**CRITICAL INCIDENT POLICY**

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**Rosstulla School**

**Together Towards Tomorrow**

**Agreed by Governing Body, September 2023**

**Chairperson’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Statement of Ethos**

At Rosstulla, we are committed to being a welcoming school in which everyone feels valued, respected and supported. We aim to provide a nurturing, inclusive learning environment where each child is enabled to reach their full potential. We will strive to develop the life skills each pupil needs to become a valued member of their community, celebrating individual success and achievement along the way.

**Policy aims are to:**

Recognise which incidents may be critical for the school community.

• Respond to a critical incident in an informed manner.

• Create a positive, open, communicative and calm climate where the needs of

staff and pupils are met in critical incident situations.

• Create a safe school environment whereby the physical, social and

psychological health of pupils and staff is prioritised.

• Outline, monitor and review the management plans for dealing with

different emergencies.

• Promote active coping skills within the curriculum.

• Establish positive working relationships and dialogue with outside

agencies, thus enabling full and effective collaboration in the event

of a critical incident

**What is a Critical Incident?**

A critical incident may be defined as any sudden and unexpected incident or

sequence of events which causes trauma within a school community and which

overwhelms the normal coping mechanisms of that school.

**Critical Incident Management Team (CIMT)**

Principal (Team Leader) Miss L Matchett

Vice Principal/ Designated Teacher Mrs C McCarthy

Secondary Departmental Leader Mr R Owens

Primary Departmental Leader Miss LA Mitchell

Deputy Designated Teacher Mrs S Sloan

Deputy Designated Teacher Mrs Nichola Shannon

Building Supervisor/ Clerical Officer BS Vacant/ Mrs P Montgomery

School Senior Clerical Officer Mrs S Gallaway

BOG Chairperson Dr A Preston

**Critical incidents which could affect Rosstulla School**

* Sudden death of pupil or member of staff;
* Disappearance of a pupil or member of staff;
* Death or injury of a pupil or staff member on a school outing;
* Severe injury to pupil or staff member as a result of road traffic accident;
* School bus accident
* Serious assault on pupil or staff member in school;
* Violent/disturbed intruder on school premises during school day;
* Serious damage to school building or property through fire, flood or vandalism;
* Civil disturbance in local community;
* Pupil with contagious illness;

**Key Roles & Responsibilities**

**Principal (Miss Matchett)**

* Seeks clarification
* Summons the CIMT to inform of incident and establish management plan
* Prepares relevant statements/letters for the parents and media
* Convenes and informs staff
* Convenes and informs students
* Contacts external agencies - EA

**Vice-Principal/ Designated Teacher (Mrs C McCarthy)**

* Arranges staff cover if necessary & appropriate
* Ensure Health and Safety measures are in place
* Informs relevant absent pupils
* Informs absent staff
* Contact relevant parents

**Deputy Designated Teachers (Mrs S Sloan) & (Mrs N Shannon)**

* Contacts appropriate safeguarding agencies - social services / youth counselling service
* Support DT with contacting specific relevant parents

**Departmental Leaders**

* Reschedule timetabling for Primary and Post Primary
* Arrange supports for the physical and emotional wellbeing of Primary and Post Primary Pupils

**Senior Clerical Officer**

* Calls emergency services if appropriate
* Ensures phone lines are operative and all office staff available
* Acquires relevant contact numbers
* Ensures office staff do not vary from the script
* Manages the daily arrangements of the school, website / texts

to parents / and school information

**Building Supervisor/Mr Shirlow**

* Ensure route is clear onto school premises for emergency services.

**Information and Communication**

The Central information point will be the School office and the Principal’s office. Office staff will be prepared to deal with any incoming calls related to the incident.

#### **EA Critical Incident Line: 028 3751 2515**

**School Closure**

Depending on the nature of the critical incident and its impact on the school it

may be necessary to suspend the normal timetable for a period of time to permit an

appropriate response. In very exceptional circumstances, such as a death on school

premises, it may be necessary to close the school. See school’s policy for Exceptional School Closures.

**Linked Policies:** Safeguarding and Child protection, Health and Safety, E-safety policy, Positive Behaviour Policy, Staff Wellbeing Policy.

**DURING THE INCIDENT**

It is important to remember that no two incidents are alike, and it can be difficult to predict the specifics of what action will be required.

In Rosstulla School we will use the following sequence as a guide:

1. The Principal should find out the facts and assess its significance for the school.
2. The Emergency services will be contacted immediately if necessary.
3. The Principal will call together the CIMT who will agree the response that will be implemented. The team will at this stage will re-establish roles and responsibilities.
4. Staff will be gathered in the staff room at the soonest possible opportunity where they will be given a brief statement of factual information about the incident by the Principal. The Principal will outline proposed plan of action and allow staff to ask questions and clarify. The staff will be briefed on their responsibility for monitoring pupil and staff welfare and will be informed of the procedures for informing pupils and parents. Staff will be reminded of the available support services for them and advised of the time and place for the next briefing/debriefing.
5. A formal announcement will be made to all the pupils at the soonest possible opportunity. Primary pupils in the Mrs McCoey’s room and Post primary in the Art room. A carefully worded statement will be issued which will consider the age range and ability level of our students. *A generic script for this and advice for teachers about breaking the news to students can be found in appendix 1.* A member of the Senior Leadership Team will issue this statement. Students will be reminded of the people in school who they can go to for support.

*Appendix 2 provides information on the concept and common reactions to death in various age ranges.*

*In the case of a suspected suicide there are a number of issues that need to be considered. Guidance can be found at Appendix 3.*

*Appendix 4,5&6 outline pupils can best be supported by staff and in particular how to respond to pupils in the event of a sudden death.*

1. Students will be given a period of form time allowing them to express freely their emotions and remain in a safe secure environment with the peers and staff they are closest to. We will restore normal school routine as soon as practicable. Sustaining the normal routine, with timetable flexibility to allow pupils and staff to access support from the Education Authority Critical Incident Response Teams(Sheila Gamble) and external agencies (e.g. Barnardos counselling service), will maintain a sense of continuity and stability for the whole school community.
2. The management room or SSC will be established as the ‘recovery room’ for any students who need time out of class or individual support.
3. Staff and students absent from school on that day will be informed where appropriate by telephone.
4. Relevant parents (those directly affected by the incident) will be informed by telephone or visited as soon as possible. Other parents will be informed by letter home and/or parent mail service along with practical and constructive suggestions on how parents can support their children. The school will take into account the wishes of the families involved when dealing with the situation.
5. If necessary a media statement will be prepared by the Principal in consultation with the EA Media officer and relevant emergency services. No other member of staff should communicate, respond to or comment to media. No news media should be allowed onto the school premises without the Principal’s permission. Staff and students will be advised not to make comment of the incident on social media sites.
6. Staff will be encouraged to help and support each other. The CIMT will be on hand to support all staff and pupils. The staff wellbeing support group Inspire can be contacted on hello@inpirewellbeing.org or telephone on 02890328474. The CIMT may decide to seek further support for staff through the EA Critical Incident Support team (Sheila Gamble). There will be flexibility in expectations of staff and time given for staff to talk and meet with one another within the school setting.
7. Staff will be debriefed at the end of the day and the office will be the main hub for information.
8. Consideration for memorials/commemorations and those wanting to attend funerals will depend entirely on the individual situation.
9. Should an incident occur over the weekend the CIMT should communicate together through the contact details listed in Appendix 8. A plan of action will be established and if appropriate staff, parents and pupils will be contacted via parent text/school e-mail. Roles and responsibilities will remain as detailed above as far as possible.

***PLEASE NOTE: ROSSTULLA SCHOOL HAVE AN EMERGENCY EVACUATION POLICY WHICH DETAILS PROCEDURES IN THE EVENT OF A FIRE, BOMB ALERT OR DANGEROUS INTRUDER.***

**AFTER THE INCIDENT**

It is recognised that on-going support may be needed for both pupils and staff for a prolonged period of time after the incident.

*Appendix 7 gives advice on planning a positive return for a bereaved pupil.*

A support plan will be put in place for those pupils who continue to show signs of significant distress after a number of weeks and who are finding the return to normal school routine difficult. School with liaise with parents, social workers, counsellors, therapy staff and other relevant agencies for appropriate guidance and reassurance. Staff should address issues as they arise during teaching and learning and within the classroom setting, for example, through circle time sessions, PDMU.

It is recognised that some staff may need support in the longer term. The strain on staff of leading a school through a critical incident can be profoundly disturbing and may not

be identified until after the crisis. Staff, both teaching and non-teaching, can often underestimate the impact on them and may not recognise that they are experiencing difficulty. The Critical Incident Management Team will ensure that staff are directed to sources of support.

The school will endeavour keep in contact with and support the family of a pupil who has died. The return of personal belongings and/or school work to the family, perhaps in a ‘memory folder’ or ‘memory box’ will be handled sensitively. The school recognises that other events arising will need careful consideration in line with the wishes of the family e.g. award ceremonies, the management of public examination results and the return of coursework.

The school will hold a memorial or commemoration to celebrate the life and achievement of the pupil or colleague, for example through a special assembly or a balloon release.

A review of Critical Incident Management Plan will be held a few weeks after the event. The CIMT will discuss what went well, what did not go well and what could be done differently. This policy will be reviewed on an annual base.

***APPENDIX 1***

**ANNOUNCEMENTS TO PUPILS - ADVICE FOR TEACHERS**

Remember announcements should be simple, straightforward and sincere. The following examples provide a suggested structure and are not intended to be adhered to rigidly. After the announcement pupils should be assured that they will have the opportunity to talk about the critical incident.

**1. Fatality after a Road Traffic Accident**

We are taking this time to think about \_\_\_\_\_\_\_\_\_\_, a Year 10 pupil who died last night in a road traffic accident. \_\_\_\_\_\_\_\_\_\_\_\_ was travelling with her family to \_\_\_\_\_\_\_\_\_ when the accident occurred. We do not know any further details about the accident at this time except that the rest of the family is safe. \_\_\_\_\_\_\_\_’s funeral is being held at \_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_. A funeral is a special time to remember a person who has died. The school will let your families know about the funeral arrangements in a letter which will be sent home tomorrow. Let’s take a moment of silence to think of \_\_\_\_\_\_\_\_, to remember all the good things about her and to say goodbye. In our silence we will express our loving thoughts.

**2. After a Sudden Death**

Sadly a tragedy has happened in our school. \_\_\_\_\_\_\_\_\_\_, a class \_\_\_ pupil has died suddenly. We want to respect the family’s need for privacy at this time but you will be given information about funeral arrangements as soon as possible.

This kind of tragic news is hard to accept. You may experience many feelings within the next few days. Everyone deals with loss differently and it is important to respect the way others grieve. Your form teacher and classroom assistants will listen to you and try to support you in coping with this loss.

**BREAKING THE NEWS TO PUPILS advice FOR TEACHERS**

Before telling the pupils about an incident consideration needs to be given to talking around the “Information sheet for Pupils” and allowing time for discussion.

If the incident involves the disappearance or sudden death of a pupil or member of staff it is important to consider the wishes of “the family” and remember their right to privacy. Teachers should relay the information, agreed at the staff briefing, to pupils at schools - preferably at the same time. Relaying the information to vulnerable pupils and pupils absent from school also needs to be considered. Any “news” should contain appropriate language and factual information only with clear, concise, “bite size” explanations delivered in a calm manner.

**REMEMBER**

**Be patient** - you many have to repeat the information many times. Be honest, specific and straightforward - it is acceptable to say you do not have all the answers. Be available for the pupil. Monitor initial reactions.

**Allow time** for pupils to discuss their feelings. Provide reassurance and information

about the school support which is available. Inform pupils of a designated area should they be unable to stay in class. Monitor ongoing and developing reactions. Refer on for additional support if in doubt.

**Share your own feelings**, if appropriate; acknowledge the pupil’s feelings: if necessary, use pictures and social stories to aid understanding.

**Be prepared** that a pupil may come back and ask more questions.

**Be proactive**: if you can, have information ready for possible questions. Assure pupils they will be kept updated.

***APPENDIX 2***

**CHILDREN AND YOUNG PEOPLE’S UNDERSTANDING OF DEATH**

**INFORMATION FOR STAFF**

Children and young people’s understanding of death will depend on their cognitive

and developmental stage. They will revisit the loss as they mature, reach significant

milestones and become more able to talk about their experiences and questions in relation to death. Children and young people with learning difficulties will progress through the developmental stages at a slower pace or indeed may remain at an early stage in their understanding of death. Children and young people do experience similar feelings to adults following a death but often express their feelings differently depending on their development age.

|  |  |
| --- | --- |
|  | **Age Concept of Death Possible Reactions:** |
| **2 to 5 years** | • Death seen as reversible• May feel they have caused the death• Magical thinking - make up fantasies to fill gaps in knowledge• Fears abandonment and separation• Loud protest• Despair• Indignant at changes in patterns or routine• Sleep problems• May revert to “baby” behaviours |
| **5 to 11 years** | • More exposure to death and understanding of death as permanent• Withdrawal, sadness, loneliness,depression• Anger, guilt, temper tantrums,nightmares• Behaviour, learning or school problems• Perfect child, brave and in control• May become preoccupied with death |
| **Over 11 years** | • Death permanent• Denial - it can’t happen• Withdrawal, sadness, depression, loneliness• Anger, rejection, guilt• Joking, sarcasm• Dependence or regressing to younger age• Insecurity, low self-esteem |

There is no right or wrong way to grieve. It is important to allow children and young

people to grieve in their own way and their own time. They may seesaw in and out of

grief, needing time to play and have fun as well as to cry.

***APPENDIX 3***

**DEATH by SUSPECTED SUICIDE INFORMATION FOR STAFF**

1. The term suicide should not be used by a school until it is determined by the

Coroner’s Office. Where an inquest is required it may be a considerable period of

time after the death.

2. When providing support for vulnerable pupils, it would be prudent to make a

working assumption of suicide, if all reasonable indicators suggest that this might

be the case. Pupils and members of the community may be inclined to describe a

death as a suicide before this has been established. Phrases such as ‘tragic event’ or ‘sudden death’ should be used by the school when talking to pupils.

3. In the aftermath of a sudden death within the school community pupils’

vulnerability may increase. Teachers should realise that some pupils may develop

suicide ideation and/or self-harm. Staff need to be proactive in identifying and

monitoring these pupils. Pupils considered to be ‘at risk’ should be immediately

referred to the Designated Teacher for Child Protection who will then notify parents

and advise them of the referral pathway to obtain support for their child. This will

include the child’s doctor and the Child and Adolescent Mental Health Services.

4. Schools should maintain contact with parents to ensure that appropriate action

has been taken to protect and support the pupil. Careful records should be kept and

securely stored as set out in the school’s data protection guidelines. Action must

also be taken to identify other at risk groups in the school, including close friends

and relatives and to direct them to appropriate support. Information for parents can

be found at Appendix 14. At any time parents, school staff or pupils can contact

the “Lifeline 24/7 crisis response helpline service (Tel: 0808 808 8000).

5. Where there appears to be an emerging cluster of perceived suicides in a school or a number of schools in close proximity, the education and library board’s Critical Incident Response Teams will liaise with the relevant Health and Social Care Trusts. This coordinated response will ensure an appropriate community response to the situation while minimising sensationalism and avoiding the glamorising of suicidal behaviour.

6. As with any death, schools may wish to remember the person who has died and

to pay tribute to their memory. When an apparent suicide has occurred, schools

should be careful to remember the person without condoning the means of death.

It is important that events are reported in a sensitive and measured way so that

other vulnerable young people are not put at risk. The language used is very

important.

7. Schools should remember to be vigilant around the time of the inquest, court cases and the anniversary of a death and access any support services as may be required.

**GUIDELINES FOR STAFF**

**Your Responsibilities**

You have two major responsibilities:

1. To respond with empathy and in a non-judgemental way to the pupil in need.

2. To follow the usual safeguarding procedures with an appropriate referral to

ensure the pupil’s safety.

**Responding to a Distressed Pupil**

• **Listen**. It can be very difficult for a young person to disclose distress so it is

essential that he/she is given time and attention. Privacy is also important.

• **Take it seriously**. Disclosures of distress should never be minimised. The young

person should be taken seriously but the adult should not express alarm. The young

person needs to feel safe and have confidence in adults.

• **Accept the possibility of suicidal thoughts**. These feelings are real and should not be dismissed.

• **Do NOT promise confidentiality**. Ensure that the young person knows that the

information will be handled sensitively but that it must be shared with others to

safeguard them.

• **Show a caring attitude**. It is acceptable to express care for the young person and a commitment to their well-being.

• **Be open**. If suicidal intent is suspected it is appropriate to ask the young person

whether they are thinking of harming themselves and have any plans.

• **Supervise closely**. Keep the pupil with you until you can deliver them to the care of the Designated Teacher for Child Protection (or appropriate alternative). Sometimes it is more helpful for the teacher to whom the pupil expressed their distress to be the one who stays with him or her while he designated teacher makes safeguarding arrangements.

**Response to Suicide Ideation Disclosure**

The Designated Teacher for Child Protection (or appropriate alternative) should ensure that pupil is safeguarded by doing the following:

**Continue to supervise closely.** The pupil should not be left unsupervised at this stage.

**Contact parents**. Parents should be advised of the content of the disclosure, the school’s concern and asked to take the child or young person to the doctor for an ‘emergency mental state assessment’ and potential referral to Child and Adolescent Mental Health Services.

**Safely hand over the young person into the care of parents**. Parents should be advised to supervise very closely.

**Contact the young person’s doctor**. It may be helpful if schools also contact the doctor directly to inform him/her of the concerns.

**If the above is not possible**. If the school cannot safely deliver the young person into the care of parents, or has concerns that appropriate support will not be sought/provided, it is possible for school staff to bring a child or young person directly to an Accident and Emergency Department acting in loco parentis.

**Follow-up**. The Designated Teacher (or other member of staff) should remain in contact with parents and plan to support the young person upon return to school. In planning to support the young person the school should consider seeking medical/psychiatric advice.

**Available Support**

1. School’s designated and deputy designated teacher for Pastoral Care

2. Barnardos independent counselling service for Schools

3. EA critical response team (Sheila Gamble 71864785

3. Lifeline – 0808 808 8000

Lifeline offers immediate help over the phone 24/7. It is a helpline service for those

experiencing distress or despair and deals with issues such as suicide, self-harm, abuse, trauma, depression and anxiety. Pupils can phone directly for individual counselling. Lifeline can also put an individual in touch with follow-up services to ensure the best possible response meets individual needs. Lifeline also gives support and guidance to

families and carers, concerned friends, professionals, teachers, youth workers, clergy, faith workers and communities about how to support a young person that may be a risk. A number of other agencies provide support to pupils and others. These include:

• NSPCC - 0808 800 5000

• Samaritans - 0845 790 9090

• Childline - 0800 1111

***APPENDIX 4***

**HOW TO SUPPORT PUPILS AT A TIME OF CRISIS**

**INFORMATION FOR STAFF**

Pupils will react to a critical incident in a variety of ways; no two reactions are the same. Their own personality, their family support and their life experiences will influence their responses. Here are some common reactions.

**THINKING FEELINGS**

Disbelief Anger

Confused Fear

Inability to take in information Sadness

Talking: repeating what they have

experienced/heard

Frightened

Irritable

Nightmares Overwhelmed

Thinking that they cannot cope Guilty

Lack of concentration Worried

Spending a lot of time thinking of what has

happened

Easily upset

**BEHAVIOURS PHYSICAL COMPLAINTS**

Panic Cold and shivery

Anxiety Unable to rest or settle

Crying Hyper-vigilant

Regression Feeling sick/knot in stomach

Withdrawal Loss of appetite

Aggression/argumentative Feel tired all the time

Adults often wish to shield children from pain and distress. Experience and research have shown, however, that children and young pupil are best supported by having the incident acknowledged in an appropriate way rather than ignored. It is important to be available and receptive to pupils, to listen to them, to empathise with them and assure them that their emotions are normal.

It is normal for adults to be upset. It is appropriate for children and young people to see this as it can help them to understand their own emotions. Staff working directly with pupils can show that they are upset, but not out of control. It is important to maintain a safe, secure and predictable environment for the pupils in their care. Staff should remember that they are modelling a response for children and young people and helping them to develop coping skills.

**GENERAL GUIDELINES FOR STAFF**

**Never underestimate the positive effect that concern and support from a caring,**

**familiar adult can have on a pupil.**

At a time of crisis pupils can be distressed, frightened and upset. It is desirable for them, in the first instance, to be supported in a familiar environment by adults who are known to them. School has a significant influence on a pupil’s life.

1. On a day to day basis it provides support and a social network for the pupil.

2. At a time of a crisis, when pupils may be experiencing insecurity and change, it

offers security and containment.

3. Attending school helps to keep a routine and maintain a regular daily pattern.

4. The way staff respond to a pupil can significantly affect the outcome of their

experience. So staff reactions are very important.

5. Teachers know the pupils already and they are therefore in a good position to

observe change, notice issues which are not being resolved and decide whether

onward referral is warranted.

**Useful tips for staff**

1. Acknowledge the event to pupils.

2. Talk with pupils, giving them honest factual information, not shocking details.

3. Be willing to listen to them, and giving them time.

4. Remain calm, keeping control of the situation and containing their feelings (ie

allowing expression of feelings but not allowing hysteria to build up)

5. Be willing to answer questions. (It is not important that staff answer all questions

but that they listen to pupils’ fears and worries and take their queries seriously.)

6. Be genuine and professional.

7. Be non-judgemental.

8. Give information to them including the ‘normalisation’ of their reactions (ie their

reactions are normal reactions to an abnormal event).

9. Encourage pupils to talk, share their feelings and seek help as appropriate.

10. Maintain a routine in school (flexible, caring and containing).

11. Offer sensitivity, care and empathy.

12. Keep pupils in relevant peer groups.

13. Keep pupils informed and updated.

14. Allow pupils to make a response to the situation, eg the making of sympathy cards (for family of deceased) or get well cards (if pupils are injured).

15. Involve them in special ceremonies/rituals/any response the school will make.

16. Do not remove a deceased pupil’s belongings/work/name from classroom/s and environment – these should be discussed with pupils at a later stage.

**Restoring normal routine**

The resumption of normal routines (in as flexible but as structured a way as possible)

re‑establishes a pattern and support for the pupil while being sensitive enough to respond to the incident and its aftermath.

It is important to be mindful that life has changed for the pupil as well as for the staff.

The healing process involves accepting what has happened, coping with the implications of this and adapting over time to the new situation.

It is necessary to continue to monitor pupils’ reactions. Most symptoms should settle over time. These may include sleep difficulties, poor concentration, and loss of motivation in schoolwork, avoiding issues/places, upset, worry and anxiety. If they do not show signs of recovery or if they are becoming worse, a pupil may need more specialist support.

Advice and support is available from the appropriate education and library board support services. It is important to recognise that parents may need to be informed that a referral to a General Practitioner is necessary. Some pupils may require a more specialist intervention straight away. Early contact with their parents should be sought in order to discuss this further. Other pupils may need specialist intervention some time after the event. If symptoms persist for longer than 5/6 weeks referral for specialist help should be considered.

***Remember that PARENTS, FRIENDS, PEERS and STAFF are the key supporting people for pupils. Make use of all of them.***

***APPENDIX 5***

**RESPONDING TO PUPILS’ QUESTIONS FOLLOWING A SUDDEN DEATH INFORMATION FOR TEACHERS**

1. It can be very difficult to respond to questions from children following a sudden

death especially when the member of staff is also shocked and bereaved. Many

factors will influence a pupil’s idea of death - their developmental stage, their

experiences, their ethnic, religious, and cultural backgrounds, and their personal way

of seeing things.

2. It is useful to agree a ‘script’ for all staff. The advantages of this are that staff will

have a form of words to use so they are not caught unawares and that pupils get to

hear a reassuring message over and over again. This is particularly reassuring and

helpful to young pupils or pupils with special needs when processing the information.

3. Some questions will reveal that children feel insecure about whether the adults

in their lives will be around to look after them. Reassure them that even though

nobody knows the future, they can be sure that there will always be reliable adults

to look after them.

4. It is not unusual for young children to ask the same question again and again.

Repeating questions and getting answers helps the child understand and adjust to

the loss of someone loved.

5. Sometimes children become very interested in physical details. Keep the reply very simple and factual. Repeat it as often as necessary and don’t be drawn into giving further details. Be careful not to use euphemisms such as ‘sleep’ or ‘went way’

for death. Keep it simple, factual and clear. Younger children find it difficult to understand the permanence of death. Euphemisms will only make it worse.

6. When answering questions about death tell a pupil only what he or she is capable

of understanding. There is no need to be evasive, but modify explanations to what

the pupil can comprehend; use language the pupil can understand; and what is said

is important, but the manner in which it is said has even greater significance. Be

aware of voice tone. Try to answer the questions in a matter‑of‑fact way without

too much emotion.

**Suggested Answers to Certain Questions**

**Question: Why did \_\_\_\_\_\_\_\_\_ die?**

**Answer:** “There are some things we understand and some things we don’t understand. We do/don’t know exactly why \_\_\_\_\_\_ died. The doctors have told us the reason was \_\_\_\_\_\_\_\_\_\_.”

**Question: Why Do People Die?**

**Answer:** Dying is a natural part of life. All living things like plants, animals, and people are special parts of the natural world. Nature almost always gives us long, healthy lives. Like all things in nature, after many years people grow old and reach the end of life. This is called death.

**Question: Is Death Like Sleeping?**

**Answer:** No. Dying is not like sleeping at all. People sleep to rest and stay healthy.

Sleep gives hard working parts of our body time to build up strength again. Think of how good you feel after you sleep. You feel so good because your body is rested and ready for another day. When someone dies, their body stops working. It is not resting anymore. Its job is over.

***APPENDIX 6***

**UNDERSTANDING YOUR REACTIONS INFORMATION FOR PUPILS**

You have experienced an incident which has been very upsetting for you. Even though this event is over, you may still be experiencing some reactions to it. This is normal. It is unlikely that you have experienced anything like this before and so you may never have been faced with such reactions.

Your reaction may last a few days, a few weeks or longer. Your parents, teachers and friends can help you cope with this and get rid of some of these feelings and reactions. Sometimes this might be a bit more difficult and you might need more help. This does not mean that anything is wrong with you. It only means that the event is just too powerful for you to deal with on your own. Here are some reactions you might experience.

**THINKING FEELINGS**

Confused

Worried

Nightmares/bad dreams

Guilty

Poor concentration

Angry

Restless

Sad

Not interested in what is going on

Easily upset

Spending a lot of time thinking about what happened

Cross

Overwhelmed

**BEHAVIOURS PHYSICAL COMPLAINTS**

Loss of appetite

Feeling tired all the time

Being very quiet

Unable to rest or settle

Agitated

Feeling sick/knot in tummy

Being quarrelsome/arguing

Cold and shivery

**REMEMBER**

1. Your reactions are normal.

2. They should lessen in time, normally over the next few weeks.

3. If you have any concerns tell your parent or a teacher.

4. People love you and care about you. Let them help.

5. Dreams or other thoughts about the traumatic event will get less over time. They

are normal reactions to what you experienced. They are signs that your mind is

trying to understand what happened.

**THINGS THAT MIGHT HELP YOU**

1 Talk to people and tell them what is on your mind. Talk to your parents or to your

teachers. Talking is a great way to help at this time. No one can resolve all their

worries by themselves. Your teachers, parents or friends may be able to help you.

2 Take some exercise – walking, running, playing games. This will get rid of some of

the tension in your body and mind.

3 Keep yourself busy.

4 Keep doing all the usual things – this will also help you.

5 Spend lots of time with your friends and your family.

6 Do things that you like and that make you feel good.

7 Get plenty of rest.

8 Do not be afraid to ask for help.

***APPENDIX 7***

**PUPILS RETURNING TO SCHOOL AFTER BEREAVEMENT**

**INFORMATION FOR TEACHERS**

Returning to school after bereavement can be difficult for a bereaved pupil. It can also

be difficult for peers and staff to know how best to support the pupil. The circumstances

of the bereavement and the age and developmental stage of the pupil will determine the

approach used by teachers.

**The following advice may be helpful in planning a positive return to school**

1. Speak to the bereaved pupil. Check how he/she feels about coming back to school

and what he/she may want to happen. Discuss the support that will be available.

Speak to the parents to find out what they may want.

2. Discuss with class peers how they feel and how they can support the pupil. Discuss

normal grief reactions. Encourage them to share their feelings and experiences of

bereavement and how they coped. They may have sent cards or messages.

3. Ask a group of friends to be supportive during the first days following the return to

school.

4. Consider a phased return. Plan for the day of the return of the pupil with a

key member of staff taking the lead. When the pupil comes back to school it is

important to acknowledge the loss. You may wish to say something like “I am/we

are sorry that \_\_\_\_\_\_ died. I/We know you are sad and I/we want to support you at

this time”.

5. Consider giving the pupil age appropriate information on normal bereavement

responses and grief reactions.

6. Allow for possible changes in emotions, behaviours, concentration, and work levels.

All teachers need to be made aware.

7. Allow for “time out” when the pupil wants to be in a quiet place or to talk with a

school counsellor, pastoral care teacher or another member of staff.

8. Carry on normal routines with normal approaches to discipline, with sensitivity.