

Critical Incident Policy

April 2021



Sacred Heart Secondary School,
Drogheda

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1. Objective of the Critical Incident Policy

The Sacred Heart School aims to protect the wellbeing of its students and staff by providing a safe and nurturing environment at all times. The mission statement states We see that the primary role of the school is to provide an experience of living in a Christian community, which has as its ideal, the community of the gospel ... one of love, care and trust.

The Board of Management, through Ms. Carroll, 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 Critical Incident Management Plan.

2. What is a critical incident?

The staff and management of the Sacred Heart School recognise a critical incident to be an incident or sequence of events, which overwhelms the normal coping mechanisms of the school. Critical incidents may involve one or more students or staff members, or members of our local community. Some crises include:

- The death of a member of the school community through sudden death, accident, terminal illness or suicide.
- An accident involving pupils or staff on or off the school premises.
- A physical attack on staff member(s) or student(s) or intrusion into the school.
- Serious damage to the school building through fire, flood, vandalism etc.
- The disappearance of a member of the school community.
- An accident/tragedy in the wider community.

3. The Critical Incident Management Team (CIMT)

The aim of the CIMT is to help school management and staff to react quickly and effectively in the event of an incident, to enable them to maintain a sense of calm and to ensure that appropriate support is offered to students and staff. Having a good plan should also help ensure that the impact on students and staff is limited. It should enable the school to return to normal as soon as possible.

The Critical Incident Management Team (CIMT) is the group of individuals who take responsibility for ensuring that the policy is known, understood and acted on appropriately. Clear roles are identified and designated so members know who is responsible for each part of the policy.

Role	Name
Principal	Ms. Leoni Carroll
Deputy Principal	Ms. Deirdre Lynch
School Guidance Counsellor	Ms. Emma Haran
School Guidance Counsellor	Ms. Liz Byrne

RE Coordinator	Mr. Donal Lynch
Learning Support Coordinator	Ms. Laura Shanahan
PR Coordinator	Senior Management Team
Administrator	Ms. Mandy Hoey & Ms. Jane Casey
Programme Coordinator	Ms. Miriam Corboy
Chaplain	Fr. John Conlon
Chairperson of The Board of Management	Ms. Mary Mulligan
Chairperson of Parents' Council	Ms. Paula O'Reilly

In the event of a critical incident in the Sacred Heart School the following systems are in place to help 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:

- Evacuation plan formulated
- Regular fire drills occur
- Fire exits and fire extinguishers are regularly checked
- Preopening supervision in the school is available from 8.15am.
- School doors are locked during school time (in accordance with Health & Safety regulations, which may be subject to change in exceptional circumstances e.g. COVID-19 Pandemic).
- Front entrance is key locked, monitored by a camera
- Supervision at lunchtime of outside area

Psychological Safety

The management and staff of the Sacred Heart 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.

Social, Personal & Health Education (SPHE) is integrated into the work of the school. Issues such as grief & loss, communication skills, stress and anger management, resilience, conflict management, problem solving, help seeking, bullying, decision-making and prevention of alcohol and drug misuse are addressed in the SPHE curriculum. The promotion of mental health and wellbeing is an integral part of this provision.

- Staff have access to training for their role in SPHE
- Staff are familiar with the Child Protection Procedures and the name of the Designated Liaison Person and Deputy Designated Liaison Person.
- Actions will be put into play through the management of the Critical Incident Management Team and the co-operation of all members of staff:
- Books and resources on difficulties affecting the 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 on the area of suicide awareness and some have attended specialist training such as ASIST provided by the HSE

The school has developed links with a range of external agencies (See Appendix 3)

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 DES Circulars 0023/2010 - Post-Primary (Appendix 13).

The school has a clear Anti-Bullying policy and deals with incidents of bullying in accordance with this policy

There is a care system in place in the school using the “Continuum of Support” approach, which is outlined in the NEPS documents, published in 2010 for post primary schools.

Students who are identified as being at risk are referred to the designated staff member (e.g. guidance counsellor, form teacher or year head), concerns are explored and the appropriate level of assistance and support is provided. Parents/guardians are informed, and where appropriate, a referral is made to an appropriate agency

Staff are informed about how to access support for themselves.

In the event of a critical incident in the Sacred Heart School the following actions will be put into play through the management of the Critical Incident Management Team and the co-operation of all members of staff:

4. Short Term Actions (1st Day) (Appendix 2.1):

4.1 Gather accurate information (from Garda if appropriate)

- What, where and when?
- What is the extent of the injuries
- What is the location of those injured and not injured?
- How many are involved and what are their names?
- Is there a risk of further injury?
- What agencies have been contacted already?

4.2 Contact appropriate agencies & staff (Emergency Contact List: Appendix 3)

- NEPs
- BOM
- All staff members (if outside of term-time)
- Department of Education & Skills
- Inspectorate
- Health Board Psychology Departments/Community Services
- Emergency Services: Ambulance, Fire Brigade, Garda, Local GP, Hospital

- ASTI/TUI
- Guidance Counsellors in the Drogheda Area

4.3 Convene a meeting with Critical Incident Management Team and Relevant Form Teacher(s) and Year Head(s)

Possible Agenda Meeting:

- Agree a statement of the facts for staff, students, parents and media
- Delegate responsibilities
 - Preparation of letters to parents as per template by the Administrator (Appendix 8.3 / 8.4)
 - Photocopying or preparation of resources for distribution (in paper format or electronically) to teachers, students and parents from the Critical Incident folder, by the Administrator
- Appoint Administrator to handle phone enquires, emails and the media
- Ensure a phone line remains open
- Organise the timetable for the day and the period up to the burial of the deceased. (Adhere to the normal school routine, if this is possible).
- Organise rooms for:
 - Affected students
 - Parents & students
 - Media (if necessary)
- Organise substitution cover, if necessary
- Organise a staff meeting
- Organise the supervision of students during staff meetings
- Decide on agencies to be contacted
- Compile a list of students who were close to the deceased
- Compile a list of all school staff members who had contact with the deceased

4.4 If incident occurred during school day, arrange immediate escort home of deceased's siblings and other family members

- 4.4.1** Where feasible, student to be met by parent/guardian or other family member at school and escorted home
- 4.4.2** If necessary and where possible, news of the incident to be delivered by parent/guardian or other family member. The Guidance Office may be used where feasible for this purpose.

4.5 Organise timetable for the day

4.6 Organise supervision of the students

4.7 Inform staff and provide support if necessary

- 4.7.1 Inform staff of the facts
- 4.7.2 Inform on the routine of the day
- 4.7.3 Inform on the supports available to students and staff

- 4.7.4 Provide advice for dealing with the media
- 4.7.5 Advise staff of the procedures for identification of vulnerable students
- 4.7.6 Provide materials for staff (from the critical incident folder)
- 4.7.7 Keep staff updated as the day progresses

4.8 Inform Media if required

- 4.8.1 Appoint spokesperson - the Team Leader & Principal, Ms. Leoni Carroll
- 4.8.2 Adapt prepared media statement to the incident (Appendix 4)
- 4.8.3 Include facts about:
 - The incident, keep it simple, brief and factual
 - What has been done already
 - What is going to be done
 - Positive information or comments about the deceased person

4.9 Appoint someone to deal with phone enquires

- 4.9.1 The Administrator & School Secretary, Ms. Mandy Hoey and Ms. Jane Casey, to deal with enquires
- 4.9.2 Use the factual statement agreed by the Critical Incident Management Team (Appendix 4)
- 4.9.3 A record to be kept on who contacted the school and who the school contacted to prevent any overlap

4.10 Organise transport for students if necessary

5. Details of these actions:

5.1 Hold staff meeting

All staff should be asked to attend, including auxiliary staff. The areas, which might be covered, are listed below:

- An account of the facts as known (express to staff that students may have heard about the incident through mobile phone text messages and/or social media)
- An opportunity for staff to express their views and their feelings
- Discussion with the staff about how the facts will be shared with the students (agreed approach, if possible)
- An outline of the routine of the day
- Organise for the following be delivered to the following rooms:
 - Quiet room for students:
 - Art materials from the Art Room for Memory Book, Posters, Cards
 - Streamed suitable music to be played as background music, if appropriate
 - Tea / Coffee & Biscuits from the Staff Room
 - Room for parents and students:
 - Tea / Coffee & Biscuits

- Information for staff about which outside agencies have been contacted, or are involved and the supports that will be put in place for both students and staff
- Distribution of relevant handout materials for teachers (Appendices 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7, 5.8, 5.9, 10 & 11)
- A procedure for identifying vulnerable students (See Appendices 6.1, 6.2, 6.3 & 6.6)
- Discuss guidelines for dealing with media i.e. Not to speak with media (inform PR Team)

5.2 Organise Timetable

Maintain normal routines as far as possible

Possible structure:

- If, at the start of the day form teachers take form class to inform students of the facts and be there to support students (Rooms need to be allocated)
- All classes to follow their timetable, however the needs of the students to be met in each class
- Enable students to use the supports available:
 - One to one Counselling in the Guidance Office
 - Quiet Room for timeout
 - Condolence book (if appropriate)
- The year group that the student(s) was in to be taken in groups for debriefing with Guidance Counsellor(s)/form teachers/year heads/NEPS psychologists/pastoral care staff
- Meeting, facilitated by the Team Leader & Principal, in afternoon to debrief staff and identify the students that require further support

5.3 Inform parents/guardians

Children directly involved:

Parents/guardians should be contacted as soon as possible, and this first contact will need to be handled with great sensitivity. The steps involved include:

- The Parent Liaison to share information with parents
- Make a list of parent/guardians who have been contacted and those who will still need to be told to avoid duplication of messages
- Give parents/guardians relevant and factual information
- Allow Visitors' Room to be available for use by distressed students to meet their parents/guardians.
- Provide support to parents who are on their own when they arrive at the school
- Provide telephone numbers for enquires and for support agencies
- Provide useful information for parents from their critical incident folder
- The Parent Liaison to be available to meet parents if required in an allocated room

Children not directly involved:

Send parent(s)/guardian(s) a letter informing them of the facts and brief details on the incident and that their child may be upset (See Appendix 7.1, 7.2, 7.3/7.4)

5.4 Inform Students:

Students who are directly connected to the incident such as siblings or family relation should be informed separately of the incident by or with their parents/guardians.

Form teacher or teacher involved with class to be involved in informing students.
Any outside 'expert' to assist people undertaking the task of informing students

Task:

Give facts and avoid speculation

Allow pupils to ask questions, tell their stories and express feelings

Help students realise that overwhelming emotions are natural and normal following a critical incident

Inform students that parents/guardians will be collecting them as soon as possible (if appropriate to the incident)

Inform students about the supports available to them now and in the future i.e. time out room, one to one counselling

Give student's letters for parents, which seek permission for their child to be counselled by a NEPs psychologist if desired. (See Appendix 8.1/8.2)

Contact students/parents/staff that are absent to inform them of the incident

5.5 Make contact with the bereaved family

Team Leader & Principal, Ms. Carroll makes initial contact with the bereaved family.

Find out information on how the family would like the school involved in the funeral arrangements. Guard of Honour, readings, choir, wreaths, prayers of the faithful etc.

Contact made with the family after the funeral as a form of support.

5.6 Deal with the media

Designated person (Team Leader & Principal, Ms. Carroll) to deal with all media (use of prepared statement).

Students and teachers encouraged not to give statements to media.

Students to be protected from the media and photography through restricting access on the school grounds (caretaker & ancillary staff)

6. Longer Term Actions (Appendices 2.2 & 2.3):

- 6.1 Monitor students for signs of continuing distress
- 6.2 Continue to use the referral system to the Guidance Counsellor. (See Appendices 6.3, 6.4, 6.5 & 6.6)
- 6.3 Review events that have occurred since the event with the Critical Response Team.
- 6.4 Memorial activity organised with class/year and individual students, teachers and staff connected to the event as soon as appropriate (Appendix 5.9).
- 6.5 Convene a meeting with the Critical Incident Management Team and review the response to the critical incident and make alterations to the critical incident policy as appropriate.
- 6.6 Anticipate future events that may reactivate the crisis (e.g. graduation, Awards Ceremony etc.) and design intervention strategies to deal with them.
- 6.7 Plan additional meetings as necessary.

7. Record keeping

In the event of an incident, each member of the team will keep records of phone calls made and received, letters emails and texts sent and received, meetings held, persons met, interventions used, material used etc. The school administrative team (Mandy & Jane) will have a key role in receiving and logging telephone calls, sending letters, photocopying materials etc.

8. Confidentiality and good name considerations

The management and staff of The Sacred Heart School will 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 confirmed 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,

- Staff Room- will be the main room used to meet the staff
- Guidance Offices & Year head Office - for meetings with students
- Library/Gym - for parents
- Room 27 - for media
- Guidance Offices- for individual sessions with students.
- Programme Coordinator Office - for other visitors

9. Consultation and communication & review of Critical Incident Policy

All staff were consulted and their views canvassed in the preparation of this policy and plan. Members of the Board of Management, 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 Management Team has a personal copy of the plan.

All new and temporary staff will be informed of the details of the plan by the Deputy Principal, Ms. Deirdre Lynch

The plan will be reviewed and updated annually.

Signed: *Vincent Donovan*

Chairperson of Board of Management

Date: 20th April 2021

Signed: *Leoni Carroll*

Principal/Secretary to the Board of Management

Date: 20th April 2021

Appendix 1

Assigned Roles For Critical Incident Management Team

Team Leader: Ms. Leoni Carroll, Principal:

- Alert the team members to the crisis and convene a meeting
- Coordinate the tasks of the team
- Coordination of school set up with caretaker(s)
- Convene staff meeting
- Speak with family involved
- Liaise with the Gardaí (if necessary)
- Speak to the media
- Organise allocation of rooms:
 - For affected class group and other affected students
 - For students to meet and tell parent(s)/guardian(s)
- Organise timetable

Garda Liaison: Ms. Leoni Carroll, Team Leader & Principal

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

Staff Liaison: Ms. Leoni Carroll, Principal, & Ms. Deirdre Lynch, Deputy Principal:

- Organise the movement of students around the school
- Lead briefing meetings for staff on the facts as known
- Contact members of staff not present to inform them of the incident
- Give staff members an opportunity to express their feelings and ask questions, outlines the routine for the day
- Advise staff on the procedures for identification of vulnerable students
 - Provide materials for staff (from their critical incident folder)
 - Keep staff updated as the day progresses
 - Is alert to vulnerable staff members and makes contact with them individually
- Advise them of the availability of the Employee Assistance Service and gives them the contact number
- Liaise with RE Coordinator regarding assembly, liturgies, prayers etc.

Student Liaison: Ms. Emma Haran, Guidance Counsellor, & Ms. Elizabeth Byrne, Guidance Counsellor:

- Contact NEPs
- Speak to staff at staff meeting
- Organise supports: Guidance Counsellors in the area

- Co-ordinate information from form teachers and year heads about students they are concerned about
 - Alert other staff to vulnerable students (appropriately)
 - Provide materials for students (from their critical incident folder)
 - Keep records of students seen by external agency staff
 - Look after setting up and supervision of ‘quiet’ room where agreed

Community Liaison, Ms. Leoni Carroll, Principal:

- Maintain 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
- Liaise with agencies in the community for support and onward referral
- Is alert to the need to check credentials of individuals offering support
- Coordinate the involvement of these agencies
- Remind agency staff to wear name badges
- Update team members on the involvement of external agencies

Parent Liaison: Ms. Leoni Carroll, Principal & Affected Class Form Teacher(s)/Year Head(s):

- Visit the bereaved family with the Team Leader (Leoni Carroll)
- Arrange parent meetings, if held
- May facilitate such meetings, and manage ‘questions and answers’
- Manage the ‘consent’ issues in accordance with agreed school policy
- Ensure that sample letters are typed up, on the school’s system and ready for adaptation
- Set up room for meetings with parents
- Maintain a record of parents seen
- Meet with individual parents
- Provide appropriate materials for parents (from their copy of the critical incident folder)

Media Liaison: Ms. Leoni Carroll, Principal:

- 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 State Examination Commission; relevant teacher unions etc.
- Will draw up a press statement, give media briefings and interviews (as agreed by school management)
- Consultation with Senior Management Team re: decision on availability of school facebook, twitter page, etc.

Administrator: Ms. Mandy Hoey & Ms. Jane Casey:

- Maintenance of up to date telephone numbers of:
 - Parents or guardians
 - Teachers
 - Emergency services
- Take telephone calls and notes those that need to be responded to

- Ensure that templates are on the school's system in advance and ready for adaptation
- Prepare and send out letters, emails and faxes
- Photocopy materials needed
- Maintain 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. Ms. Mandy Hoey and Ms. Jane Casey will have key roles in receiving and logging telephone calls, sending letters, photocopying materials, etc.

Appendix 2

Checklist for actions 2.1 Short-Term Actions - Day 1

1. Gather Facts, Who, What, Where, When _____
2. Contact the bereaved family _____
3. Contact appropriate Agencies _____
4. Convene the Critical Incident Management Team _____
5. Agree on media statement _____
6. Organise the supervision of the students _____
7. Convene a staff briefing, agree schedule for the day _____
8. Agree on statement of facts _____
9. Allocate rooms for tutor/form groups _____
10. Allocate room for media _____
11. Allocate room for parents and students _____
12. Compile a list of vulnerable students _____
13. Organise refreshments, art supplies, music for rooms _____
14. Principal to deal with media _____
15. Send letters to parents of students _____
16. Organise memorial activity(ies) _____
17. Convene a staff meeting in the afternoon _____
18. Convene a meeting of the CIMT at the end of the day _____
19. Contact/visit the bereaved family _____

2.2 Medium-Term Actions - (Day 2 and following days)

1. Convene a CIMT meeting to review the events of Day 1 _____
2. Meet external agencies _____
3. Meet whole staff _____
4. Arrange support for students, staff, parents _____
5. Visit the injured _____
6. Liaise with bereaved family regarding funeral arrangements _____
7. Agree on attendance and participation at funeral service _____
8. BOM to make decisions about school closure _____

2.3 Follow-up – beyond 72 hours

1. Class Teachers to monitor students for signs of continuing distress _____
2. Liaise with agencies regarding referrals _____
3. Plan for return of bereaved student(s) _____
4. Plan for giving of 'memory box' to bereaved family _____
5. BOM / Staff, parents and students decide on memorials and anniversaries _____
6. Staff / BOM to review response to incident and amend plan _____

Appendix 3a

Emergency Contact List

NEPS Drogheda: Hilary Power

NEPS Regional Office Navan:

NEPS Headquarters Dublin

Chairperson of the Board of Management:

Mr. Vincent Donovan

Chairperson of Parents' Council

Ms. Paula O' Reilly

Chaplain: Fr. Philip Gaffney

Dept. of Education & Skills (Dublin office)
(Athlone office)

DES-Communication Unit (As above)

Inspectorate Secretariat

State Examination Commission

Drogheda Child & Family Centre

Education Welfare Service – Region 5

Educational Welfare Officers:

Maria Kiernan (087 985 3150)

Sinead Donnelly (086 174 6145)

TUSLA, Navan

Local Counselling Service:
Drogheda Community Service

Prout (Security) Services – Kevin Prout

Garda Station Drogheda

Ambulance Drogheda

Fire Brigade Drogheda

Hospital: The Lourdes Drogheda

Local GPs:

Dr. Yelverton, Bryanstown Medical Centre

Dr. Fionnuala Loughrey, Wheaton Hall Med Ctr.

ASTI

TUI

Employee Assistance Service
(SMS & WhatsApp:text 'Hi' to 087 3690010)

Guidance Counsellors in the Drogheda area:

Greenhills:

St. Mary's:

Ballymakenny College:

Grammar School:

St. Joseph's CBS:

St. Oliver's C.C.

Athboy C.S.

Loreto S.S. Navan

Appendix 4

Sample Media Statement

This can be used as a template 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 Ms. Carroll and I am the Principal of Sacred Heart School Drogheda. 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 (__th year girl) and will be greatly missed by all who knew her. We have been in contact with 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 has implemented our Critical Incident Management Plan. Psychologists from the National Educational Psychological Service (NEPS) and (insert other information if relevant) have been with us today 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.

Media Statement

My name is Ms. Carroll and I am the Principal of Sacred Heart School, Drogheda. 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 (__th year girl) and will be greatly missed by all who knew her. We have been in contact with 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 has implemented our Critical Incident Management Plan. Psychologists from the National Educational Psychological Service (NEPS) and (insert other information if relevant) have been with us today 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.

Appendix 5.1

Handout for Teachers FREQUENTLY ASKED QUESTIONS

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 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 6.2, 6.5 and 6.7). 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 5.3. 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.

Appendix 5.2

Handout for Teachers

Children's understanding of and reaction to death:

Adolescents

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

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

Appendix 5.3

Handout for Teachers A classroom session following a Critical Incident Grief

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: Advising for social media usage
- Step 7: Closure
- Step 8: Free Time
- Step 9: 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 6.5). 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 6.4, 6.5, 6.6 and 6.7.

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: Advising about social media usage.

Discussion may begin with an outline of the various social media currently being used by the members of the group. The value of these as a way of keeping in contact with and supporting friends should be acknowledged. Students may be asked for experiences of ways in which such communication has helped them, as well as, examples in which it has gone wrong. Media involving live communication such as Facetime, Teams, WhatsApp (audio) are generally more conducive to support and less open to misunderstanding than text-based means. Students will be encouraged to consider how much social media usage is too much, particularly late into the night. More guidance on social media use is contained below.

GUIDANCE ON SOCIAL MEDIA USE AND CRITICAL INCIDENTS

Social media is now part of everyday communication and information sharing. Most students are avid and competent users. Social media messages speed up the rate at which information is shared. This can have a significant influence on the behaviour of young people during a critical incident. Some social media communication may occur without the knowledge of school staff that leads to distress among students or their parents/guardians.

The following information may help schools to consider issues related to social media use when dealing with a critical incident.

It is essential that schools take account of the need to have competency in the use of social media among management and staff. If the members of the CIMT have particular concerns or fears about social media, they should consult those familiar with its use. Senior-students e.g. sixth-year members of the student council could also be asked for help. Normalising social media use by the students during a critical incident is very important.

Schools should include social media literacy in the school curriculum. It is essential that school management, staff and students understand the role of social media, and its positive and negative aspects. A positive disposition to social media by the school may encourage thoughtful use by students during a critical incident.

Agreement on appropriate use of social media during a critical incident should be included in the school's Acceptable Use Policy (AUP). All school staff should follow agreed online professional protocols as prescribed by the New Code of Professional Conduct by Teachers i.e. "Teachers should ensure that any communication with pupils/students, colleagues, parents/guardians, school management and others is appropriate, including communication via electronic media, such as email, texting and social media etc." (The Teaching Council, 2012). The CIMT may also remind staff, students and other relevant community members about their AUP during times of crises.

When dealing with a critical incident it is advised that schools act quickly and with caution. A message could be placed on the school website and on any other school social media account along the following lines:

'You may be aware of a recent event within the school community. We ask you to respect the family's privacy and sensitivities by considering if you should post any comments, especially on social media. We will inform you through the normal channels of any relevant developments.'

School can use social media to provide up to date information for all concerned throughout the various stages of the incident. Positive messages and appropriate advice for young people and their parents/guardians can be provided. One important message would be to remind parents/guardians to discuss social media use with their children and monitor use more actively following a crisis.

It is important that CIMT members are familiar with safe messaging guidelines and the document Media Guidelines for Reporting Suicide and Self-harm. Safe messaging guidelines should be followed when sending messages to staff, students, community or the media following a death by suicide. Media personnel if making contact with the school during a critical incident should be provided with the

guidelines. Should the need arise during a crisis, schools can contact the Department of Education and Skills Press Office for advice and support or, in the case of Education and Training Board schools, the Board head office.

Young people often post Rest-In-Peace (RIP) messages on social media sites when tragedies occur. These posts can be heartfelt and emotional particularly in cases of death by suicide. Messages such as “I miss you and will see you soon” or “I will follow in your path” should cause concern and be followed up with the individual concerned. The death by suicide of an individual may influence others. Young people are especially prone to contagion. Those who are emotionally vulnerable may act on suicidal impulses.

Activity on social networking sites during a critical incident can be a source of potentially important information, such as suicide pacts, identification of vulnerable groups or individual young people who may be at increased risk of suicide. Given privacy restrictions to people’s personal web pages, distressing information may be posted without the knowledge of parents or school management. It is likely that users will block access so activity of this nature will not be accessible to everyone.

Monitoring sites raises issues of privacy and surveillance. Schools are not advised to engage in monitoring. However, should schools become aware of inappropriate posts by students, they could inform the parents/guardians and encourage them to request that it is deleted. The easiest way to have a post removed is for the person who originally posted it to delete it from their account or request its removal. Service providers will not usually remove posts unless content is contrary to their AUP.

The following advice for journalists is provided in the Media Guidelines for Reporting Suicide and Self-harm.

The internet has created additional opportunities and challenges for journalists due to the speed and ease of accessing and publishing information. Points of view can now be presented more quickly and easily but sometimes without review or factual basis. It can be difficult for some readers to understand the distinction between what is fact and what is opinion. If you are posting your story on a news website or blog, please consider the following points:

General Tips

Avoid linking to or mentioning the names of websites that encourage or glamorise suicide. Helpful websites offering support are listed at www.pieta.ie and www.samaritans.ie

Try to exercise care and judgment in the creation of news stories that will appear online, as they can often be surrounded by adverts and commentary, which are outside the control of the author. Additional features on the page can create a negative context, allowing, for example, adverts promoting depression aids to appear alongside articles on mental health.

Add hyperlinks to sources of support to ensure that people in distress can access useful resources quickly. Consider promoting www.samaritans.org within the UK and Ireland, or our worldwide equivalent, www.befrienders.org, beyond these regions.

Webwise.ie is an internet safety initiative funded by the DES, focused on raising awareness of online safety issues and good practice among students, their parents/guardians and teachers. www.webwise.ie

Reader Feedback

The ability to comment on articles or blog posts gives readers the opportunity to glamorise suicide or present controversial opinions about suicidal tendencies and mental health. The relative anonymity of these comments can encourage debates that are inappropriate for a news website, and potentially damaging to other readers.

Responsible websites ensure that the terms and conditions each commentator agrees to when contributing online are explicit in what constitutes inappropriate material, and how it will be dealt with. In addition, site owners and moderators should understand the implications of allowing these comments to be published on their website.

Wherever possible, attempt to educate your audience to understand how to use the feedback section with full consideration for everyone's health, safety and wellbeing, and the right of the publisher to remove inappropriate content.

Consider making it clear to users that feedback services are moderated, whether manually or electronically.

Step 7: 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 8: 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 9: 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.

Appendix 5.4

Handout for Teachers

TEACHERS HELPING STUDENTS IN TIME OF CRISIS OR EMERGENCY

1. LISTEN 2. PROTECT 3. CONNECT 4. MODEL and 5. TEACH

THINK ABOUT your students' "DIRECT EXPERIENCE" with the event i.e. FIRST-HAND EXPERIENCE of the event (physically experiencing or directly seeing it as it happens).

After the event, changes can happen in students' thoughts, feelings, and behaviours. Your students may worry about family members, classmates, friends, or pets they care about, and may worry that it will happen again. Common reactions to crises and emergencies include trouble sleeping, problems at school and with friends, trouble concentrating and listening, and not finishing work. Your students may become more irritable, sad, angry, or worried as they think about what has happened, and as they experience recovery efforts after the event.

When students share their experiences, thoughts and feelings about the event, LISTEN for RISK FACTORS for adverse reactions.

Risk factors that may indicate a need for counselling referral for students include:

Loss of a family member, schoolmate, or friend observing serious injury or the death of another person family members or friends missing after the event, past traumatic experiences or losses getting hurt or becoming sick due to the event home loss, family moves, changes in neighbourhoods/schools, and/or loss of belongings.

If a student has had any of these experiences, you may wish to consider referring her or him to the HSE services. Your NEPS psychologist will be available to provide support and advice. Now that you know what can affect your students after a disaster, school crisis, or emergency, you're ready to Listen, Protect, Connect, and Model & Teach

1. LISTEN, PROTECT, CONNECT, MODEL & TEACH

The first step after an event is to listen and pay attention to what they say and how they act. Your students may also show their feelings in non-verbal ways, like increased behavioural problems or increased withdrawal. Let your students know you are willing to listen and talk about the event, or to make referrals to talk to an appropriate professional, if they prefer it. Use the following questions to talk with your students. You can listen for clues that indicate when students are having a hard time. Write down a few examples that may be helpful to note:

What might be preventing a student from coming to or staying in school? What might be preventing a student from paying attention or doing homework? What might be preventing a student from returning to other school based activities?

Listen, observe, and note any changes in:

Behaviour and/or mood

School performance

Interactions with schoolmates and teachers

Participation in school-based activities

Behaviours at home that parents/guardians discuss with you.

LISTEN **2. PROTECT**, CONNECT, MODEL & TEACH

You can help make your students feel better by doing some or all of the following:

Answer questions simply and honestly, clearing up any confusion students may have about what happened

Let your students know that they are not alone in their reactions. Provide opportunities for your students to talk, draw, and play, but don't force it

Talk to your students about what is being done by the school and community to keep everyone safe from harm

Watch for anything in the environment that could re-traumatize your students

Keep your eyes and ears open for bullying behaviours

Maintain daily routines, activities and structure with clear expectations and consistent rules

Make adjustments to assignments to be sensitive to students' current level of functioning

Limit access to live television and the Internet that show disturbing scenes of the event

Remember, what is not upsetting to adults may upset and confuse students, and vice versa

Encourage students to "take a break" from the crisis focus with activities unrelated to the event

Find ways for your students to feel helpful to your classroom, the school, and the community

List other things you do that help your students feel better. Sharing this list with other teachers may increase ideas to help your students.

LISTEN, PROTECT, **3.CONNECT**, MODEL & TEACH

Reaching out to people in your school and community will help your students after a school crisis or emergency. These connections will build strength for everyone. Consider ways to make some or all of the following connections:

"Check in" with students on a regular basis. Find resources that can be supportive to your students and staff

Restore interactive school activities, including sports, club meetings, student projects, and student councils, coaches, etc.)

Encourage student activities with friends, including class projects and extracurricular activities

Empathise with your students by allowing a little more time for them to learn new materials

Build on your students' strengths by encouraging them to find ways to help them use what they have learned in the past to help them deal with the event

Remind your students that major disasters, crises, and emergencies are rare Discuss feeling safe and times they have felt safe. List programs and activities that connect you and your students with the community Share your list with other teachers to create a larger list of activities and resources.

LISTEN, PROTECT, CONNECT **4.MODEL** & TEACH

As you help your students after a disaster, crisis, or emergency, your efforts may be more successful – and you may be less stressed – if you keep in mind:

It is good to be aware of your own thoughts, feelings, and reactions, these can be seen and may affect your students

How you cope and behave after an event will influence how your students cope and behave. Your students will be watching you for both verbal and non-verbal cues

Monitor conversations that students may hear

Acknowledge the difficulty of the situation, but demonstrate how people can come together to cope after such an event.

LISTEN, PROTECT, CONNECT, MODEL & **5.TEACH**

Talk to your students about expected reactions after a crisis (emotional, behavioural, cognitive, and physiological). There are “normal” reactions to abnormal events.

Different people may have very different reactions, even within the same family

After the event, people may also have different amounts of time they need to cope and adjust

Encourage your students to identify and use positive coping strategies to help them after the event

Help your students problem-solve to get through each day successfully

Help your students set small “doable” goals and share in these achievements as “wins” for the students and your classroom

Remind students that with time and assistance, things generally get better. If they don't, they should let a parent or teacher know

Over time, you, your students, their families, your classroom, can EXPECT RECOVERY.

Adapted by the National Educational Psychological Service (NEPS) for Irish schools from Psychological First Aid materials developed by the American Red Cross (2014 and FEMA, see www.ready.gov). We acknowledge with thanks.

Appendix 5.5

Handout for students How to cope when something terrible happens...

- 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.
- 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.
- 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; www.youth.ie; www.reachout.com.au, <https://ie.reachout.com>

Above all, realise that what you are experiencing is normal following a traumatic event.

Be understanding of yourself and others.

Appendix 5.6

Handout for Students Reactions to a Terrible Event

Following the recent sad event, you may be experiencing some strong emotional or physical reactions. If not now, you may experience these later. 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 Fear Guilt Shame Anger Regret Loneliness Anxiety Mood swings Shock Yearning Numbness Confusion Isolation Insecure feelings	BEHAVIOUR Nightmares Social withdrawal Irritability Tearfulness Loss of concentration Forgetfulness Physical/Verbal aggression
PHYSICAL Tiredness Sleeplessness Headaches Upset stomach Loss or increase in appetite	THOUGHTS Disbelief Denial Sense of unreality Preoccupation with images of the event/person

Appendix 5.7

Handout for students Grief after suicide or suspected suicide

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; www.youth.ie; <https://ie.reachout.com>

Appendix 5.8

Handout for groups of students or individual students

STAGES OF GRIEF

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

- * 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 acceptable to cry
- * It is acceptable 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 perhaps with alcohol and drugs, this complicates matters rather than bringing relief
- * 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 cycle 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
- * Use of social media can help but do not rely on it as your only source of support

Useful websites: www.spunout.ie; www.youth.ie; <https://ie.reachout.com>

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

Appendix 5.9

Handout for Teachers

Reintegration of the bereaved child in 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 them.
- Discuss how difficult it may be for their classmate/s 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 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*". (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 they 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.

Appendix 5.10

Handout for Guidance Counsellor & Critical Incident Management Team Memorial Meeting Template

Welcome

Everyone gathered here today feels very sad about _____ death. Let's take this time to spend some time together helping each other to talk about how we feel about (Name).

Students introduce themselves and says how they knew (Name)

Has anyone asked you how you feel about _____ Death? Sometimes feelings really are the hardest things to think about and can be even harder to talk about.

*Feelings are a natural and a personal part of you just as your hair or eyes.
Everyone has them – lots of them.*

It's important to understand that feelings are never right or wrong – good or bad – the just are. Talking about feelings cannot change a situation but it may help you gain an attitude of understanding.

How did you feel when you heard about _____ death? Tell your story of the event.

Normalising reactions – all reactions are different.

Normal responses to an abnormal situation.

Reactions or symptoms will ease with time.

If they haven't after a few weeks talk to a parent / teacher/ GC.

Change is a process not an event.

When something terrible happens like the sudden death of a friend. People often feel deep sadness and confusion. Life appears like a double exposed photograph – we remember what life looked like before but we find it difficult to see clearly how life should be for us today. If you are wondering how you should feel, how you should act or what you should do – you are not alone. Everyone shares these same questions.

How will your life be different now?

Have you any worries that you would like to share with the group?

For all of us, it is important to sort through the scattered pieces of what used to be and reassemble an acceptable new world for ourselves. Maturity not only makes us stronger, but it also clears the way for us to be a more caring, concerned person. As we grow mentally and physically holding onto our memories is important because they help us to understand where we were and why we are the person we've become today.

Your memories of life before this event can help you to find direction so you can grieve and move on to build a better life for yourself and those who share your world.

Have you found any strategies / ways that have helped you to manage your thoughts and feelings?

Life is a balancing act of

Who to talk to

What to do

When to act and

How to move forward to the best of our ability

Appendix 6.1

Handout for Teachers & Guidance Counsellors CHECKLIST - STUDENTS AT RISK

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 _____

Appendix 6.2

Information for Teachers

Identifying vulnerable students

A lot of students will be very upset and will want and need to talk about what has happened. For the majority of students this can be done in the classroom in the group setting. It is helpful for students to hear others talking about how they are feeling. This normalises their reaction. If a student or group of students are particularly distressed it may be advisable to have them talk to someone they know who will be available over the next days and weeks. If you are particularly concerned about a pupil, please refer the student. This, however, should be for only a small number of students.

Checklist to help identify vulnerable students

Students who need to be closely monitored, as they may be more vulnerable than others are:

- Close friends and relatives of the deceased
- Students who experienced a recent loss, death of a friend or relative, family divorce or separation, break-up with a boyfriend/girlfriend
- Students with a history of mental health difficulties
- Students with a history of substance abuse
- Students experiencing serious family difficulties, including serious mental or physical illness
- Students who have been bereaved in the past
- Students with a history of abuse
- Students with a history of suicide attempts/self harm
- Non-communicative students who have difficulty talking about their feelings
- Less able students

Appendix 6.3

**For completion by member of staff and to be given to Guidance Counsellor
Guidance Counsellor's Referral Form**

Name of Student: _____

Class: _____

Form Tutor: _____

Year Head: _____

Referring Teacher: _____

What are your concerns in relation to this student?

Has anyone else been informed about your concerns? If yes, please state who.

Guidance Counsellor Actions:

No. of sessions I have seen this student: _____

The following action has been taken in relation to this referral:

Appendix 6.4

**For use by Guidance Counsellor
Student Contact Record**

Student Name	
Class	
Reason for Referral	
Referred By	
Date of referral	
Date of Intervention	
Result of Intervention	
Intervention Plan	

Student Contact Record

This form to be used by school staff to record the details of students supported following a critical incident.

Date	Student's ID	Class / Year	Outcome (include need for follow up)

Appendix 6.5

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

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 little

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.

Appendix 6.6

Teacher Handout

EXPLORING SUICIDE RISK AND GUIDANCE IF STUDENT EXPRESSES SUICIDE IDEATION

A student may express ideas or exhibit behaviours suggestive of suicide ideation while in schools or information may be reported by another student or parent. The school has a responsibility to make an assessment and take action. The term ‘risk assessment’ is 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) most immediately available to the student, to make a 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. It is not easy to gauge the seriousness of such behaviour. The school is not responsible for deciding on the seriousness of the risk. Generally, all threats or reported threats should be taken seriously even if it may appear to be ‘attention-seeking’.

WHAT SHOULD A TEACHER DO?

Listen. If a student seeks out a teacher to discuss their concerns about suicide, they have an idea that the teacher may be a help to them. Indicate concern and a willingness to help. There may not be time to discuss it properly when the student first approaches. Arrange a time to talk and prepare for the meeting.

Review available information: Review any significant changes observed in the student over recent weeks. The list of warning signs in R14 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 been 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 been going for you? Have you been ill? Has anything significant happened to you recently?”

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.

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 rope 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?

ONWARD REFERRAL

The greater the number of "Yes" answers, the higher the risk and the greater the need for immediate onward referral. Parents should be informed and asked to bring the student to their GP or to another service and report what the student has said. Advise about use of Accident and Emergency Services if parents have concerns about accessing a GP out of hours.

Do not send the student home alone if there are concerns. Release the student to the parents if concerns for safety exist. Explain to the student that you have to take action and let them know what action you are taking. If a student is under 18 years, teachers are obliged to inform the parents even without the student's consent.

Record the information and the actions taken. Share this with the relevant person in management. Share information as considered necessary with other staff members (e.g. student support team, class/subject teacher) taking into consideration the student's right to confidentiality.

RETURN TO SCHOOL

A plan for reintegration of the student will be the responsibility of a designated person from the student support team. Consider the timing of the student's return if there has been an absence from school. Discuss the return with the parents and student. Should the student be under medical supervision? Can the parents provide advice for the school from the medical team who assessed the student? How would the student like to have the absence explained?

Share information about the return as considered necessary (for example with management, student support team, class/subject teacher as appropriate) and with other staff members, remembering confidentiality. Monitoring in the first few days will be an important part of the plan. Have a staff member available to meet them on arrival. Ensure that all teachers know that the student has been through a difficult time. Let the student know which staff member is available if support is needed. Keep routine as normal as possible. Ensure that there is a current family/guardian contact number available should difficulty arise.

Monitor the behaviour of friends and other students who may be providing support to the student to ensure that they are not taking on too much responsibility for the wellbeing of the student. Where a previous suicide has occurred in a school be aware of the possibility of copycat or suicide contagion which occurs when suicidal behaviour is imitated (see 7.6 in the Guidelines).

PREVENTATIVE AND PREPARATORY GUIDANCE FOR SCHOOLS

School systems are not only responsible for the academic needs of students but also for their emotional, social, and physical wellbeing. A preventative whole school approach to supporting mental health schools should ensure implementation of the *Well-Being Guidelines for Mental Health Promotion and Suicide Prevention (2013/2015)*, available on the DES website. This includes ensuring that the SPHE curriculum is consistently delivered in the school. SPHE provides a framework for educating young people about their health and wellbeing in a planned and structured way. It is advised to ensure that mental health awareness is included in curriculum delivery at all levels in the school.

If the school does not have a Student Support/Care Team in place, consider setting one up. The document *Student Support Teams in Post-Primary Schools (2014)* is a useful resource and available on the DES website. It will provide a system for tracking and monitoring the students who have difficulties. Having such a system reduces anxiety for staff who have the concern as it shares the burden.

Schools are advised to have some members of staff trained in ASIST professional development provided by HSE. Information is available on www.nosp.ie

Appendix 7.1

Handout for Parents

WAYS TO HELP YOUR CHILD THROUGH THIS DIFFICULT TIME

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.

Appendix 7.2

Handout for Parents

FREQUENTLY ASKED QUESTIONS

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.

Appendix 7.3

SAMPLE LETTER TO PARENTS – SUDDEN DEATH/ACCIDENT

This letter can be used as a template for the school if we are informing parents of a tragedy. It offers some advice and outlines what the school's response involves.

Date

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).*

We have support structures to help your daughter to cope with this tragedy. *(explain)*

It is possible that your child may have some feelings and questions that 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.

Young people frequently turn to social media to see what others are saying, or to find out more. At these times it is important that you monitor their use and engage with them about what they read. We urge you to emphasise and reinforce the need to be extremely sensitive and careful about what they post.

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

Yours sincerely,

Leoni Carroll

Appendix 7.4

SAMPLE LETTER TO PARENTS - VIOLENT DEATH

This letter can be used as a template for the school if we are informing parents of a violent death. It offers some advice and outlines what the school's 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 brothre/sister 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/her 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 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.

Young people frequently turn to social media to see what others are saying, or to find out more. At these times it is important that you monitor their use and engage with them about what they read. We urge you to emphasise and reinforce the need to be extremely sensitive and careful about what they post.

(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,

Ms. Leoni Carroll

Appendix 8.1

Sample letter requesting consent for involvement of outside professionals

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 parent(s) / guardian(s),

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 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)**.

Sincerely,

Ms. Leoni Carroll
School Principal

I give my consent for _____ to participate in a Group/Individual Counselling Session with a member of (*Agency Name*)

Student Name: _____

Signature of Parent / Legal Guardian: _____

Date: _____

Appendix 8.2

Sample Letter – seeking advance parental agreement to child being seen by outside professionals Resource for schools

This letter can be used as a template for our school if we 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

Sacred Heart School Drogheda 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,

Ms. Leoni Carroll
School Principal

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.

Parent/Guardian Signature: _____

Date: _____

Appendix 9

Suggested Readings and Resources

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.ie and for Suicide Prevention Officers on the NOSP website, www.nosp.ie.

BOOKS FOR CHILDREN

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

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

Laurie Van-Si & Lynn Powers (1994)

Publisher: Portland State University

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

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 Gulbendian 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: Veritias 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

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

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

Appendix 10

USEFUL WEBSITES

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

TRAINING - www.nosp.ie

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 access ASIST training and learn how to help. Information can be obtained on the website of the National Office for Suicide Prevention.

SafeTALK: SafeTALK 'suicide alertness for everyone' is a half day training programme that prepares participants to identify persons with thoughts of suicide and connect them to suicide first aid resources. These specific skills are called suicide alertness and are taught with the expectation that the person learning them will use them to help reduce suicide risk in their communities. Participants learn how to provide practical help to persons with thoughts of suicide in only a few hours. Following a SafeTALK workshop you will be more willing and able to perform an important helping role for persons with thoughts of suicide.

Barnardos provide resources and advice on www.barnardos.ie/resources, www.barnardos.ie/teenhelp

The Childhood Bereavement Network (CBN) is a multi-professional federation of organisations and individuals working with bereaved children and young people.
www.irishchildhoodbereavementnetwork.ie

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

The **Professional Development for Teachers (PDST)** Health and Wellbeing Team provide support for teachers at primary and post-primary level in physical education (PE), social personal and health education (SPHE) which includes anti-bullying, child protection, mental health and wellbeing, relationships and sexuality education (RSE) and other SPHE related areas. Supports offered to schools include in-service for principals, co-ordinators, teachers of SPHE, whole staff groups; programme planning; school policy development; schools visits. www.pdst.ie.

The former **SPHE Support Service** has been integrated into the Health and Wellbeing team of the PDST. Visit www.sphe.ie for further information and to book post-primary SPHE courses.

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

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

Irish Hospice Foundation - www.hospice-foundation.ie

Alumina - supports all people who are affected in anyway by self injury within the UK and beyond. It supports people who self injure, and their family and friends. www.selfharm.co.uk

Winstonswish Foundation - help for grieving children and their families. www.winstonswish.org.uk

Papyrus - Resources and support for those dealing with suicide, depression or emotional distress, particularly teenagers and young adults - www.papyrus-uk.org

A national **charity** committed to improving the mental health of all children and young people. www.youngminds.org.uk

Spunout - 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

NYCI – a site that focuses on issues relating to **youth in Ireland** today. www.youth.ie

JIGSAW – Jigsaw is a mental health charity focused on providing expert advice and support, online and in person, to young people across Ireland aged 12 – 25 years-old. Visit www.jigsaw.ie for more information or email help@jigsaw.ie

Reachout - An Australian site that helps young people through tough times. www.reachout.com.au (Reachout Ireland) <https://ie.reachout.com>

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

For Non-judgemental information and support. Visit www.lgbt.ie or www.belongto.org

Samaritans – For confidential, non-judgemental support, email jo@samaritans.ie Visit www.samaritans.ie for details of nearest branch.

Mencap – have materials in supporting the explanation of loss and death to people with learning disabilities and includes literature for specific aspects such as ‘What can I do to feel better’ and ‘Going to a funeral’

Childline (ISPCC) – supports for younger people. Ireland’s 24-hour national listening service for young people up to the age of 18. Visit www.childline.ie Chat online at www.childline.ie (from 10am to 4pm every day)

The YourMentalHealth.ie website has information on all mental health supports and services available nationally & locally from HSE and its funded partners. Visit www.yourmentalhealth.ie

Appendix 11

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 (24 hours, Local call cost) 116 123 (Free calls)
Sosad Drogheda:	041 984 8754 (24 hours)
Sosad Navan:	046 907 7682 (24 hours)
Jigsaw Meath:	046 907 1702
Shine Info. Line:	1890 621631
Grow Info. Line	1890 474 474
Aware:	1800 804 848
Teenline:	1800 833 634
Parent Line:	1890 927 277
Pieta House - The Centre for Prevention of Self Harm or Suicide:	1800 247 247
YourMentalHealth Information Line – HSE (anytime day/night)	1800 111 888
Your Local GP or NEDOC Out of Hours GP Service:	1850 777 911

Critical Management Team & Contact Details:

Role	Name	Tel. Number
Team Leader		
Garda Liaison		
Staff Liaison		
Student Liaison		
Parent Lisison		
Community Liaison		
PR/Media Liaison		
Adminstrator		
RE Coordinator		
Chaplain		
Chairperson of BOM		
Chair Person Parents' Council		
Caretaker/School set up		