CONTEXT

Due to the fact that the School is a major part of student and staff social systems it is to be expected that critical incidents may occur from time to time.

We need to be prepared for such occasions if and when they do arise; and be willing and able to provide positive support for all members of the School community.

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Definition

A crisis can consist of four main characteristics

- Sudden onset.
- The individual, family or group is not adequately prepared to handle the event.
- Crises are usually short in duration.
- Crises have the potential to disrupt, at least temporarily, the functioning of individuals or communities.

A traumatic incident is defined as an extraordinary event, which is sudden, overwhelming, and can cause significant distress.

Aims of this Policy are:

1. To provide an organised response to the critical incident.
2. To provide support/assistance for those affected.
3. To return the School to its usual routine as soon as possible.
4. To organize communication between appropriate groups.
Short Term Tasks

1. Phone DE&T emergency number if a major incident such as a bus crash, suicide, fire, siege etc. No. (03) 95896266 (All emergency numbers are listed above phones).

2. **Contact Central Wimmera Network** 53525644 Mobile 018 501 864 Fax 53525646. **Grampians Regional Director** 53378452/53378444 Fax 53332135 **Police** 53522233 (PLEASE REPLACE WITH LOCAL CONTACT DETAILS)

3. Call meeting of Critical Incident Response Team, Principal, Assistant Principal, Chaplain and or Nurse, District Psychologist/Social Worker and relevant Year Level Coordinator to plan first steps and determine who is to be in charge. Consider what level of response is needed.

4. Obtain greater detail about the situation – (See page 6)

5. Identify a designated Counselling/Recovery area and provide comfortable chairs, tea, coffee etc. and Counsellor where applicable.

6. Make contact with parents or closest relatives to offer help. Notify siblings after having checked with parents.

7. Call a staff meeting, including support staff. (See page 6) Also, hold a debriefing at end of day. Contact staff at home if required individually.

8. Distribute copies of “Advice to Counsellors” to those teachers counselling students and provide guidance for teachers of class/es most affected. (See page 7)

9. Distribute “Reactions to Trauma: Information for teachers and Parents”. (See page 8)

10. Arrange an assembly, if appropriate, and/or preferably allow for teachers who are most familiar with the students, such as year level teachers, to make the announcement.

11. Prepare a letter to all parents/students, if appropriate (See page ) Need to develop sample.

12. Provide ongoing support for students affected – contacting social worker etc.

13. Provide support for staff affected.

14. **Identify a Media person, usually the Principal, with an agreed set format. All media comment should pass through this person.** (See page 9)

15. Instruct office staff on how to handle phone calls and who is responsible for various aspects of the program.

16. Establish liaison with other agencies; Police, Church, Fire Brigade, SES, etc.

17. Organise any changes to timetable or planned excursions.

18. Identify students not present on the day and ensure they are fully informed on the morning they return and contact staff prior to their return if possible.
Medium Term Tasks

1. Continue to monitor reactions within the School. Anticipate the support procedures likely to be necessary over the next few weeks, after inquests etc. Monitor absences.

2. Write item for School newsletter, if appropriate.

3. Update staff and students with new information.

4. Keep parents informed – consider a forum for parents if needed.

5. Write an official note for School Council.

6. Organise record keeping in case of further legal action. Get statements in writing if not already undertaken by police.

7. Consider preparation of School Community for funeral arrangements if applicable; students going, those remaining, emergency teachers etc.

8. Plan some commemoration. Involve students in planning and prepare them thoroughly if a funeral is involved. Be aware that counselling may be required after the funeral.

9. Contact Regional Director with details of situation.

10. Be alert for later reactions to legal proceedings, inquests etc.

11. Keep a record of expressions of sympathy, condolences, offers of help for a later response.

12. Attempt to get the School back to normal school routine, still allowing, however, for students/staff affected by the trauma.

13. Monitor and support those in caregiver roles.
Long Term Tasks

1. Monitor and support members of the School community, particularly on significant dates.
2. Consider a ritual marking of significant dates.
4. Reconvene key people to review response make and modify Post Trauma plan if necessary.
5. Continue liaison with outside agencies if necessary.
6. Prepare for legal proceedings if necessary.

Crisis Management Plan – Day 1

- Principal → Organises trauma committee
- Contacts family
- Contacts police
- Liaises with media
- Briefs staff
- Informs student

- Trauma Committee → Allocation of tasks

- Staff Meeting → Briefing
- Counsellor input on grief reactions
- Relief for distressed staff
- Prepare information for students
- Monitoring student behaviour
- Access to recovery area
- Possible withdrawal of special friends (home if supervised).

- Continued updates to staff

- Staff meeting at end of day → Debriefing
- Support and Planning
When an Incident Occurs

Collect the following information

- What happened and when?
- Who was involved?
- Who was directly at the scene?
- Who witnessed the event and what did they see?
- Who knows about the incident?
- Have parents been contacted?
- Are there siblings at school?
- Are there close relatives at this school?
- What has been done so far?
- Is anyone in hospital? If so, where?
- Has there been police involvement? If so, who was the attending officer?
- Have other agencies been involved?
- Have neighbouring schools been contacted?

Staff Meeting

1. Provide facts. Identify what information is to be released to students/community.
2. Tell School strategies for dealing with and committee’s plan for dealing with incident.
3. Invite information about students who may need support.
4. Explain types of reactions students may experience.
5. Discuss how staff can explain the situation to their classes.
6. Give permission for staff to be flexible with class rules, eg. leaving classes if upset. Student or teacher?
7. Identify recovery area.
8. Explain that they, as teachers, may have different reactions to the situation and may need support.
9. Explain and distribute prepared statement on “Psychological First Aid for Victims”.
10. Suggest sources of personal support for teachers – resources available.
11. Request their support in dealing with the media. Prevent media access to any students. Direct ALL media to the Principal’s office.
12. Stress the role that each staff member may be asked to play a role as a support person. It should not be assumed that the Trauma Committee will be the only caregivers.
Advice to Counsellors

Psychological First Aid for Those Directly Affected

1. Find a comfortable, private place for the counselling session.
2. Provide space and time for personal reaction.
3. Facilitate reassurance about others.
4. Provide protection from intrusion of others; from the media.
5. Listen to their concerns. Do not assume you have to solve the problem.
7. Identify the realistic limitations of what could be done to prevent it.
8. Explain what the School is doing about it.
9. Explain normal reactions to similar situations.
10. Offer alternative sources of support and/or advice.
11. Allow emotional responses.
12. Maintain calm.
13. Show belief.
15. Find a support structure for the student, perhaps a group of friends.
16. Be warm, caring, non-judgmental and honest.
17. Discourage students from making major decisions in response to the traumatic incident – at least in the immediate aftermath.

Unhelpful styles of “assisting” those directly involved

- Being authoritarian – telling them how they should feel or making decisions for them.
- Brushing aside feelings in order to get down to business.
- Being over protective, encouraging wallowing, showing excess pity or sympathy.
- Being reactive / escapist – “I don’t want to know about it”.
- Making false promises.
- Being judgmental.
Reactions to Trauma

Information for teachers and parents

When trauma strikes, our usual way of coping and behaving can be thrown into turmoil. It is helpful to know that many of the unaccustomed reactions and emotions being shown are generally NORMAL reactions to ABNORMAL events.

Some common reactions following Trauma

In Upper Primary School Children
- Preoccupation with their own actions during the event.
- Specific fears triggered by traumatic reminders.
- Retelling and relaying of the event.
- Interference with concentration and learning.
- Being afraid of their emotions – afraid to cry or be angry.
- Different and inconsistent behaviour.
- Sleep disturbance.

In Adolescents
- Self-consciousness about their emotional response.
- Anger – desire for revenge, rebellious behaviour.
- Work deterioration – day dreaming, lack of concentration.
- Inappropriate laughter, hysteria – especially in a group situation.
- Denial, guilt, disbelief and confusion.

In Adults
- Delayed and/or cumulative stress reactions, which may be intensified by the return of emotions from past-unrelated crises.
- Flashbacks sleep disturbances and seemingly irrational behaviour.
- Loss of sense of security, confidence, trust, detachment, preoccupation with the event.
- Emotional turbulence, anger, guilt etc.
- Somatic complaints such as nausea, breathlessness, shaking, muscular tension.

How to Help

➢ In any of the above reactions, understanding is the key to helping. It is more likely that these reactions are related to the trauma rather than eg. current bad behaviour.

➢ Be aware that some reactions may appear weeks or months later and could be triggered by another critical incident.

➢ Reassurance and acceptance of the distress should help in the process of psychological recovery.

➢ Be human and share your own fears, thoughts and feelings if appropriate.

➢ Where symptoms persist or become destructive, professional advice should be sought.
Communication with Students / Parents  (Letter or Newsletter)

1. Give the facts – dispel any rumours.
2. Explain what has to be done to assist.
3. Explain how it may affect people.
4. Explain where help can be obtained locally as well as resources such as Kids Helpline.
5. Be positive.

Dealing with the Media

1. Principal or Principal’s nominee responsible for media contact.
2. Restrict any answers to the known facts.
3. DO NOT agree to media “interpretations”.
4. Speculative comments should be avoided.
5. Remember, in certain circumstances, there could be legal implications.
6. Provide information about support provided / available to students, parents and staff.

Welfare of Care Givers

1. Call a meeting of caregivers and stress the necessity of looking after their own mental and physical health.
2. Stress the importance of seeking out someone to whom they can express their feelings.
3. Warn them to share the caregiver role, not to take sole responsibility for the welfare of individuals.
4. Be aware of sign of burn out, especially when the crisis period is perceived to have eased.
5. Convene brief meetings of support personnel where they can share their feelings.
6. Adjust workloads if necessary.
When something disturbing has happened at a school or within our community, there is usually at least one group or class that is particularly affected and in need of support. Within our School we have the Chaplain, Nurse, Year Level Coordinators and Year Level Core Team who can assist in the recovery process. We also have the opportunity to draw on regional assistance such as District Psychologists, Social Workers and Counsellors who can help with the coordination of presentation of sessions, which assist students to cope.

**Within the classroom** -

<table>
<thead>
<tr>
<th>Let students tell you what happened.</th>
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<td>Discuss what ACTUALLY happened – give the facts and sort out rumours from facts.</td>
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<td>Allow discussion time eg. Where were you when it happened?</td>
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<td>How did you find out?</td>
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<td>What did you feel?</td>
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<td>How might the family/friends feel?</td>
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Ensure that you direct students away from blame and try to incorporate discussion about what can constructively be done now.

Some students like to write or draw to recall (or exorcise) events and people’s emotions.

Help the class and teachers plan how they will introduce and support survivors when they return to school or during absences such as letters, company, visits etc.

Offer personal talks/counselling if you feel able to tell the class where you’ll be in the School for the next few hours and how/or how appointments can be made.

In the secondary school situation, it clearly may not be suitable for each teacher to deal with this in each class. Communication between teachers is vital here and some flexibility in timetable may be required for students to “complete” their story rather than try to fit them in between bell times. We do not want to spend every lesson going over old ground.
Suicide Warning Signs

Knowledge of warning signs is necessary to establish whether a young person is suicidal. An assessment needs to look at the context of the situation. Is there any event, which has happened to cause this feeling? Eg. a life threatening illness, condition, significant loss, problems with relationships, school failure, family conflict etc.

Any one of the following signs does not necessarily indicate a risk by itself, particularly as adolescents are susceptible to erratic behaviour. However, a combination of several signs may indicate a person is experiencing serious problems, which MAY lead to suicide attempts. A young person who is suicidal may present as if nothing is wrong and show no obvious signs. The following are the most common indicators shown by a suicidal person.

- Withdrawal from friends or family or other major behaviour changes.
- Personality changes, such as unusual nervousness, increased irritability, outbursts of anger, impulsive or reckless behaviour, apathy about appearance or health.
- Aggressive behaviour, which may be masking depression.
- Sudden and extreme changes in eating habits.
- A change in schoolwork or behaviour patterns.
- Changes in sleep patterns.
- Feelings of hopelessness.
- Abuse of drugs or alcohol.
- Preoccupation with themes of death or expressing suicidal thoughts, also in writing or art.
- Recent suicide of relative or the anniversary of a suicide.
- Previous suicide attempts may mean the person is at a high risk of trying again.
- Giving away prized possessions, making a will or other final arrangements such as writing to friends when this is out of character.
- Threats of suicide such as “It won’t matter after tomorrow” etc.
- Sudden life in mood after a period of depression may indicate the person has found a solution for solving the problem or ending the pain.

Do not assume that the student is receiving help or the problem will go away. Discuss with the Welfare Coordinator. Do not be afraid to ask the person if you have serious worries about them. It is better to try and reassure yourself of their safety by checking it out.

Suicide Intervention

How can we help?

Believe the person. Take a person seriously if they are making threats to harm themselves. Try not to diminish the situation.

*Do not promise you will not tell anyone else. It is important to try and get help for them. If you are going to obtain help without the person’s consent, please let them know whom you are going to tell. It is important to respect the person’s right to privacy, as much as it is feasible when you are trying to save their life. Please do not let anyone know, other people you tell may not be able to handle the information and inadvertently talk about it.*
Suicide threats or attempts are usually a way of saying they need help

- Try to sound calm and concerned.
- Try to impress how important and valued the person is and show that you care about them.
- A suicidal person’s thinking can be irrational at the time, when they are unable to see achievable alternative solutions. The student can feel powerless by the size of the problem. Ask questions that will help the person define the problem into manageable parts and encourage them to work on one area at a time so the person feels some control again. An extreme sense of hopelessness may prevent them from doing this.
- It is important that other students are not made to feel responsible for a person who is suicidal.
- Encourage the person to think of other ways they can ask for help, depending on their level of stress.
- Do not leave the person alone until you get help.
- Be prepared to get help for the person but do not promise to be available all the time when this is not feasible.
- If he/she agrees to see a counsellor, the counsellor may make a contract with the person not to harm him/herself. The contract needs to be simple and achievable for both parties. Contracts imply someone cares.
- It is important that you debrief after dealing with such a situation – this should preferably be with a counsellor.