

Critical Incident Guidance for North Somerset Settings 2023-2024

Produced by The Educational Psychology Service, on behalf of North Somerset County Council. Based on the guidance provided by UK Trauma Council:
<https://uktraumacouncil.org/resources/critical-incidents>

“If your single question is *‘What can I do to help the recovery of those in my educational community?’*
Simply ask yourself what can you do that will help them to feel:

1. Safe
2. Calm
3. Connected
4. In Control
5. Hopeful”

P6 UKTC Guidance



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What is a Critical Incident?

A **Critical Incident** may be defined as an event, or events, which occur suddenly and are outside the range of common human experience. In addition:

- Critical Incidents cause considerable personal distress and have the potential to overwhelm usual coping responses;
- The effect on individuals can be devastating, mentally, physically, emotionally and spiritually; and
- There are likely to be significant organisational consequences

Critical Incidents affecting schools may include:

- Suicide of pupil or member of staff
- The death of a pupil(s) or member(s) of staff through sudden accident, murder, terminal illness or suicide
- A serious accident involving pupils and school personnel on or off school premises
- A violent attack or violent intrusion onto school premises, e.g. involving an armed intruder or a bomb alert.
- Fire, flood, building collapse or major vandalism in school.
- A hostage situation
- A significant event in the community, e.g. transport accident, terrorism.

Incidents of bereavement and loss typically do not fall under the above definition. Further explanation of the critical incident response, including a breakdown of the offer from Educational Psychology is offered in [Appendix 1](#)

Why change our advice?

Our previous critical incident guidance was a legacy of our work in Somerset. Whilst there were strengths in the practical guidance given, we recognise that a clearer structure would support comprehension. The EPS has reviewed available guidance and strongly favour that produced by the UK Trauma Council (UKTC). There are several key advantages to adopting existing guidance:

- **Applicable Principles**
 - The five key principles (safe, calm, connected, in control, hopeful) provide a simple but comprehensive framework applicable to all phases of response and recovery. This supports a unified approach.
- **Evidence-Based Approach**
 - The UKTC guidance is firmly grounded in psychological research evidence about how best to support recovery after trauma. It draws on a pivotal 2007 study on mass trauma interventions as well as extensive consultation with experts. It was developed with input from psychologists, counsellors, social workers, school leaders and other specialists in the field of trauma and education. Their combined expertise will enhance the quality of the guidance.
- **Up-to-Date**
 - The UKTC will continually update their critical incidents resources to incorporate the latest trauma research and evidence-based practices. This means we can have confidence we are using the most up-to-date approach.
- **Practical Resources**
 - In addition to the guidance, the UKTC offers ready-to-use resources like training materials, lesson plans, policy templates that will save time and effort.
- **Shared Language**
 - Adopting common guidance across our local authority enables all schools to share the same understanding and language around trauma-informed practice.

New guidance

The UK Trauma Council created guidance for schools rooted in 5 key principles for supporting students after trauma. These "SCCCH" principles aim to foster the ideal environment for recovery.

1. *Safe* - Consider what structures and routines can be kept in place to help with a sense of safety and familiarity.

2. *Calm* - Whilst acknowledging that distress is both normal and understandable, seek to draw on strategies that help children and young people to regulate their emotions.
3. *Connected* - Look for opportunities for connection and social support, looking out for members of your community that are more isolated.
4. *In Control* - Shared decision making where possible to help children and young people feel that they have some control about things that affect them.
5. *Hopeful* - Whilst not invalidating the severity of the situation, look to engender hope about the future and make plans for how you will get through this together. (page 23 UKTC guidance)

The SCCCH principles provide a framework, not a rigid set of rules. School leaders are encouraged to adapt ideas in a way that best suits their students and community. There are many suggestions for putting the principles into practice at your school. But the main focus is on meeting the needs of your unique situation.

Implementing the SCCCH principles can create the optimum conditions for students to process trauma and begin healing. The UK Trauma Council developed this evidence-based approach to guide schools in supporting recovery after adverse events.

There are lots of ideas in the guidance, but as an illustration, the types of actions you may wish to consider under each include:

Safe

- Help children/staff feel physically and psychologically safe.
- Provide reliable information about what happened.
- Keep familiar routines going where possible.
- Limit exposure to disturbing media accounts.

Calm

- Teach strategies to regulate strong emotions and relax the body.
- Give reassurance that feelings are normal.
- Attend to basic needs like food, water, rest.
- Avoid forcing children to talk before they are ready.

Connected

- Encourage social support from peers, trusted adults.
- Identify those who are isolated and connect them to others.
- Keep families involved through regular communication.

In Control

- Involve children/staff in decision making where possible.
- Help them identify their strengths.
- Empower them to take action to help themselves/community.

Hopeful

- Balance discussing the distress of now with hope for the future.
- Make future-oriented plans for memorials, anniversary events.
- Notice examples of resilience and post-traumatic growth.

The 4 stages of response

The UKTC guidance is divided into 4 stages of response. The information provided is intended to support leaders consider how they can support their communities to feel *safe, calm, connected, in control, and hopeful* at each stage. Again, the brief information provided here is offered as an illustration, the reader is directed to the original guidance for further information.

1. Preparation Stage

- Review and update critical incident policies and procedures
- Deliver staff training on trauma-informed response
- Assign roles and responsibilities
- Identify internal and external support resources

2. Immediate Response Stage

- Attend to safety, medical, and basic needs
- Provide facts and avoid speculation or rumours
- Keep familiar routines and structure where possible
- Allow children to express feelings; offer emotional support
- Identify those most impacted for additional monitoring and support

3. Medium-Term Response Stage

- Continue to monitor wellbeing, especially of vulnerable children
- Maintain regular communication between school and families
- Gradually transition back to normal routine
- Involve children in developing memorials or changes
- Refer to mental health services if needed

4. Ongoing Response Stage

- Mark anniversaries and manage distress triggers
- Check in with community members and provide support
- Offer mental health screening for those with lasting difficulties
- Gather feedback to review response and update policies
- Foster hope by focusing on strengths, resilience, and growth

For critical incidents, schools most often seek guidance from the Educational Psychology Service (EPS) on the first two response stages: preparation and immediate response. This document provides additional information to support schools in getting ready for and reacting to a critical incident situation.

Preparation Stage

UKTC advise:

- Looking at their [resources](#) and consider how the evidence and guiding principles would apply to your community
- Involve all staff in a training session – possibly using the [training offered by UKTC](#)
- Update policy to draw on the guiding principles and building on the discussions from your staff INSET session. The UKTC provide a policy framework document and separate [policy templates](#) for Early Years, Schools, Further Education

In addition, we advise:

Here is another attempt at rewriting the text in a more concise way while retaining the key information and using UK spellings:

- Headteacher and senior staff should be responsible for main response tasks like contacting support services, managing media, and overseeing normal school functions. Consider individuals strengths and delegate tasks accordingly
- Critical incident team should regularly review and update contingency plan, share with all staff, and inform new staff.
- Maintain updated lists of contact details for parents, staff, governors, agencies. Store copies on and off site.
- Keep a list of staff with first aid qualifications
- For offsite trips, have accurate lists of staff/students, contacts, and medical information.
- Have a clear and agreed response for dealing with social media and regular media. This should be an SLT responsibility
- Draft letters that could be sent out to parents/ carers (see appendices for example)
- Create/ source handouts on normal trauma reactions

Immediate Response Stage

Remember, children and young people are likely to cope best if you are able to provide them with opportunities to feel:

1. Safe
2. Calm
3. Connected
4. In Control
5. Hopeful

The UKTC guidance offer suggestions for how the above can be achieved in the aftermath of a critical incident. The guidance includes a very useful framework for how to share information with children and young people (p21-22)

In addition, we advise:

Gather Information

Obtain accurate information about the incident - what happened, where, injuries/names, location of those involved. Avoid rumours and speculation.

Inform Staff

- Brief all staff promptly on the incident. May need a meeting.
- Establish procedures to keep staff updated.
- Agree how and when to inform pupils.
- Be sensitive to impacted staff.

Inform Governors/Authorities

Inform Chair of Governors and the Educational Psychology Service as soon as possible.

- eps@n-somerset.gov.uk
- guy.clayton@n-somerset.gov.uk
- 07811 307321 – Guy Clayton, Principal Educational Psychologist

Inform Directly Involved Parents

- Contact quickly with sensitivity. Ensure consistency and accuracy. Avoid long chains of communication.
- Set up a meeting room for parents. Have updated emergency contacts. Inform all with parental responsibility.

- Fully brief the staff member making calls. Record contacts made. Offer transport help. Suggest contacting relatives/neighbours. Share contact number for enquiries. Advise how to get updates. Where appropriate, share contact details of other affected families.

Inform Other Parents

Inform all other parents of the incident. Do not share names. Explain psychological support available. Provide contact for updates.

Inform Pupils

Tell pupils simply and honestly in small groups. Answer questions factually, avoiding speculation. Provide extra support for more impacted groups. Inform relatives, like siblings, separately if possible.

Manage Enquiries

- Have a clear communications plan outlining roles and responsibilities.
- Establish facts/timeline. Identify audiences, spokespeople and partners. Agree sign-off process. Capture key messages. Signpost people to a single point for updates, including social media account. Put a holding message on school channels.
- Draft and approve communications. Consider legal/democratic advice if necessary. Send out messages.
- Monitor feedback. Review messaging gaps. Adapt channels if needed. Address points in future updates.
- Repeat: Establish updates, review messages, update stakeholders, issue communications, monitor coverage, identify support needs.
- Later: Consider follow-ups like reviews, court cases, anniversaries. Evaluate effectiveness. Thank involved staff. Arrange post-crisis support.
- For concerning social media posts, contact platform to request content removal. Seek advice from UK Safer Internet Centre helpline.

Medium term response

After a critical incident, most staff, children, and young people will start to recover over weeks and months, experiencing less intense emotions and resuming daily activities. Typical responses to a traumatic event might include:

- An initial psychological numbing (thought to be the mind's way of coping with extreme trauma and stress);
- Feelings of helplessness, and negative view of the world and others;
- Guilt and blame;
- Rejection of, or lack of faith in, help and support from others;
- Nightmares and/or flashbacks of the traumatic event, potentially triggered by memories of sounds, sights, smells that have been witnessed;
- Avoidance of discussion of the event.

It is important to understand that these are common reactions to abnormal / unusual situations.

As noted within the guidance from UK Trauma Council '*Creating the best environment for recovery after a critical incident isn't just about what you do in the immediate aftermath of the event. Traumatic events have long-term impacts, and you can continue to make a difference in the medium and long-term*' (p24).

Page 24 onwards of the UK Trauma Council guidance outlines advice on how to help staff and pupils continue to feel:

- **Safe:** the guidance outlines the need to revisit and update the information that has gone out about the incident
- **Calm:** Identify staff and pupils that are more vulnerable and/or do not appear to readjust as quickly as others (i.e. their experience of intense emotions is not subsiding as quickly as expected). Consider additional support, which may include referrals to outside agencies
- **Connection:** Look for opportunities to strengthen the community
- **In Control:** Giving children and young people a voice in decision making
- **Hopeful:** Looking for opportunities to acknowledge any positives in how the community are coping

These events are traumatic for the whole school community, and it is important that adults are supported to look after their own emotional wellbeing as well as that of others. The EPS recommends drawing upon coping strategies within the BASIC Ph model of resilience. An outline of this can be found in Appendix 4.

Ongoing Response

Continue to apply the five principles in the months and years after a critical incident to support staff and children/young people to feel:

- **Safe:** Build on structure and routine as you find a new sense of normal.
- **Calm:** Identify and acknowledge both key dates and triggers that might bring distress. Revisit strategies for regulating emotions and consider the need for specialist help for those who persistently struggle.
- **Connected:** Draw together as a community as you plan for anniversaries, considering ways to mark the event and those affected.
- **in Control:** Consider seeking feedback from those in your community to help identify and share lessons learned.
- **Hopeful:** Continue to foster a sense of hope and plan for the future. Look to identify signs of post traumatic growth as you acknowledge how far everyone has come.

With this support around them, most staff, children and young people will begin to recover in the weeks and months following a critical incident. Research has found that for most children, typical trauma responses are likely to reduce within 1-6 months following the incident (Hiller et al. 2016). This doesn't mean they forgot the event, but just that their intense, frequent and overwhelming emotions are starting to subside or settle and they can get on with their day, more of the time. Others, however, may struggle beyond those first few weeks and will need a bit more support.

There are no hard and fast rules and no simple tests to identify those that need help, but think about the following areas to help you assess the level of difficulty or distress they are experiencing:

- Severity
- Duration
- Frequency
- Direction and rate of change
- Impact
- Persistence

For those young people where you have ongoing concerns and feel they may need more specialist support, you may want to speak to one of the following services:

- Internal services such as a school counsellor,
- General Practitioners (GPs),
- Educational Psychology Service (EPS),

- Child and Adolescent Mental Health Services (CAMHS),
- Mental Health Support Teams (MHST),
- Charities (such as counselling and child bereavement services).

Contacts for a range of service are provided in Appendix 1.

Appendices

Appendix 1: Sources of further information, including contacts

Contact	Name	Telephone Number
EDUCATIONAL PSYCHOLOGY SERVICE	Dr Guy Clayton (Principal Educational Psychologist)	Mob: 07811 307321
	Dr Dulcie Gray (Senior Educational Psychologist)	Mob 07585795574
	Dr Sam Bougourd (Educational Psychologist)	Mob 07890583116
	Dr Anya Matosian (Educational Psychologist)	Mob: 07919 104907
	Dr Becky Davis (Educational Psychologist)	Mob 07748146573
	Mr Joe Bolton (Impact Analyst – general contact number for EPS)	Email: EPS@n-somerset.gov.uk
CRUSE	FREEPHONE	0808 808 1677
Front Door – Early Help		01275 888808 childrens.frontdoor@n-somerset.gov.uk
CHILDLINE	FREEPHONE	0800 11 11
LOCAL HOSPITALS	<ul style="list-style-type: none"> • Weston General Hospital • Bristol Royal Infirmary • Southmead Hospital • Royal United Hospital - Bath 	<ul style="list-style-type: none"> • 01934 636363 • 0117 923 0000 • 0117 9505050 • 01225 428331

Child Bereavement Charity

Tel: 0800 02 888 40 / 01494 568 900

E-mail: support@childbereavementuk.org

Web: www.childbereavement.org.uk

Child Death Helpline Department

York House

37 Queen Square

London

WC1N 3BH

Helpline: 0800 282 986 / 0808 800 6019 if calling from a mobile phone

Email: contact@childdeathhelpline.org

Web: www.childdeathhelpline.org.uk

Childline

NSPCC

Weston House

42 Curtan Road

London

EC2A 3NH

Helpline: 0800 1111

Web: www.childline.org.uk

Compassionate Friends (Self-help organisation for bereaved parents)

14 New King Street

Deptford

London

SE8 3HS

Helpline: 0345 123 2304

E-mail: helpline@tcf.org.uk

Web: www.tcf.org.uk

Online Support: <https://www.tcf.org.uk/content/online-support/>

Cruse Bereavement Care

PO Box 800

Richmond

Surrey

TW9 1RG

Helpline: 0808 808 1677

E-mail: helpline@cruse.org.uk

Web: www.cruse.org.uk

Local Cruse Branches:

Bristol area -
9A St James Barton
Bristol
BS1 3LT
Tel: 0117 926 4045
Email: bristol@cruse.org.uk

Papyrus – prevention of young suicide: www.papyrus-uk.org

St Margaret's Hospice
Little Tarrat Lane
Yeovil
Somerset
BA20 2HU
Tel: 01935 709480
Tel: 0800 068 4141
Email: pat@papyrus-uk.org
Email: Kacey.Leader@st-margarets-hospice.org.uk
Bereavement Service: 01935 709497
Web: www.st-margarets-hospice.org.uk

Samaritans provide a 24-hour service offering confidential emotional support to anyone who is in crisis.

Helpline: Freephone 116 123
E-mail: jo@samaritans.org
Web: www.samaritans.org

Responding to a suicide

E-mail stepbystep@samaritans.org
Freephone 0808 168 2528
www.samaritans.org/your-community/supporting-schools/step-step

The Rainbow Centre for Children

(For children affected by cancer, life threatening illness and bereavement)
27 Lilymead Avenue
Bristol
BS4 2BY
Tel: 0117 985 3343
Web: www.rainbowcentre.org.uk
Email: contact@rainbowcentre.org.uk

Together for Short Lives

(Association for Children with Terminal and Life-threatening conditions and their families)

New Bond House

Bond Street

Bristol

BS2 9AG

Helpline: 0808 8088 100

Tel: 0117 989 7820

Web: www.togetherforshortlives.org.uk/

Winston's Wish for anyone caring for a child who has been bereaved:

Winston's Wish

3rd Floor

Cheltenham House

Clarence Street

Cheltenham

Glos

GL50 3JR

Helpline: 08088 020 021

E-mail: info@winstonswish.org.uk

Web: www.winstonswish.org

The Young Minds Parent Information Service provides information and advice on child mental health issues.

Tel: 0808 802 5544

Web: www.youngminds.org.uk

Appendix 2 – Summary of EPS Response

<p>LEVEL 1</p>	<p>Bereavement and Loss</p>	<ul style="list-style-type: none"> • Accident, illness, death of a pupil/member of staff/parent, out of school. • Event is not sudden or/and traumatic. • School able to cope, support strategies in place. • Low impact/awareness for majority of pupils/staff. • Advice needed for staff – coping with bereavement and loss, normal grieving process. 	<p><u>Response:</u> Telephone conversation with Headteacher</p>
<p>LEVEL 2</p>	<p>Critical Incident</p>	<ul style="list-style-type: none"> • Pupil or staff member suicide • Significant accident or illness/ death of a pupil/member of staff/parent, at or near school, or on a school trip. • Event is sudden and traumatic. • School feels unable to cope, significant numbers of distressed pupils and staff. • School request EPS support and advice to help manage the critical incident. 	<p><u>Response:</u> Immediate support from the EPS by telephone (including an out of hours service.) Same day attendance in school if appropriate in order to support the Headteacher and Senior Leadership Team.</p>
<p>LEVEL 3</p>	<p>Major Disaster</p>	<p>Large scale disaster affecting the school and/or the local community. County’s Emergency Planning Team implement disaster plan. EPS response is part of a much larger multi-agency response led by SSD and Emergency Planning Team. National as well as local impact – high media interest.</p>	<p><u>Response:</u> Full EPS involvement co-ordinated by the Senior EP in liaison with lead personnel in other agencies.</p>

Appendix 3 - Proforma Letter

FOR SCHOOLS TO SEND TO PARENTS IN THE EVENT OF A TRAGIC INCIDENT

Dear Parents and Carers,

It is with great sadness that I inform you of [brief details of incident]. This loss deeply affects our entire school community. Earlier today, students were informed of the news by their teachers.

We came together as a school to honour and pay tribute to [name] in a special assembly/service. He/She will be remembered for [positive qualities]. Our hearts go out to [name's] family during this incredibly difficult time.

[If applicable] – During the day we have been supported by the Educational Psychology Service and this help will continue as necessary during the coming days.

[If applicable]: Our school has been working closely with counsellors to support students as needed. Please contact us if you feel your child requires any additional assistance coping with this loss.

While this is a sad and challenging time, I am confident we will unite as a community to care for one another. Our thoughts are with [name's] loved ones.

Sincerely,

Appendix 4 – BASIC Ph Model of Resilience

- B – beliefs. Some people will turn to their belief system to help them understand and process the event. Thus, it would be helpful if there is the opportunity to write prayers/thoughts, talk about beliefs and if in a faith school, there may be the opportunity for religious worship.
- A – affect. Some people will express themselves emotionally, for example, becoming angry or tearful. There should be the recognition that these feelings are common reactions to grief and may change over time. There should be a variety of avenues for expression such as, talking about thoughts or feelings, singing, dancing, sports etc.
- S – social. Some people will turn to each other at times of challenge and find comfort through being with others. Opportunities to work collaboratively, activities involving team work etc will support this need.
- I – imagination. Other people may find their coping strategies through their imagination, for example, art, music, writing stories, drama etc.
- C – cognitive. Some people find it helpful to think through the event in order to process the information; it will be important that factual information is provided for these individuals.
- Ph – physical. Other people cope by engaging in physical activities, such as sports.