wish to have ..... seen by the NEPS psychologist.

I do not wish to have ..... seen by the NEPS psychologist.

Parents/carers: \_\_\_\_\_

Date: \_\_\_\_\_

### Option B

The school will assume your agreement if you do not return this slip stating that you **do not wish** to have your child seen by a NEPS psychologist. Please fill in the form below and return to.....

I have read this letter and **I do not wish** ..... to be seen by the NEPS psychologist.

Parents/carers: \_\_\_\_\_

Date: \_\_\_\_\_

## SAMPLE LETTER TO PARENTS – SUDDEN DEATH/ACCIDENT

### Resource for schools: R4

*This letter can be used as a template for schools when they are informing parents of a tragedy, offering some advice and outlining what the schools response involves.*

Dear Parents

The school has experienced (the sudden death, accidental injury, etc.) of *Name of student(s)*. We are deeply saddened by the deaths/events.

*(Brief details of the incident, and in the event of a death, perhaps some positive remembrances of the person lost).*

Our thoughts are with (family name).

We have support structures in place to help your child cope with this tragedy. *(Elaborate).*

It is possible that your child may have some feelings and questions that he/she may like to discuss with you. It is important to give factual information that is appropriate to their age.

You can help your child by taking time to listen and by encouraging them to express their feelings. All children are different and will express their feelings in different ways. It is not uncommon for children to have difficulty concentrating or to be fearful, anxious, or irritable. They may become withdrawn, cry, complain of physical aches and pains, have difficulty sleeping or have nightmares. Some may not want to eat. These are generally short term reactions. Over the course of the days to come, please keep an eye on your child and allow him/her to express their feelings without criticism.

Although classes will continue as usual, I anticipate that the next few days will be difficult for everyone.

*(Optional)* An information night for parents is planned for (date, time and place). At that time, further information about how to help children in grief will be given.

We have enclosed some information which you may find useful in helping your child through this difficult time.

If you would like advice you may contact the following people at the school. *(Details).*

Principal's signature

## SAMPLE LETTER TO PARENTS - VIOLENT DEATH

### Resource for Schools: R5

*This letter can be used as a template for schools when they are informing parents of a violent death, offering some advice and outlining what the schools response involves.*

Dear Parents

I need to inform you about a very sad event that has happened.

(Give accurate information about the incident, but avoid using the word murder as this will not be established until the court case is completed).

*A child/young person from the neighbourhood, who is the brother of \_\_\_\_\_, a student here at school, was killed as a result of (a violent attack, violent incident in the street etc.) earlier this week. We are all profoundly saddened by his death.*

We have shared this information and have had discussions with all of our students so that they know what has happened. School staff members have been available for students on an on-going basis today. Other support personnel (*including psychologists etc, according to actual arrangements*) are available to advise staff and, where necessary, to talk to students. This support will continue to be available for (if appropriate insert how long).

The death of any young person is tragic, but a violent death is even more difficult. It is hard to have to teach our children about the violence in our world and to accept that sometimes we do not have the power to prevent it.

This death may cause a variety of reactions in your child. Some children/young people may be afraid for their own life and for the lives of those they love. Take time to listen to their fears and reassure them that what has happened is rare.

We have enclosed some additional information that may be useful during this time.

The media are in the vicinity of the school and may approach you or your children. You need not respond to their questions if you are approached. We will not allow the media to interview your child at school and our general advice is that you should not let your children be interviewed. They are not mature enough to judge what to say and may say something they will regret later.

(If planned) A support meeting for parents is planned for (date, time and place). At that time we can talk further about how to help ourselves and our children.

Our thoughts are with (family name) and with each of you.

Sincerely

Principal's name

## SAMPLE ANNOUNCEMENT TO THE MEDIA

Resource for schools: R6

*This can be used as a template by schools to be emailed, faxed or given to the media. It may help to decrease the number of media calls and callers to the school.*

*In some instances it is not appropriate to provide names or information that might identify individuals.*

*This announcement will need to be changed based upon confidentiality issues, the wishes of the victim's family and the nature of the incident.*

My name is (Name) and I am the Principal of (Name) School. We learned this morning of the death of (one of our students or Name of student). This is a terrible tragedy for \_\_\_\_\_ family(ies), our school and our community. We are deeply saddened by these events. Our sympathy and thoughts are with (Name) family and friends.

Name of student/students was a (5th year boy) and will be greatly missed by all who knew him.

We have been in contact with his/her parents and they have requested that we all understand their need for privacy at this difficult time.

Offers of support have been pouring in and are greatly appreciated. Our school have implemented our Critical Incident Management Plan.

Psychologists from the National Educational Psychological Service (NEPS) and (insert other information if relevant) have been with us all day supporting and advising teachers in their efforts to assist our students at this time.

The teachers have been helping students to deal with the tragic event.

The school has been open to parents, to support them and to offer them advice and guidance.

We would ask you to respect our privacy at this time.

Thank you.

## A CLASSROOM SESSION FOLLOWING NEWS OF A CRITICAL INCIDENT

### Handout for teachers: R7

Normally, the class teacher, class tutor or other teacher who knows the students should be the person to inform them of the events and lead the classroom session. Students generally feel safe and secure with someone they know. If the teacher feels uncomfortable with this role another staff member or the psychologist may work with them and share the task. Teachers should have the opportunity to opt out of this work if they feel unable to handle it and other arrangements should be made for that class group.

The aim of the session is to break the news to give the students an opportunity to discuss what has happened and to express their thoughts and feelings in a secure environment. The teacher needs to listen and be empathic.

The session needs to be tailored to the age and developmental level of the class group.

The outline of the session is as follows:

- Step 1: Giving the facts and dispelling rumours**
- Step 2: Sharing stories and allowing and encouraging the sharing of thoughts and the expression of feelings**
- Step 3: Normalising the reactions**
- Step 4: Worries (for younger children)**
- Step 5: Empowerment**
- Step 6: Closure**
- Step 7: Free Time**
- Step 8: Recovery**

#### **Step 1: Giving the facts and dispelling rumours.**

Tell the students in a calm, low key and factual voice

- *What has happened*
- *Who was involved*
- *When it happened*
- *The plan for the day*

#### Sample Script

*I have something very sad I want to share with you. The factual information agreed upon by the staff e.g. (Name of student), who attends our school and was missing, has been found. He is dead. Yesterday, the Gardaí found his body. They are investigating what has happened and will let us know as soon as they find out more information.*

*I am feeling very sad about what's happened. Let's spend some time together now helping each other to talk about how we feel about what has happened.*

## Step 2: Sharing stories

Take some time for discussion. Students may wish to tell their story of the event. As a result they will feel less alone because of their common shared experiences. Assisting them to verbalise their experiences helps their recovery. For those students who find it difficult to verbalise their experiences, or for students with learning difficulties, it may be helpful to allow them to express their feelings and recount their experiences in other ways. Writing stories or using art can be particularly helpful, especially for younger students. A number of materials that can be used are suggested in 'Resources for Schools' pg 45. Give the students a choice as to how they want to represent their experiences. Have a box of tissues at hand.

### Sample script

*To help us today, we are going to make a memory box for (name of deceased). You can draw a picture of a time you remember with (name of the deceased) or write a poem or a letter to him. If you like we can put these in a nice box and give it to (name of deceased) family sometime soon. This will help them to see how important (name of deceased) was.*

## Step 3: Normalising the reactions

Tell the children that they will all react differently to what has happened and that there is no right or wrong way. List some possible feelings and reactions, (see **R11**). Explain that their reactions are normal responses to abnormal circumstances. Let the students know that the reactions or symptoms will go away in time. Tell them that if the symptoms haven't gone after a few weeks, they should let you or their parents know. They may need to talk to someone about how they are feeling. Depending on the incident and the age of the students distribute handouts **R9, R10, R11, R12**.

## Step 4: Worries (for younger children)

### Sample script

*You may be worried about (name of the deceased) - that they might be sad or lonely or hungry or cold. When someone dies they don't feel cold or hungry or feelings like that anymore.*

*You may be worried that the same thing could happen to you or someone in your family. What happened to (name of deceased) doesn't happen very often.*

*If the classmate has been ill, you could say. He was very sick and the chances of this happening to someone else you know are low.*

## Step 5: Empowerment

Help the students to identify strategies that they might use to help manage their reactions. For example, talking to family and friends, getting enough sleep, exercise may all help. If appropriate, students can share strategies that worked for them in other stressful situations or brainstorm ideas as to what might help. Overall, it is important to help the students regain a sense of control.

## Step 6: Closure

End the session by focussing on the future. Depending on the nature of the incident, help the class/group decide what they would like to do about various issues, e.g., what to do about the person's empty chair, about writing cards or letters. Reiterate the message that their reactions are normal responses to abnormal circumstances.

### **Step 7: Free Time**

After the discussion the teacher may want to allow the student's some play time in the play ground or free time in the classroom or an agreed area, depending on the age.

### **Step 8: Recovery**

It may be useful to continue to do these activities at intervals during the days following and to intersperse them throughout the curriculum in the coming days.

Normal routines should generally be returned to as soon as possible.

- Students should be encouraged to resume sports and other extra-curricular activities
- Help students to identify or establish some supports; help them to identify who they go to for different kinds of help
- It is appropriate that the class curriculum is adjusted or adapted. For example, teachers should avoid presenting new learning material for a while following an incident as concentration may be impaired
- Use opportunities which arise within ordinary class work, where coping and support can be reinforced
- Students could be encouraged to discuss how to avoid future crises and lessons learnt from their experiences. There will also be opportunities for structured discussion within the school's social, personal, and health education programmes. Where Circle Time is in use, this is an ideal context in which to offer support.

## CHILDREN'S UNDERSTANDING AND REACTION TO DEATH ACCORDING TO AGE

### Handout R8 (May be used with various groups and individuals)

Childrens' understanding and reaction to death will depend on their age and their developmental stage. The following are guides only as children will differ in their reactions and grasp of events for a range of reasons other than age alone.

#### Ages (0 – 2 years)

- Infants do not understand the meaning of death
- They may display anxiety when separated from a loved one
- They may appear upset, subdued and uninterested in their surroundings

#### Ages 2 – 5 years

- No understanding of the permanency of death
- May search for the missing person
- May feel responsible for the death in some way
- May become apathetic and depressed
- May regress to an earlier stage of development e.g. thumb sucking, bedwetting, tantrums or may become clingy
- May develop fears of going to sleep
- May worry that other loved ones may die

#### *How you can help*

- *Continuity of normal routine e.g. mealtimes and bedtime*
- *Offer physical comfort*
- *Explain the death in clear, simple language, using words like "dead" and "died"*
- *Do not use terms like "gone to sleep" or "passed away"*
- *You may need to repeat the same information again and again*
- *Permit them to ask questions and be consistent in your answers*
- *Reassure them that they had nothing to do with the death and of the well-being of other family members*

#### Ages 5 – 9 years

- Beginning to realise the permanency of death, but their idea of life after death is still vague
- May have concerns about how the deceased is feeling or what he/she is thinking in the grave
- May have a lot of questions about aspects of the death e.g. how the person died, what they looked like, the funeral, heaven, coffins
- The reaction of their peers is important, they may feel 'different' to them
- Their peers may be awkward about the death and avoid contact
- They may become the target of bullying

#### *How you can help*

- *Encourage the child to talk and cry about the deceased if they wish to, otherwise respect their silence*
- *Answer questions and provide as much factual information about the death as possible*
- *Reassure them that thinking and feeling ceases after death*
- *Be vigilant in relation to bullying.*

## **Ages 9 – 12 Years**

- Understand the finality and universality of death
- Awareness of their own mortality and may worry about their own death
- May display psychosomatic symptoms i.e. physical complaints like tummy aches
- May wish to stay at home close to parents
- May display anger.

### *How you can help*

- *Dispel fears about their own health or the health of other loved ones by offering reassurance*
- *Encourage them to go to school*
- *Allow them to express their anger, offering appropriate ways to do so*

## **Adolescents**

- Fully understand the finality, universality and inevitability of death. Their experience of death is similar to adults
- May have a range of feelings: guilt, regret, anger, loneliness etc.
- Death adds to the already confused array of emotions experienced by adolescents
- May appear to not care about the death
- May seek support outside of the family.

### *How you can help*

- *Offer them time to listen*
- *Allow them to express their grief in their own way*
- *Be prepared for mood swings.*
- *Don't feel left out if they seem to value their friends more than their parents*

If parents are grieving themselves, they may be emotionally unable to support their other children. In this instance, another supportive adult in the child's life, e.g. other family members, friends, neighbours may need to offer emotional support.

It should be remembered that for children with special educational needs, their understanding of what has happened will be in line with their developmental age.

## STAGES OF GRIEF

### Handout R9 (May be used with various groups and individuals)

Grief is a normal, healthy and predictable response to loss. Although there are distinct phases in the grieving process, people go through these stages in different sequences and at different paces. Generally the grieving process in adults is thought to take about two years, while with children and adolescents it may be over a more extended time-frame with different issues arising as they go through developmental milestones.

#### Denial, numbness, shock (up to 6 weeks)

- Death of the person may be denied
- Emerging feelings may be suppressed
- Refusal to talk about the death
- Bereaved keeps very busy to avoid thinking about the death
- Bereaved may show signs of confusion and forget everyday routines
- Children in shock may display either silent withdrawal or outbursts of crying

#### Acute grief/searching and longing for deceased (6 weeks to 4 months)

- Acute sadness – crying
- Physical pangs of pain including loss of appetite and disturbed sleep
- Emotional pain accompanied by dejection, hopelessness, lack of concentration
- Fears of life after death, nightmares, ghosts
- Disorganisation
- Strong guilt feelings and questioning of self and others, particularly in the case of a sudden death
- Feelings of anger at the departed for leaving them
- Bereaved may reject offers to comfort them

#### Adaptation to life without the deceased (6 months to 18 months)

- People begin to adjust to their lives without the person who is gone
- Sense of isolation
- Fearful of forgetting the deceased
- Less crying and irritability
- Exacerbation of existing personality problems. Children with low self-esteem may be at a greater risk of emotional/behavioural difficulties

#### Normalisation of life

- Getting on with life
- Returned sense of humour and play
- Able to participate emotionally in new relationships
- Changed relationship with the deceased – able to think of the deceased without pain
- Reduction in physical/emotional symptoms
- Less guilt.

## HOW TO COPE WHEN SOMETHING TERRIBLE HAPPENS

### Handout for Students: R10

- Reach out – people do care
- Talk to your friends, family and teachers - talking is the most healing medicine
- Remember you are normal and having normal reactions – don't label yourself as crazy or mad
- It is ok to cry
- It is ok to smile
- If your feelings and reactions seem different from those of your friends, remember everyone reacts differently
- When the stress level is high there is a temptation to try to numb the feelings with alcohol and drugs. This complicates the problems, rather than relieving them
- Some people find that writing or drawing is helpful. What about writing a note or letter to the family of the person who died or the person themselves?
- Spend time with people who have a positive influence on you
- Make as many daily decisions as possible. This will give you a feeling of control over your life, e.g. if someone asks you what you want to eat – answer them, even if you're not sure
- Recurring thoughts, dreams or flashbacks are normal – don't try to fight them – they'll decrease over time and become less painful
- Make a special effort to take care of yourself during this time. Try to get some extra sleep, eat nutritious foods and get some exercise, even if it is just a walk
- Sticking to your "normal" routine helps. Structure your time – keep busy
- Take time out – go for a walk or kick a football
- Provide some balance to the negative things that have gone on by doing something special or fun for yourself. Think about something that makes you feel good. Then make it happen – like going to the cinema, listening to music, calling a friend, etc. Laughter is good medicine. Watch a funny movie or play a silly game with younger children to lighten your spirits
- Useful websites: [www.spunout.ie](http://www.spunout.ie); [www.youth.ie](http://www.youth.ie); [www.reachout.com.au](http://www.reachout.com.au)

*Above all, realise that what you are experiencing is normal following a traumatic event. Be understanding of yourself and others.*

## REACTIONS TO A CRITICAL INCIDENT

Handout for Students: R11

Following the recent sad event, you may now be experiencing some strong emotional or physical reactions. There is no 'right' or 'wrong' way to feel but here is a list of difficulties that people sometimes experience following such an event.

| FEELINGS                     | BEHAVIOURAL                                   |
|------------------------------|---|
| Fear                         | Nightmares                                    |
| Guilt                        | Social withdrawal                             |
| Shame                        | Irritability                                  |
| Regret                       | Loss of concentration                         |
| Anger                        | Forgetfulness                                 |
| Tearfulness                  | Physical/Verbal aggression                    |
| Loneliness                   | Misuse of drugs, including alcohol            |
| Anxiety                      |   |
| Mood swings                  |   |
| Shock                        |   |
| Yearning                     |   |
| Numbness                     |   |
| Confusion                    |   |
| Isolation                    |   |
| Insecurity                   |   |
| PHYSICAL                     | THOUGHTS                                      |
| Tiredness                    | Disbelief                                     |
| Sleeplessness                | Denial  |
| Headaches                    | Sense of unreality                            |
| Stomach Problems             | Preoccupation with images of the event/person |
| Bowel/Bladder problems       |   |
| Loss or increase in appetite |   |

## GRIEF AFTER SUICIDE OR SUSPECTED SUICIDE

### Handout for Students: R12

Remember there is no right or wrong way to react when someone you know dies. People will have many different reactions to what has happened.

- Know that you can survive, even if you feel you can't
- You may feel overwhelmed and frightened by your feelings. This is normal. You're not going crazy; you are grieving
- You may not feel a strong reaction to what has happened. This is ok
- You may experience feelings of guilt, confusion, forgetfulness and anger. Again these feelings are all normal
- You may feel angry at the person who has died, at yourself, at God, at everyone and everything. It is ok to express it
- You may feel guilty about what you did or did not do. Suicide is the act of an individual, for which we cannot take responsibility
- You may never have an answer as to "why" but it is ok to keep asking "why" until you no longer need to ask or you are satisfied with partial answers
- Sometimes people make decisions over which we have no control. It was not your choice
- Feeling low is temporary, suicide is permanent. Suicide is a permanent solution to a temporary problem. If you are feeling low or having a difficult time, ask for help
- Allow yourself to cry, this will help you to heal
- Healing takes time. Allow yourself the time you need to grieve
- Every person grieves differently and at a different pace
- Delay making any big decisions if possible
- This is the hardest thing you will ever do. Be patient with yourself
- Spend time with people who are willing to listen when you need to talk and who also understand your need to be silent
- Seek professional help if you feel overwhelmed
- If you are thinking of trying to kill yourself, you must talk to a trusted adult
- Avoid people who try to tell you what to feel and how to feel it and, in particular, those who think you should "be over it by now."
- Ask in school about a support group for survivors that provides a safe place for you to express your feelings, or simply a place to go to be with other survivors who are experiencing some of the same things you're going through
- Allow yourself to laugh with others and at yourself. This is healing
- Useful websites: [www.spunout.ie](http://www.spunout.ie); [www.youth.ie](http://www.youth.ie); [www.reachout.com.au](http://www.reachout.com.au).

## REINTEGRATION OF THE BEREAVED CHILD IN SCHOOL

### Handout for schools: R13

Some suggestions are offered here which may help prepare the school and the bereaved child for their return to school. They will help to ensure that the individual, the other students and the staff feel more comfortable and at ease.

- Visit the bereaved student at home to see what he/she would like to happen when they return to school
- Talk to the student's class about how people are affected by grief and encourage them to share their own feelings. Ask about how they have coped with bereavements in their own lives and what has helped
- Discuss how difficult it may be for their classmate to come back to school. Ask how they would like to be treated if they were returning to school after a death. This might be done in pairs or small groups, thus encouraging all to be involved. It will also ensure that a range of preferences are expressed, reinforcing the fact that different people will have different preferences as to how they are treated. Some people may want to discuss what has happened, while others may want to be left alone. In general bereaved students say that they would like others to treat them as before rather than being 'over-nice' to them. However it is a delicate balance as they don't want people to behave as if nothing has happened at all
- It may help if, in advance of the student's return to school, classmates have sent cards or notes or drawn pictures for the bereaved classmate. This will let her/him know that they are in their thoughts
- When they return, acknowledge their loss *"I'm sorry that (name of deceased) died. I know that you are sad. It is ok to cry"*. (In Post-Primary schools, check that this is done in the first class of the day and not in every class. Teachers can express their own sympathies separately once the general re-entry to class has been managed.)
- When the student returns, they may have difficulty concentrating or joining in class activities. Be understanding
- Allow them access to a 'quiet room' where he/she can go to be alone. You might suggest: *"We can set up a signal for you to use if you need to leave the class at any time"*. (Ensure supervision)
- Link the student in with the guidance counsellor for support if needed.
- Listen when they want to talk: *"If you need to talk at any time, I am here to listen"*
- Carry on normal routines and normal approaches to discipline
- They may have difficulty completing homework and assignments: *"If you are having difficulty doing your homework it is ok to do as much as you can for a while"*
- Allow them as much time as they need to grieve.

## WAYS TO HELP YOUR CHILD THROUGH THIS DIFFICULT TIME

Handout for parents: R14

**Children do not need to be taught how to grieve. They will do it naturally and in healthy ways if we allow them and if we provide a safe atmosphere, permission and example to do so.**

- Listen carefully. Let them tell their story. Tell them that the reactions they are having are normal
- Pay extra attention, spend extra time with them, be more nurturing and comforting.
- Reassure them that they are safe
- Don't tell them that they are "lucky it wasn't worse". People are not consoled by such statements. Instead, tell them that you are sorry such an event has occurred and you want to understand and help them
- Do not be surprised by changes in behaviour or personality. They will return to their usual selves in time
- Don't take their anger or other feelings personally. Help them to understand the relationship between anger and trauma. Help them find safe ways to express their feelings e.g. by drawing, exercise, or talking
- Help them to understand that defiance, aggression and risk behaviour is a way to avoid feeling the pain, hurt and or fear they are feeling
- When going out, let them know where you are going and when you will be back.
- If you are out for a long time telephone and reassure them
- Tolerate regressive behaviour such as nail biting, thumb sucking, or the need for a night light
- Share your own experience of being frightened of something and getting through it
- If they are feeling guilt or shame, emphasise that they did not choose for this to happen and that they are not to blame. Even if they were angry with the person who died, or had been mean to them, this did not make it happen
- Work with the school support services and other available services.

## A GENERAL INTERVIEW GUIDE FOR GUIDANCE COUNSELLORS, CHAPLAINS, OTHER DESIGNATED STAFF

Teacher Handout : R15

*This can be used to help explore a student's reaction to a critical incident and how it is impacting on them. It can help the student to express their thoughts, feelings and emotions in a safe environment with a caring adult.*

Student's name \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_ Sex M F Class/Year \_\_\_\_\_

*We are concerned about how things are going for you. Our talk today will help us to discuss what's going well and what's not going so well. If you want me to keep what we talk about between me and you, I will do that – except for those things that I need to discuss with others in order to help you. For example, if you or someone else is at risk in any way, I could not keep that confidential. My job is to help and I will need to do something about it.*

*In answering, please provide as much detail as you can. At times, I will ask you to tell me a bit more about your thoughts and feelings.*

1. Where were you when the event occurred?
2. What did you see or what did you hear about what happened?
3. How are you feeling now?
4. How well do you know those who were hurt or killed?
5. Has anything like this happened to you or any of your family before?
6. How will your life be different now?
7. How do you think this will affect your family in the days to come?
8. What bothers you the most about what happened?
9. Do you think anyone could have done something to prevent it?  
Yes No  
Who?
10. What could you/they have done?

11. Thinking back on what happened

not at all   a little   more than a little   very

|                                  |   |   |   |   |
|----------------------------------|---|---|---|---|
| How angry do you feel about it?  | 1 | 2 | 3 | 4 |
| How sad do you feel about it?    | 1 | 2 | 3 | 4 |
| How guilty do you feel about it? | 1 | 2 | 3 | 4 |
| How scared do you feel?          | 1 | 2 | 3 | 4 |

12. What changes have there been in your life or routine because of what happened?
13. What do you usually do when you need help with a personal problem?
14. Which friends and who at home can you talk to about this?
15. What are you going to do when you leave school today? If you are uncertain, let's talk about what you should do.

## CHECKLIST - STUDENTS AT RISK

### Handout for schools: R16

*This checklist may be used by the psychologist or may be offered as an aid to school staff who are concerned about a student. It should be remembered that the checking of a number of items for any one student may point to other problems. Indication of a number of these factors in any one student should always be followed up.*

- Unexpected reduction of academic performance
- Talking about suicide
- Ideas and themes of depression, death and suicide in their work
- Making statements about hopelessness, helplessness or worthlessness
- Change in mood and marked emotionally instability
- Significant grief or stress
- Withdrawal from relationships
- Break up of an important relationship
- Discipline problems, being in trouble in school
- Withdrawal from extra-curricular activities
- Giving personal belongings away
- Loss of interest in things one cares about
- Neglect of physical appearance
- Physical symptoms with emotional cause
- High risk behaviours
- Alcohol or drug abuse
- Bullying or victimization
- History of suicidal behaviour e.g. cutting or overdose risk behaviours
- Family history of suicide/attempted suicide

## EXPLORING SUICIDE RISK

### Guideline for schools and NEPS: R17

The term 'risk assessment' is now used in quite a specific sense and such an assessment needs to be carried out by a trained professional. This note is intended to help those professionals (designated school staff, such as guidance counsellors or chaplains, and psychologists) most immediately available to the student, to make an immediate judgement as to whether a student is at risk. Where there is a serious concern about a student, then a referral should be made immediately.

**Review available information:** The school should review any significant changes observed in the student over recent weeks. The list of warning signs in **R16** should be used to guide a review discussion with concerned staff.

Have a sensitive but direct and open discussion with the student. If a student has been reported to be talking about suicide, they should be asked openly, ***“Are you thinking about killing yourself?”*** This will offer the student the opportunity to talk about their feelings and their thoughts. If they confirm that they have been thinking about it, then this should be explored by raising the following issues with the student:

**Previous attempt:** Has the student attempted suicide before? You might ask, ***“Have you ever tried to harm yourself before?”*** If the answer to this is “Yes”, then the risk increases.

**Personal/family history:** The level of risk increases with the number and seriousness of personal/family difficulties e.g. relationship breakdown, loss of friendship, problems with the law, parental separation, recent bereavement, serious illness etc. ***“How have things being going for you recently; has anything significant happened in your life recently?”***

**Physical/emotional history:** A student who has experienced major personal difficulties, whether as a result of physical (recent hospitalisation, chronic illness) or significant emotional difficulties (depression, loneliness, guilt, anger etc.) is more at risk. ***“How have things being going for you recently? Have you been ill? Has anything significant happened to you recently?”***

**Plan:** Does the student have a plan? If 'yes', ask ***“How do you intend to do it?”*** Does he/she have a particular day in mind? ***“When are you thinking of doing it?”*** Has he/she written suicide notes? The more concrete the plan the more serious the threat.

**Means:** Does the student have the means and a place to do it. Ask ***“How do you intend to do it?”*** Are the means available lethal? Have they access to a gun or pills? ***“Where would you do it?”*** Will the student be in a place where they can be rescued? For example, do they intend to carry out the action when both parents are out and their siblings also?

The greater the number of “Yes” answers, the higher the risk and the greater the need for immediate onward referral of the student. Parents should be informed at once and asked to bring the student to their GP or to another service. If a student is under 18, years teachers are obliged to inform the parents even without the student's consent.

**Don't be afraid to use the word 'suicide'. Getting the word out in the open may help the student feel that his/her cry for help has been heard.**

## Notes



## FREQUENTLY ASKED QUESTIONS

### Principals: R18

The following is a summary of questions often asked by Principals in the aftermath of a critical incident.

**Q. What do I do first on hearing news of the incident/death?**

- A. If the source of the news is the affected family, express condolences and get as many facts as possible – sensitively. If it is from another source, check for veracity; obtain the facts; the numbers injured etc. Ascertain who is to contact the next of kin. The Gardaí may have already undertaken this role.

**Q. Who do I contact for help?**

- A. If the school is closed (weekends/holidays) contact members of the Critical Incident Management Team with a view to setting up a meeting. Contact the Board of Management and/or outside agencies e.g. NEPS/Health Service Executive. If the State Examinations are in progress, contact the State Examinations Commission (SEC) (0906 442700) as soon as possible, in order to alert the Examination and Assessment Manager (EAM) for the school.

**Q. What should I do first thing on the first morning back at school?**

- A. Call a meeting of the Critical Incident Management Team, if the school has one. If not, call a meeting of the BOM and Senior Management. Set up a team for the duration of the crisis.

**Q. What should be on the agenda for this meeting?**

- A. 1. A statement of the facts as known.  
2. Delegation of responsibilities.  
3. Preparation of what to say at a staff meeting.  
4. Preparation of what to say to students.  
5. Initial schedule for the day.  
6. Preparation of a letter to parents.  
7. Discussion of support services/agencies whose support may be needed and agreement about who will contact them.  
8. Preparation of a media statement, if appropriate.

**Q. How do I handle all the phone calls?**

- A. Staffing the telephone may be a stressful task. Assign one or two suitable people to take calls. Clear guidance should be given to those involved on what to say. An agreed factual statement should be available to the telephone operators. It can also be read or faxed to the media.

**Q. How do I keep staff up to date?**

- A. The staff room is a very important room for teachers on this day. Informal briefings can take place during the breaks, as well as more formal meetings at the beginning and end of each day.

**Q. How do I dovetail the school's part in the funeral/religious ceremonies with the wishes of the parents?**

A. The school chaplain or local clergy/parish priest will be the main link person here. Ensure that the parents' wishes are respected and that participation of any students or friends is agreed with them. Ensure that beliefs about death or particular customs about funerals of different religious groups are understood and respected.

**Q. How do I handle staff members who want to opt out?**

A. All staff would be expected to attend meetings held to disseminate information. However, it should be made clear to staff at these meetings that opting out of support type work is possible if they feel quite unable to cope. Be aware that some staff may be particularly vulnerable and watch out for them.

**Q. How do I handle the media? (See Section 8 – Dealing with the media)**

A. Delegate one suitable person to deal with the media.

Prepare a media statement.

- State that it is a difficult time for the school community
- Emphasis should be on what is being done to support staff and students
- The 'Media Guidelines for the Portrayal of Suicide' suggest that the media can help prevent copy-cat suicides by not mentioning specific details of the suicide e.g. location and method used; not using colourful phrases to romanticise it; not citing causes of suicide and thereby indirectly suggesting suicide as an option. These guidelines should be adhered to by the school in any communication with the media
- Allow limited and controlled access to the media by providing a press room
- The SEC can help if the incident is during exam time. Teacher unions, trustees of schools and management bodies may also have press officers who are able to advise, if appropriate.

**Q. What/when should I tell staff/students about the incident?**

A. Give the facts, as you know them. This is the best way to counter rumour and fantasy. It should be done as soon as possible to prevent staff and students hearing from other, sometimes inappropriate, sources.

**Q. What if I feel upset myself and find it difficult to talk?**

A. It is very important to let children know that it is natural and acceptable to be upset and to cry. It is better to share feelings with them than to hide them, so don't worry if you get upset. It may help to create a safe and open atmosphere for grief. You should also seek and accept support for yourself while dealing with this difficult event.

**Q. What if some students do not appear to grieve?**

A. Children do not need to be taught how to grieve. They will do it naturally and in healthy ways if we allow them and if we provide a safe atmosphere, permission and example to do so. Don't assume that because overt signs are absent, the person is not grieving. Each individual has his/her own personal way of grieving. It is important that these different individual ways are respected and seen as normal.

**Q. How long does it take to come to terms with bereavement?**

A. There is no definite answer to this. Each individual progresses at his/her own pace and there are enormous variations, (see **R9**).

**Q. How soon should brothers and sisters or friends who are closely involved be encouraged to return to school?**

A. They should usually return fairly quickly. They need the support of their peer group and the routine of school will offer them some sense of normality. Their presence at school will offer others an opportunity to express their grief. The sooner they return the easier it is for them to reintegrate. This advice should, however, be tempered by any particularly unusual circumstances and decisions will ultimately be made by parents/guardians.

**Q. Where a lot of well-intentioned friends are calling to the house and perhaps staying out late at night, what should I advise a grieving family to do?**

A. Encourage them to set clear limits, when friends can call and when they should leave. Often the bereaved adults need to be reminded that setting clear limits is good. Friends may stay too long because they do not know when or how to leave the house. School can help by suggesting time limits to the friends. This is especially important at exam time when rest is essential.

**Q. What can I do about phone texting or internet chatting, especially if unreliable (or inappropriate) messages are being passed about?**

A. A critical incident highlights the need for a well established school policy on this issue. Also inter-school policies are essential because the text does not respect the school boundary. All students should be advised that they are being given reliable and up-to date information by the school. They should be encouraged and advised to report to a teacher any texts, emails or internet files received which are at variance with the facts as known, or which are a cause of worry or concern - especially about friends.

## FREQUENTLY ASKED QUESTIONS

Teachers: R19

The following is a summary of questions often asked by teachers in the aftermath of a critical incident.

**Q. I would like to opt out of support type work for personal reasons. Is this OK?**

A. It has been found that their teachers are the best people to support students in school in times of distress because they need to be with people they know and trust. Accordingly, all teachers and other school staff members are encouraged to help the students at these times. However, nobody should be obliged to do this work and people should be able to opt out of it if they feel they need to. This may be for a number of reasons, including recent personal bereavement, experience of a loss similar to that occurring in the particular incident or other circumstances. However, in order to stay in touch, they would need to be in attendance at staff meetings where information is disseminated in relation to the incident.

**Q. I have no qualifications to help out in this area. Shouldn't the job should be left to the experts?**

A. You probably have more skills here than you realise. Your experience, competence and skills as a teacher and as an expert in dealing with children and young people are invaluable. Most importantly, the students know you. Students need a safe environment in which to come to terms with what has happened. This security is often enhanced by being able to discuss the events with a familiar teacher in the first instance.

**Q. What should I do in the classroom to be helpful?**

A. You should acknowledge the situation and clarify the facts, as they are known. Honesty is essential. Encourage questions so that the students have a clear understanding. You should try to establish normal routines as soon as possible – but balance this with allowing students opportunities to discuss the incident and to express their thoughts and feelings. Encourage them to resume extra-curricular activities and help them to identify where they can go to for support. Encourage them to be supportive of one another.

**Q. What are the signs of grief that I may notice in students seen?**

A. After bereavement students may have a wide range of different reactions – some may become quiet and withdrawn, while others may seem to be aggressive, irritable or angry. They may have mood swings or lack concentration. Try to handle all these 'normal' reactions with patience, do not seem surprised by them and do not get cross (see **R8**, **R9** and **R11**). If students come from a background where there is family breakdown, serious illness, alcohol or drug related or other difficulties, then you need to take extra note of any behavioural changes.

**Q. What if I think that some students are not grieving normally?**

A. There is no such thing as a 'correct' way to grieve. Some people cry, some may laugh or become giddy, some show no reaction. The important thing is that all these different ways are natural and normal and you should try to help the student understand this.

**Q. What skills do I have that are important?**

- A. Listening skills are probably the most important. People who have experienced loss or trauma generally feel that talking helps them to cope with their feelings. When you sense a student wants to talk, try to make the time. Be reassuring and patient while gently encouraging them to talk about the loss. Reassure the student that you are there to help.

**Q. Is there any one important thing I should say?**

- A. Yes – emphasise that grieving is a normal healthy process following a traumatic incident. It is the person's way of coping with the event. It is also normal for people to react in different ways – there is no 'right' way to grieve.

**Q. Is it a good idea to organise a classroom session following a critical incident?**

- A. Some schools do and they have found this to be very effective. You will find notes on leading a class session after news of an incident in **R7**. An advantage here is that students may feel safer and more secure with their regular classroom teacher rather than being with an adult they do not know.

**Q. What should I do if I feel that a student needs more professional support?**

- A. Discuss the issue with the Principal or guidance counsellor. They, in turn, may wish to discuss it with the NEPS psychologist or other support services and with the student's parents. The outcome may be a referral through the GP to the appropriate service.

**Q. What is the overall message in helping bereaved children?**

- A. *"You will get through this difficult time and we are here to help if you need support. Take care of yourself and look out for each other. Talk to us if you need help or if you think a friend is in difficulty".*

**Q. When should I get back to a normal teaching routine with a class?**

- A. It is important to give students sufficient time and space to share their feelings and to come to terms with what has happened. However, it is also important to move towards a normal routine as soon as possible. Getting on with the regular and familiar pattern of school life helps reduce stress. Avoid introducing new material in the immediate aftermath of an incident or bereavement, as grief and shock can interfere with concentration and motivation. It is often a good idea to consult the students themselves about returning to the normal routine.

**Q. What do I do about the empty chair/a student's belongings etc?**

- A. A helpful strategy might be to involve students in a discussion about what to do about the chair. This might also present an opportunity to move to a new phase in the process. With regard to the student's belongings, it might be useful to put together a folder or a 'memory box' of the student's work for the parents. This can be given to them at an appropriate time.

**Q. Is there a danger that by talking about suicide you make it appear to be an option for others?**

- A. Talking about the death helps people to make sense of what has happened. People can cope with the truth, but **suicide must never be represented as a valid option**. There should be no criticism of the person who has died. Separate the person from the

behaviour. It is important to talk about how a person can get to the point where suicide may *seem* to be the only option but **emphasise that it is not a good option**. Feeling low is usually a temporary thing, whereas suicide is permanent. With suicide the intention may have been to change life circumstances rather than end life. There is always help available if a person can take the step of reaching out for it. Encourage students to seek help if they need it.

### Notes



## FREQUENTLY ASKED QUESTIONS

Parents: R20

The following is a summary of questions frequently asked by parents after a critical incident.

**Q. This incident has upset my daughter/son. As there are many rumours circulating, I would like to know what really happened. How can I find that information?**

A. The school will inform students and parents of the core details of the incident insofar as they are known. It sometimes takes some time for the true facts to emerge. In the meantime, it is important to stick to the facts as known. Discourage rumour or gossip as it is often incorrect and can be distressing for the families and friends of those involved.

**Q. Will help be available to the students in the school?**

A. This will depend on the particular situation. The school will usually put a plan in place for supporting students. This support may include classroom discussion, small group discussion or individual support for students who need it. This support may be offered by school staff themselves, or by staff of other agencies. If there is particular concern about your son or daughter, you will be informed.

**Q. How can I help my child?**

A. You are the natural support for your child. He/she may want to discuss their feelings and thoughts with you. You can help by listening carefully. You should tell them it is ok to feel the way they do, that people react in many different ways and that they should talk rather than bottle things up.

**Q. How long will the grief last?**

A. There is no quick answer to this. It varies from individual to individual and according to circumstances. It will also be affected by the closeness of the child to the event or to person who died. Memories of other bereavements may also be brought up by the incident. Be patient and understanding. It can take time.

**Q. Since the incident occurred my child has difficulty in sleeping, complains of headaches etc. Can I be sure these are related to the incident?**

A. Grief can affect one physically as well as emotionally and these and other symptoms may be part of a grief reaction. If they persist, consult a doctor for a check up.

**Q. If my child remains very upset what should I do?**

A. If your child remains distressed after a period of six weeks or so, he/she may need additional support, but there is no fixed rule about the length of the grieving process. If you are very concerned at any point, it is best to seek more help through your GP/Child and Family Centre/CAMHS.

**Q. In what ways are adolescents different from other children?**

A. During adolescence there are a lot of changes going on for young people and some may feel confused about themselves and the world around them. Grief tends to heighten these feelings and increase the confusion. At this time, too, the individual may look more to friends than to family for support and comfort. Don't feel rejected by this. Just

be available to listen when they need to talk and make sure they know you are there for them when they need you.

### Notes



## CRITICAL INCIDENT POLICY & PLAN - FRAMEWORK

### Resource for schools: R21

The key to managing a critical incident is planning. Schools are strongly advised to develop a policy in relation to critical incident response. NEPS also encourages schools to develop a Critical Incident Management Plan, outlining who will do what in the event of a tragedy.

The templates outlined below are designed as an aid to schools in drawing up a policy and plan. Each school will need to look at its own particular context and circumstances and draw up its own unique policy and plan.

## CRITICAL INCIDENT POLICY

### Initiate and establish structures

Establish a Critical Incident Management Team (CIMT) which will take responsibility for putting a Critical Incident Management policy and plan in place (CIMP)

*Name of school* aims to protect the well being of its students and staff by providing a safe and nurturing environment at all times. (Make reference to the school's mission statement). The Board of Management, through *name of Principal*, has drawn up a critical incident management plan as one element of the school's policies and plans.

Our aim is to establish a Critical Incident Management Team (CIMT) to steer the development and implementation of the plan.

### Review and Research

The CIMT should consult resource documents provided to schools as well as publications listed in the resources section of this book.

These include:

*When Tragedy Strikes: Guidelines for Effective Critical Incident Management in Schools* (INTO/Ulster Teachers Union 2000)

*Responding to Critical Incidents; Guidelines for Schools* (NEPS 2007)

*Guidelines for Schools on How to Respond to the Sudden Unexpected Death of a Student* (ASTI 1997)

*Suicide Prevention in Schools: Best Practice Guidelines* (IAS, National Suicide Review Group 2002)

### Define what you mean by the term 'critical incident'

The staff and management of *Name of school* recognise a critical incident to be "an incident or sequence of events that overwhelms the normal coping mechanism of the school". Critical incidents may involve one or more students or staff members, or members of our local community. Types of incidents might include (make your own list, but some suggestions follow):

- *The death of a member of the school community through accident, violence, suicide or suspected suicide or other unexpected death*
- *An intrusion into the school*
- *An accident involving members of the school community*
- *An accident/tragedy in the wider community*
- *Serious damage to the school building through fire, flood, vandalism, etc*
- *The disappearance of a member of the school community*

## **Aim**

The aim of the CIMP is to help school management and staff to react quickly and effectively in the event of an incident, to enable us to maintain a sense of control and to ensure that appropriate support is offered to students and staff. Having a good plan should also help ensure that the effects on the students and staff will be limited. It should enable us to effect a return to normality as soon as possible.

## **Creation of a coping supportive and caring ethos in the school**

We have put systems in place to help to build resilience in both staff and students, thus preparing them to cope with a range of life events. These include measures to address both the physical and psychological safety of the school community.

### **Physical safety**

Include some specific examples of what the school is doing at this point. You might also refer to your Health & Safety policy

- Evacuation plan formulated
- Regular fire drills occur
- Fire exits and extinguishers are regularly checked
- Pre-opening supervision in the school yard (possibly include details)
- Front gate locked during school hours
- School doors locked during class time
- Rules of the playground – include details

### **Psychological safety**

The management and staff of *Name of school* aim to use available programmes and resources to address the personal and social development of students, to enhance a sense of safety and security in the school and to provide opportunities for reflection and discussion.

Include specific examples as appropriate. Some suggestions follow:

- Social, Personal and Health Education (SPHE) is integrated into the work of the school. It is addressed in the curriculum by addressing issues such as grief and loss; communication skills; stress and anger management; resilience; conflict management; problem solving; help-seeking; bullying; decision making and prevention of alcohol and drug misuse. Promotion of mental health is an integral part of this provision
- Staff have access to training for their role in SPHE

- Staff are familiar with the Child Protection Guidelines and Procedures and details of how to proceed with suspicions or disclosures
- Books and resources on difficulties affecting the primary/post primary school student are available
- Information is provided on mental health in general and such specific areas as signs and symptoms of depression and anxiety
- Staff are informed in the area of suicide awareness and some are trained in interventions for suicidal students
- The school has developed links with a range of external agencies – list these agencies
- Inputs to students by external providers are carefully considered in the light of criteria about student safety, the appropriateness of the content, and the expertise of the providers. (See Section 7 of *Responding to Critical Incidents: Guidelines for Schools*)
- The school has a clear policy on bullying and deals with bullying in accordance with this policy
- There is a care system in place in the school
- Students who are identified as being at risk are referred to the designated staff member (e.g. guidance counsellor or support teacher), concerns are explored and the appropriate level of assistance and support is provided. Parents are informed, and where appropriate, a referral is made to an appropriate agency
- Staff are informed about how to access support for themselves.

### **Critical Incident Management Team (CIMT)**

A CIMT has been established in line with best practice. The members of the team were selected on a voluntary basis and will retain their roles for at least one school year. The members of the team will meet annually to review and update the policy and plan. Each member of the team has a dedicated critical incident folder. This contains a copy of the policy and plan and materials particular to their role, to be used in the event of an incident.

### **Preparation of CIMP**

#### **Roles**

Schools need to make arrangements for assigning roles, taking account of such practical issues as school size and the number of staff available. Many schools will do some doubling up of roles. Schools might wish to consider including one or more members of the BOM on the team as well as members of the school's care team if there is one in place.

The key roles which need to be covered are as follows:

- Team Leader
- Garda liaison
- Staff liaison.
- Student liaison
- Parent liaison
- Community liaison
- Media liaison
- Administrator

Outlined below are some points on the key responsibilities of each role. A note on helpful qualities for each role can be found in the text box. However, each school will have to adapt these suggestions to their own circumstances and needs.

### **Team leader**

- Alerts the team members to the crisis and convenes a meeting
- Coordinates the tasks of the team
- Liaises with the Board of Management; DES; NEPS; SEC
- Liaises with the bereaved family

A person who carries authority and can make decisions during a crisis (e.g., school closure, attendance at memorial services, etc.)

It is important to consider who will take the lead in the absence of the team leader.

### **Garda liaison**

(This may be seen as part of the team leader's role)

- Liaises with the Gardaí
- Ensures that information about deaths or other developments is checked out for accuracy before being shared

### **Staff liaison**

- Leads briefing meetings for staff on the facts as known, gives staff members an opportunity to express their feelings and ask questions, outlines the routine for the day
- Advises staff on the procedures for identification of vulnerable students
- Provides materials for staff (from their critical incident folder)
- Keeps staff updated as the day progresses
- Is alert to vulnerable staff members and makes contact with them individually
- Advises them of the availability of the EAS and gives them the contact number.

A staff member known and trusted by the staff

### **Student liaison**

- At post-primary level, may co-ordinate information from tutors and year heads about students they are concerned about
- Alerts other staff to vulnerable students (appropriately)
- Provides materials for students (from their critical incident folder)
- Keeps records of students seen by external agency staff
- Looks after setting up and supervision of 'quiet' room where agreed

A trusted and familiar figure to the students. A bigger school may need a number of such people

### **Community/agency liaison**

- Maintains up to date lists of contact numbers of
  - Key parents, such as members of the Parents Council
  - Emergency support services and other external contacts and resources
- Liaises with agencies in the community for support and onward referral
- Is alert to the need to check credentials of individuals offering support
- Coordinates the involvement of these agencies

Someone with good contacts with agencies and relevant individuals in the community

- Reminds agency staff to wear name badges
- Updates team members on the involvement of external agencies

### Parent liaison

- Visits the bereaved family with the team leader
- Arranges parent meetings, if held
- May facilitate such meetings, and manage 'questions and answers'
- Manages the 'consent' issues in accordance with agreed school policy
- Ensures that sample letters are typed up, on the school's system and ready for adaptation
- Sets up room for meetings with parents
- Maintains a record of parents seen
- Meets with individual parents
- Provides appropriate materials for parents (from their critical incident folder)

Someone known to parents. This person should be comfortable speaking before a large group and have skills to manage emotional reactions of individual or groups of parents

### Media liaison

- In advance of an incident, will consider issues that may arise and how they might be responded to (e.g. students being interviewed, photographers on the premises, etc)
- In the event of an incident, will liaise where necessary with the SEC; relevant teacher unions etc.
- Will draw up a press statement, give media briefings and interviews (as agreed by school management)

Someone with good interpersonal skills who would be comfortable talking to the media by phone or in person. A person who is able to set limits without being offensive

### Administrator

- Maintenance of up to date telephone numbers of
  - Parents or guardians
  - Teachers
  - Emergency services
- Takes telephone calls and notes those that need to be responded to
- Ensures that templates are on the schools system in advance and ready for adaptation
- Prepares and sends out letters, emails and faxes
- Photocopies materials needed
- Maintains records

### Record keeping

In the event of an incident each member of the team will keep records of phone calls made and received, letters sent and received, meetings held, persons met, interventions used, material used etc.

*Name of school secretary* will have a key role in receiving and logging telephone calls, sending letters, photocopying materials, etc.

### Confidentiality and good name considerations

The management and staff of *name of school* have a responsibility to protect the privacy and good name of the people involved in any incident and will be sensitive to the consequences of any public statements. The members of the school staff will bear this in

mind, and will seek to ensure that students do so also. For instance, the term 'suicide' will not be used unless there is solid information that death was due to suicide, *and* that the family involved consents to its use. The phrases 'tragic death' or 'sudden death' may be used instead. Similarly, the word 'murder' should not be used until it is legally established that a murder was committed. The term 'violent death' may be used instead.

### **Critical incident rooms**

In the event of a critical incident,  
*name room* will be the main room used to meet the staff  
*name room(s)* for meetings with students  
*name room* for parents  
*name room* for media  
*name room* for individual sessions with students  
*name room* for other visitors

### **Consultation and communication regarding the plan**

All staff were consulted and their views canvassed in the preparation of this policy and plan. Students and parent representatives were also consulted and asked for their comments.

Our school's final policy and plan in relation to responding to critical incidents has been presented to all staff.

Each member of the critical incident team has a personal copy of the plan.

All new and temporary staff will be informed of the details of the plan by *Name of team member*

The plan will be updated annually (*name month .....*)

## CRITICAL INCIDENT MANAGEMENT TEMPLATE FOR SCHOOL PLAN

Resource for schools: R22

### Critical Incident Management Team

| Role              | Name | Telephone number<br>(home and mobile) |
|-------------------|------|---------------------------------------|
| Team Leader       |      |                                       |
| Garda Liaison     |      |                                       |
| Staff Liaison     |      |                                       |
| Student Liaison   |      |                                       |
| Parent Liaison    |      |                                       |
| Community Liaison |      |                                       |
| Media Liaison     |      |                                       |
| Administrator     |      |                                       |

### Short term actions – Day 1

| Task   | Name      |
|--|-----------|
| Gather accurate information  |           |
| Who, what, when, where?  |           |
| Convene a CIMT meeting – specify time and place clearly  |           |
| Contact external agencies  |           |
| Arrange supervision for students   |           |
| Hold staff meeting   | All staff |
| Agree schedule for the day   |           |
| Inform students – (close friends and students with learning difficulties may need to be told separately) |           |
| Compile a list of vulnerable students  |           |

|   |  |
|---|--|
| Contact/visit the bereaved family                     |  |
| Prepare and agree media statement and deal with media |  |
| Inform parents  |  |
| Hold end of day staff briefing                        |  |

### Medium term actions - (Day 2 and following days)

|  |             |
|--|-------------|
|  |             |
| Convene a CIMT meeting to review the events of day 1       | Team leader |
| Meet external agencies                                     |             |
| Meet whole staff   |             |
| Arrange support for students, staff, parents               |             |
| Visit the injured  |             |
| Liaise with bereaved family regarding funeral arrangements |             |
| Agree on attendance and participation at funeral service   |             |
| Make decisions about school closure                        | BOM         |

### Follow-up – beyond 72 hours

|  |                                 |
|--|---------------------------------|
|  |                                 |
| Monitor students for signs of continuing distress  | Class teachers                  |
| Liaise with agencies regarding referrals           |                                 |
| Plan for return of bereaved student(s)             |                                 |
| Plan for giving of 'memory box' to bereaved family |                                 |
| Decide on memorials and anniversaries              | BOM/Staff, parents and students |
| Review response to incident and amend plan         | Staff/BOM                       |

## EMERGENCY CONTACT LIST

Resource for schools: R23

(To be displayed in staff-room, school office and Principal's office etc)

| <b>AGENCY</b>  | <b>CONTACT NUMBERS</b> |
|--|------------------------|
| <b>GARDA</b>   |                        |
| <b>HOSPITAL</b>  |                        |
| <b>FIRE BRIGADE</b>  |                        |
| <b>LOCAL GPS</b>   |                        |
| <b>HSE/Community Care Team/ Child and Family Centre/ CAMHS</b> |                        |
| <b>SCHOOL INSPECTOR</b>  |                        |
| <b>NEPS PSYCHOLOGIST</b>                                       |                        |
| <b>DES</b>   |                        |
| <b>INTO/ASTI/TUI</b>   |                        |
| <b>PARISH PRIEST/CLERGY</b>                                    |                        |
| <b>STATE EXAMS COMMISSION</b>                                  |                        |
| <b>EMPLOYEE ASSISTANCE SERVICE</b>                             | 1800 411 057           |

## SUGGESTED READINGS AND RESOURCES

NEPS has identified the following resources which schools may find helpful. However, all materials should be reviewed at school level to ensure that they conform to school ethos and policy before they are used.

We have not listed all the resources developed in the health service regions but would advise schools to link with their SPHE support team and suicide preventions officers for up-to-date information on resources and training. Contact details can be found for SPHE Regional Development Officers on the SPHE website [www.sphe.re](http://www.sphe.re) and for Suicide Prevention Officers on the NOSP website, [www.nosp.ie](http://www.nosp.ie).

### BOOKS FOR CHILDREN

#### **When Uncle Bob Died (children under 5)**

Althea (2001)

Publisher: Happy Cat Books

#### **The Goodbye Boat (age 3-7)**

Mary Joslin (1999)

Publisher: Lion Publishing

#### **Rosie: Coming to Terms with the Death of a Sibling (age 4-7)**

Stephanie Jeffs, Sue Doggett, and Jacquie Thomas (2005)

Publisher: Abingdon Press

#### **Josh: Coming to Terms with the Death of a Friend (age 4-7)**

Stephanie Jeffs and Jacqui Thomas (2006)

Publisher: Barnabas

#### **Best Friends: Holly and Jake Going Through Life Changes Together (age 4-6)**

Ann Keating (2001)

Publisher: Our Lady's Hospice, Dublin

#### **Gentle Willow. A Story for Children about Dying (age 4-7)**

J.C. Mills (1993)

Publisher: Magination Press, New York

#### **Remembering Mum (age 4-11)**

Ginny Perkins and Leon Morris (1996)

Publisher: A&C Black

#### **What On Earth Do You Do When Someone Dies? (age 7-11)**

Trevor Romain and Elizabeth Verdick (1999)

Publisher: Free Spirit Publishing

#### **It Must Hurt A Lot. A Child's Book About Death (age 5-9)**

Doris Sandford (1985)

Publisher: Multnomah Press

**Waterbugs and Dragonflies (age 4-7)**

Doris Stickney (2004)

Publisher: Continuum International Publishing Group

**Helping Children Heal From Loss: A keepsake book of special memories (age 4-12)**

Laurie Van-Si & Lynn Powers (1994)

Publisher: Portland State University

**Badger's Parting Gifts (age 5-10)**

Susan Varley (1994)

Publisher: Picture Lions

**Charlotte's Web (age 7-11)**

E B White (2003)

Publisher: Puffin Books

## WORKBOOKS FOR CHILDREN

**When Someone Very Special Dies: Children Can Learn to Cope with Grief (age 6-12)**

Marge Heegaard (1991)

Publisher: Woodland Press, Minneapolis

**Talking With Children and Young People About Death and Dying: A Workbook**

Mary Turner (1998)

Publisher: J. Kingsley, London

**Good Grief: Exploring Feelings, Loss and Death with Under Elevens. A Holistic Approach**

Barbara Ward & Associates (1996)

Publisher: Jessica Kingsley

## RESOURCES SUITABLE FOR CONSULTATION OR FOR WORKING WITH TEENAGERS

**Deliberate Self-harm in Adolescence**

Claudine Fox and Keith Hawton (2000)

Publisher: Jessica Kinglsey

**When a Friend Dies – A Book for Teens About Grieving and Healing**

Marilyn Gootman (1994)

Publisher: Free Spirit Publishing

**Straight Talk about Death for Teenagers**

Earl Grollman (1993)

Publisher: Beacon Press

### **Good Grief. Exploring Feelings, Loss and Death with Over Elevens and Adults. A Holistic Approach**

Barbara Ward and Associates (1996)

Publisher: Jessica Kingsley

### **Healing Your Grieving Heart for Teens: 100 Practical Ideas**

Alan D.Wolfelt (2001)

Publisher: Companion Press

## **RESOURCES FOR CHILDREN WITH LEARNING DISABILITIES**

### **Loss and Learning Disability**

Noelle Blackman (2003)

Publisher: Worth Publishing

### **Understanding Death and Dying. A Guide for Carers and Other Professionals**

(Part of a set of 3 booklets for people with learning disabilities)

Fiona Cathcart (1994)

Publisher: Worcestershire, British Institute of Learning Disabilities

### **Guidebook on Helping Persons with Mental Retardation Mourn. The Everlasting Things in Life and Death**

Jeffrey Kauffman (2005)

Publisher: Baywood Publishing Company

## **RESOURCES FOR PARENTS**

### **Beyond the Rough Rock: Supporting a Child who has been Bereaved Through Suicide**

D Crossley and J Stokes (2002)

Publisher: Winstons Wish, Cheltenham

### **How do we tell the children: A Step-by-Step Guide for Helping Children Cope when Someone Dies**

Dan Schafer, and Christine Lyons (2002)

Publisher: Newmarket Press

### **When Parents Separate: Helping your Children Cope**

Sharry, John & Reid, Peter & Donohue, Eugene (2001)

Publisher: Veritas Publications, Abbey Street, Dublin

### **Caring for your Grieving Child: Engaging Activities for Dealing with Loss and Transition**

Martha Wakenshaw (2002)

Publisher: New Harbinger Publications

## **RESOURCES FOR SCHOOLS**

### **Guidelines for Schools on How to Respond to the Sudden Unexpected Death of a Student**

ASTI (1997)

### **Coping with a Major Crisis**

City of Dublin VEC Psychological Services

### **When Something Terrible Happens...**

City of Dublin VEC Psychological Service

### **Grief at School. A Manual for School Personnel**

Helen Fitzgerald, Kitty Kaczmarek (2003)

Publisher: Washington, D.C. American Hospice Foundation

### **Wise Before the Event: Coping with Crises in Schools**

Anne Gold, William Yule (1993)

Publisher: London, Calouste Gulbenkian Foundation

### **The Hospice Pack: A Resource Pack for Teachers.**

Hospice and Palliative Care for Citizenship PSHE/PSD (2003)

Publisher: London, Help the Hospices

### **Death and Dying: A Resource Pack**

Noirin Hynes and Margarita Synott

Available from the Marino Institute of Education

### **Suicide Prevention in Schools: Best Practice Guidelines**

National Suicide Review Group (2002)

Connaught Telegraph, Castlebar

### **When Tragedy Strikes: Guidelines for Effective Critical Incident Management in Schools**

INTO/Ulster Teacher Union (2000)

### **Death and Loss – Compassionate Approaches in the Classroom**

Oliver Leaman (1995)

Publisher: Cassell

### **Suicide Bereavement and Loss: Perspective and Responses**

Luke Monaghan (1999)

Publisher: IAPCE, Marino Institute of Education, Dublin

### **Childhood Bereavement – Developing the Curriculum and Pastoral Support**

Nina Job and Frances Gill (2004)

Publisher: National Children's Bureau

### **Echoes of Suicide**

Siobhan Foster Ryan and Luke Monaghan (2001)

Publisher: Veritas Publications, Dublin

### **A Student Dies, a School Responds**

Mid-Western Health Board (2001)

## RESOURCES FOR PSYCHOLOGISTS, TEACHERS AND OTHER PROFESSIONALS

### **Implementing Mental Health Promotion (2006)**

Barry, M and Jenkins, R.

Publisher: Elsevier, Oxford

### **Healing Children's Grief – Surviving a Parent's Death from Cancer.**

Grace Christ (2000)

Publisher: Oxford University Press

### **Handbook of Childhood Death and Bereavement**

C.A. Corr, & D.M. Corr (Eds.) (1996)

Publisher: New York, Springer

### **Someone to Talk to: A Handbook on Childhood Bereavement**

Pat Donnelly (2001)

Publisher: NCRC, Barnardos

### **Children & Disasters**

N.S Gordon, N.L. Farberow, & C.A.Maida (1999)

Publishers: Philadelphia, Burnner/Mazel

### **Helping Children Cope with Disasters and Terrorism**

A.M. La Greca, W.K. Silverman, E.M. Vernberg & M.C. Roberts (2002)

Publisher: American Psychological Association

### **Helping Children Cope with Separation and Loss**

Claudia L. Jewett (1997)

Publisher: Batsford

### **The Forgotten Mourners: Guidelines for Working with Bereaved Children**

Susan C. Smith (1999)

Publisher: Jessica Kingsley

### **Someone very Important has just Died: Immediate Help for People Caring for Children of All Ages at the Time of a Close Bereavement**

Mary Turner (2005)

Publisher: Jessica Kingsley

### **Helping Bereaved Children: A Handbook for Practitioners**

N. Boyd Webb (1993)

Publisher: Guilford Press

### **Healing a Child's Grieving Heart for Kids: 100 Practical Ideas for Families, Friends and Caregivers**

Alan D. Wolfelt (2001)

Publisher: Companion Press

**A Student Dies, a School Responds: A guide for post-primary schools**  
Mid-Western Health Board (2001)

## RESOURCES ON SUICIDE

### **Living When a Young Friend Commits Suicide**

Earl A. Grollman and Max Malikow (1999)  
Publishers: Beacon, Boston

### **A Special Scar: The Experience of People Bereaved by Suicide**

Alison Wertheimer (2001)  
Publisher: Brunner-Routledge, Philadelphia

**Reach Out: National Strategy for Action on Suicide Prevention (2005)**  
[www.hse.ie/en/publications](http://www.hse.ie/en/publications)

**Young People's Mental Health: A report of the results from the Lifestyle and Coping Survey, (2004)**  
Publisher: National Suicide Research Foundation

**Suicide Awareness: An Information Pack for Post-primary Schools**  
South Eastern Health Board (2003)

**You are Not Alone: Directory of Bereavement Support Services**  
Publisher: National Office for Suicide Prevention, Dublin (2007)

**You are Not Alone: Help and Advice on Coping with the Death of Someone Close**  
Publisher: National Office for Suicide Prevention, Dublin (2007)

**Mental Health Matters: A Mental Health Resource Pack**  
Publisher: Mental Health Ireland (2001) Email [info@mhai.ie](mailto:info@mhai.ie)

**Youth Suicide Prevention in Schools: A Practical Guide**  
New Zealand Youth Suicide Prevention Strategy (2003)  
Publisher: Ministry of Youth Affairs, Wellington, New Zealand  
[www.youthaffairs.govt.nz](http://www.youthaffairs.govt.nz)

## TRAINING

**ASIST Training:** ASIST (Applied Suicide Intervention Skills Training) is a two-day interactive workshop in suicide first-aid. It is suitable for all kinds of caregivers - health workers, teachers, community workers, Gardaí, youth workers, volunteers, people responding to family, friends and co-workers. It is free of charge. If you'd like to make a difference in your community, you may wish to come to ASIST and learn how to help. Information can be obtained on the website of the National Office for Suicide Prevention [www.nosp.ie](http://www.nosp.ie)

## USEFUL WEBSITES

**The Childhood Bereavement Network** (CBN) is a multi-professional federation of organisations and individuals working with bereaved children and young people. [www.childhoodbereavementnetwork.org.uk](http://www.childhoodbereavementnetwork.org.uk)

**Cruse Bereavement Care** exists to promote the well-being of bereaved people and to enable anyone bereaved by death to understand their grief and cope with their loss. [www.crusebereavementcare.org.uk](http://www.crusebereavementcare.org.uk)

The **Social, Personal and Health Education Support Service** (Post-Primary), based in Marino Institute of Education, supports the implementation of SPHE at Post Primary. An SPHE support team is located in each of the old Health Board areas. Supports offered to schools include in-service for Principals, co-ordinators, teachers of SPHE, whole staff groups; programme planning; school policy development; school visits and support for on the development of a 'health promoting school'. For further information or assistance contact the [SPHE support team](#) in your region. Contact details can be found on [www.sphe.ie](http://www.sphe.ie). This site also lists a wide range of resources for schools

The **National Office for Suicide Prevention** (NOSP) was established to oversee the implementation of 'Reach Out' the National Strategy for Action on Suicide Prevention, and to co-ordinate suicide prevention efforts around the country. The NOSP works closely with the HSE **Suicide Prevention Officers**. Up-to-date contact details for suicide prevention officers can be found on the NOSP website [www.nosp.ie](http://www.nosp.ie)

The **Irish Association for Suicidology** (IAS) sets out to be a forum for all individuals and voluntary groups involved in any aspect of suicidology for the exchange of knowledge gained from differing perspectives and experiences [www.ias.ie](http://www.ias.ie)

Irish Hospice Foundation - [www.hospice-foundation.ie](http://www.hospice-foundation.ie)

Lifelines supports all people who are affected in anyway by self injury within the United Kingdom and beyond. It supports people who self injure, and their family and friends. [www.selfharm.org](http://www.selfharm.org)

Winstonswish Foundation , help for grieving children and their families. [www.winstonswish.org.uk](http://www.winstonswish.org.uk)

Resources and support for those dealing with suicide, depression or emotional distress, particularly teenagers and young adults. [www.papyrus-uk.org](http://www.papyrus-uk.org)

A national charity committed to improving the mental health of all children and young people. [www.youngminds.org.uk](http://www.youngminds.org.uk)

An Irish website covering all aspects of health, lifestyle, culture and craic. It's an online youth information centre, a magazine, a health clinic, a contact directory, a youth media forum a take action initiative, a community building place and lots more.

[www.spunout.ie](http://www.spunout.ie)

A site that focuses on issues relating to youth in Ireland today. [www.youth.ie](http://www.youth.ie)

An Australian site that helps young people through tough times. [www.reachout.com.au](http://www.reachout.com.au)

**Mental Health Ireland** aims to promote positive mental health and to actively support persons with a mental illness, their families and carers by identifying their needs and advocating their rights. The pro teen matters web magazine, which is created by young people for young people, has information about physical and mental health, frequently asked questions, competitions, jokes and stories. [www.mentalhelathireland.ie](http://www.mentalhelathireland.ie)

Non-judgemental information and support. [www.gayswitchboard.ie](http://www.gayswitchboard.ie)

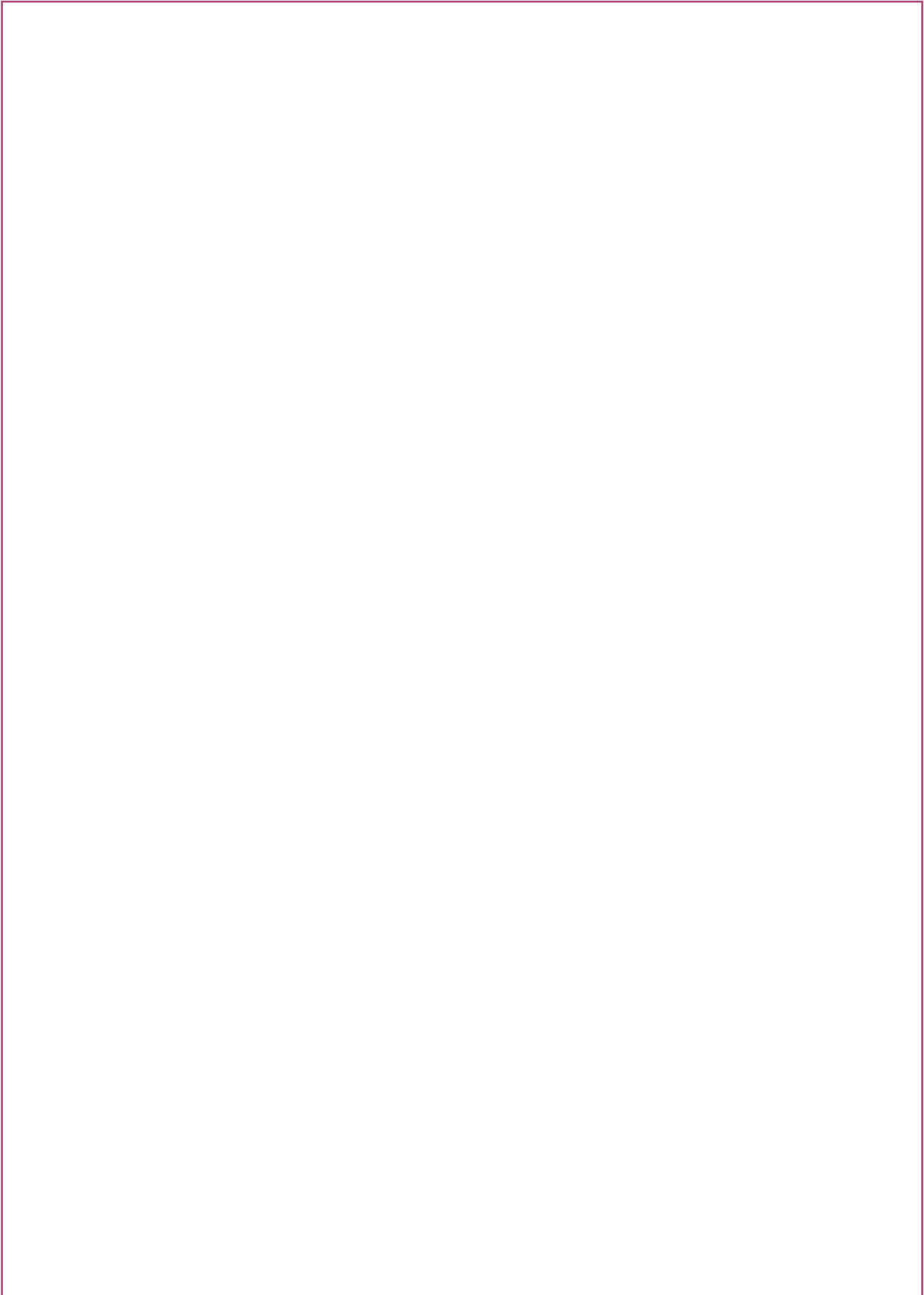
## HELP LINES

**Remind students that if they need someone to talk to, at any time of the day or night, they can ring either:**

**Childline:** 1800 666 666 (Free calls)

**The Samaritans:** 1850 60 90 90 (Local call cost)

## Notes



**Notes**

