St. Joseph's Patrician College, Galway.
'THE BISH'

Critical Incident Management Policy

Ratification Date:

Policy Revision Number:	Date.
1	16th May 2022
2	24th March 2025
3	19th November 2025

Review Date: September 2026

This policy is in keeping with the Child Protection Procedures as adopted by the Board of Management. Teachers are reminded that they are mandated persons and must be familiar with their obligations with reference to the child first: National Guidance for Protection and Welfare of Children 2017 and the Children First Act 2015

Table of Contents:

Description	Page
List of Common Acronyms.	3
Outline of Plan	4-5
Review and Research	4
What is a 'Critical Incident'?	4
Aim of Critical Incident Management Plan (CIMP).	5
Critical Incident Management Team (CIMT). And specified roles.	7-9
Team Leader	7
Garda Liaison	7
Staff Liaison	7
Student Liaison	8
Community/agency liaison	8
Parent liaison	8
Media liaison	9
Administrator	9
Record keeping	9
Confidentiality and good name considerations	9
Critical Incident Rooms	10
Critical Incident Management Team Contact details	10
Short term actions – Day 1	11
Medium term actions - (Day 2 and following days)	12
Follow-up – beyond 72 hours	13
EMERGENCY CONTACT LIST	14-15
Table of Appendices	17
Appendices	17-53

List of Common Acronyms.

ASTI	Association of Secondary Teachers in Ireland.
CAMHS	Child and Adolescent Mental Health Services
CIMP	Critical Incident Management Plan
CIMT	Critical Incident Management Team
DES	Department of Education and Skills
DOH	Department of Health
EAM	Examination and Assessment Manager
EAS	Employee Assistance Service
ETB	Education and Training Board
HEA	Health Education Agency
HSE	Health Service Executive
INTO	Irish National Teachers Organisation
IPPN	Irish Primary Principals Network
LHO	Local Health Office
NAPD	National Association of Principals and Deputy Principals
NCCA	National Council for Curriculum and Assessment
NEPS	National Educational Psychological Service
NOSP	National Office for Suicide Prevention
PDST	Professional Development Service for Teacher
RTA	Road traffic accident
SEC	State Examinations Commission
SLT	Senior Leadership Team.
SPHE	Social, Personal and Health Education
TUI	Teachers Union of Ireland
WHO	World Health Organisation

The Plan and policy outlined below is designed as an aid to St. Joseph's Patrician College in dealing with a critical incident. Additional guidance is contained in Responding to Critical Incidents Guidelines and Resource Materials for Schools (2016).

St. Joseph 's Patrician College aims to protect the well-being of its students and staff by providing a safe and nurturing environment at all times. As stated in the School Ethos:

"In St. Joseph's Patrician College there is a genuine attempt on the part of all to create a school community, of equality, fairness and care"

The Board of Management, through Sarah Gleeson, The *Principal* has drawn up a Critical Incident Management Plan as one element of the school's policies and plans.

Review and Research

The CIMT have consulted resource documents available to schools on www.education.ie and www.nosp.ie including:

- Responding to Critical Incidents Guidelines and Resources for Schools (NEPS 2016)
- Suicide Prevention in Schools: Best Practice Guidelines (IAS, National Suicide Review Group (2002)
- Suicide Prevention in the Community - A Practical Guide (HSE 2011)
- Well-Being in Post-Primary Schools Guidelines for Mental Health Promotion and Suicide Prevention (DES, DOH, HSE 2013)
- Well-Being in Primary Schools - Guidelines for Mental Health Promotion (DES, DOH, HSE 201 5).
- Student Support Teams in Post Primary Schools (2021).

What is a 'critical incident'?

The staff and management of St. Joseph's Patrician College recognise a critical incident to be "an incident or sequence of events that overwhelms the normal coping mechanism of the school". Critical incidents may involve one or more students or staff members, or members of our local community. Types of incidents might include:

- *The death of a member of the school community through accident, violence, suicide or suspected suicide or other unexpected death*
- *An intrusion into the school*
- *An accident involving members of the school community*
- *An accident/tragedy in the wider community*

- *Serious damage to the school building through fire, flood, vandalism, etc*
- *The disappearance of a member of the school community.*

- *Serious Reputation damage to the school, examples to include but not limited to:*
  - *Data breach.*
  - *Hacking of school system.*
  - *Inappropriate media or social media activity/ behaviour.*
  - *Cyber-attack on school @Bish domain.*
  - *Reputational damage caused by members of Bish community.*

Aim

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

Creation of a coping supportive and caring ethos in the school

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

Physical safety

Health & Safety policy. Including but not limited to the following:

- Evacuation plan formulated
- Regular fire drills occur
- Fire exits and extinguishers are regularly checked
- Pre-opening supervision in the school yard
- Rules of the yard

Psychological safety

The management and staff of St. Joseph's Patrician College 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 and Health Education (SPHE) is integrated into the work of the school. It is addressed in the curriculum by addressing issues such as grief and loss; communication skills; stress and anger management; resilience; conflict management; problem solving; help-seeking; bullying;

decision making and prevention of alcohol and drug misuse. Promotion of mental health is an integral part of this provision

- Staff have access to training for their role in SPHE
- Staff are familiar with the Child Protection Guidelines and Procedures and details of how to proceed with suspicions or disclosures
- Resources on difficulties affecting the post primary school student are available from Guidance Counsellors
- Information is provided on mental health in general and such specific areas as signs and symptoms of depression and anxiety through the Wellbeing Programme.
- Staff are informed in the area of suicide awareness and counsellors are trained in interventions for suicidal students (staff training to be provided in school year 2022/2023).
- The school has developed links with a range of external agencies – NEPS. (NEPS will oversee engagement with other agencies as required.)
- 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 0023/2018 (Post-Primary)
- The school has a clear Anti Bullying policy and deals with 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 on 2007 for primary schools and 2010 for post primary schools. See also Student Support Teams in Post Primary Schools (2014). These documents are available on www.education.ie
- Students who are identified as being at risk are referred to the designated staff member (e.g. guidance counsellor), concerns are explored and the appropriate level of assistance and support is provided. Parents are informed, and where appropriate, a referral is made to an appropriate agency.
- Staff are informed about how to access support for themselves. Employee Support **Spectrum Life for Teachers**. Details are posted on Mental Health Board in each staffroom. Staff Wellbeing Policy currently being developed (April 2022)

Critical Incident Management Team (CIMT).

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

- Main school office.
- Principal/ Deputy Principal Office.
- Staff Room.
- Guidance Counsellor Office.
- Held electronically on Staff MsTeam.

Team leader: *(Sarah Gleeson. Principal.)*

Role

- Alerts the team members to the crisis and convenes a meeting
- Coordinates the tasks of the team.
- Liaises with the Board of Management; DES; NEPS; SEC
- Liaises with the bereaved family, in relation to the level of information to be shared with others including students or who makes the decision on how much information to relay i.e. level of factual information to be released.
- Liaises with Gardaí.
- Inform Insurance Company: Marsh.

(in the absence of the team leader one of Deputy Principals, Robert Grealish or Barry McDermott will take up role of team leader.)

Garda liaison *(Garda Hugh Rogers.)* **(Team Leader)**

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

Staff liaison *(Robert Grealish Deputy Principal)*

Role

- Leads briefing meetings for staff on the facts as known, gives staff members an opportunity to express their feelings and ask questions, outlines the routine for the day. Notify absent staff.

Advises staff on the procedures for identification of vulnerable students

- Provides materials for staff (from their critical incident folder)
- Keeps staff updated as the day progresses
- Is alert to vulnerable staff members and contacts them individually

- Advises them of the availability of the EAS and gives them the contact number.

Care Group / Student Support Team.

- A student support team is a central part of the student support system in a school. It is the overarching team concerned with the progressing of actions for the welfare and wellbeing of all students. It is a mechanism through which many of the existing student supports are coordinated and planned. A student support team acts as a school hub, bringing coherence to the support system by coordinating the valuable work of departments, teams and/or groups such as the Junior Cycle Wellbeing Curricular Planning team, the Special Education Needs (SEN) department, the Critical Incident Management Team (CIMT) along with guidance and pastoral staff. School Leadership also has a significant role guiding and supporting the school's student support team.

Student liaison *(Prefects, Student Council)* **(Coordinated by Barry McDermott Deputy Principal)**

Role

- *Decision may be made to share information with this group before the main student body.*
- Co-ordinate information from tutors and year heads about students they are concerned about. This information will be shared with care group.
- Alerts other staff to vulnerable students/ absent students. (appropriately).
- Looks after setting up and supervision of 'quiet' room where agreed.

- Compile list of contacts available for display on notice boards in relation to agencies/community support groups available to Students e.g. Samaritans, Bereavement Counsellors, Jigsaw, Childline, etc. This information should be visible and accessible to students in the long-term after incident.

Community/agency liaison *(Sarah Gleeson. Principal)*
Role

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

- Updates team members on the involvement of external agencies

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

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

Administrator *(Sharon Mulryan / Ciara Stapleton.)*
Role
- Maintenance of up to date telephone numbers of
  - Parents or guardians
  - Teachers
  - Emergency services
- Takes telephone calls and notes those that need to be responded to
- Ensures that templates are on the schools system in advance and ready for adaptation
- Prepares and sends out letters, emails and texts
- Photocopies materials needed
- Maintains records.
- Will be briefed by Team Leader in advance of any communications form the school.

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

Confidentiality and good name considerations

Management and staff of St. Joseph's Patrician College have a responsibility to protect the privacy and good name of people involved in any incident and will be sensitive to the consequences of public statements. Members of school staff will bear this in mind, and seek to ensure that students do so also, e.g. the term 'suicide' will not be used unless there is solid information that death was due to suicide, *and* that the family involved consents to its use. The phrases 'tragic death' or 'sudden death' may be used instead. Similarly, the word 'murder' should not be used until it is legally established that a murder was committed. The term 'violent death' may be used instead.

Critical Incident Rooms In the event of a critical incident, the following rooms are designated for the indicated purposes. **Room 110 will become the control room.**	
Room Name:	**Designated Purpose:**
Staffroom	Main room for meeting staff
Hall/ Gym	Meetings with students
Room 110	Meetings with parents
Room 110	Meetings with media
Counsellor Office	Individual sessions with students
Room 110	Meetings with other visitors

Consultation and communication regarding the plan

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

Our school's final policy and plan in relation to responding to critical incidents has been presented to all staff. Each member of the critical incident team has a personal copy of the plan.

All new and temporary staff will be informed of the details of the plan by the principal

The plan will be updated annually in September.

Critical Incident Management Team		
Role	**Name**	**Phone**
Team leader:	*Sarah Gleeson*	
Garda liaison	*Hugh Rogers*	
Staff liaison	*Barry McDermott* *Robert Grealish*	
Student liaison	*Prefects/ Student Council*	Contacted in the school
Community liaison	*Sarah Gleeson*	
Parent liaison	*Robert Grealish / Barry McDermott.*	
Media liaison	*Kieran Kavanagh*	
Administrator	*Sharon Mulryan* *Ciara Stapleton*	

Short term actions – Day 1

Task	Name
Gather accurate information	Principal Sarah Gleeson
Who, what, when, where?	
Convene a CIMT meeting – specify time and place clearly	Guidance Counsellor Office ground floor. ASAP
Brief office staff on agreed communications	Principal Sarah Gleeson.
Contact external agencies	NEPS /Gardaí/ City Council/ Insurance Company/ HAS.
Arrange supervision for students	Deputy Principals Barry McDermott / *Robert Grealish*
Hold staff meeting (As soon as is possible)	**All staff (Teaching and non-Teaching).**
Agree schedule for the day. Is there an action assigned in relation to decision to suspend school timetable for periods to allow students absorb information and support each other through the incident and when it's appropriate to reinstate normal school timetable/activities	Care Group / SLT
Inform students – (close friends and students with learning difficulties may need to be told separately)	Guidance Counsellors / Care team / Year Head / Class teachers.
Compile a list of vulnerable students	Care Team / Year Head
Prepare and agree media statement and deal with media	Chairperson BOM
Inform parents	Principal Sarah Gleeson
Hold end of day staff briefing	All Staff (Teaching and non-teaching) / Care Group
Prioritise Medium Term actions and assign roles. **Make decision about school closure (if required)**	BOM

Medium term actions - (Day 2 and following days)

Task	Name
Convene a CIMT meeting to review the events of day 1	Team leader
Meet external agencies	As required
Meet whole staff	As required
Arrange support for students, staff, parents	As required
Visit the injured	As required
Liaise with bereaved family regarding funeral arrangements / book of condolences.	As required
Agree on attendance and participation at funeral service	As required
Review response to incident and amend plan	CMIT. As required
Make decisions about school closure	BOM. As required

Follow-up – beyond 72 hours

Task	Name
Monitor students for signs of continuing distress	Class teachers / Guidance Counsellors.
Liaise with agencies regarding referrals	As required
Plan for return of bereaved student(s)	As required
Plan for giving of book of condolences to bereaved family	As required
Decide on memorials and anniversaries	BOM/Staff, parents and students
Assessment of Care need of CIMT	Team leader.
Review response to incident and amend plan	CMIT / BOM

EMERGENCY CONTACT LIST

AGENCY	CONTACT NUMBERS
Garda	Mill Street 091 563161
Hospital	University College Hospital (091) 524 222
Fire Brigade	112 / 999
Local GPs	Dr Grace Doyle (retired but available for advice)
HSE	
Community Care Team	(091) 523 122 Galway Local Health Office
Child and Family Centre	Susan Forde - Family Support Services Manager - (091) 548327,
Child and Family Mental Health Service (CAMHS)	Ballard House - (091) 580100 Merlin Park - (091) 731401
School Inspector	Kenneth Nally
NEPS Psychologist	Gráinne McDonnell. 087 316 5402
DES	(01) 889 6400
ASTI	01-6040160
Clergy	Augustinian Church
Le Chéile	01-5380104.
Marsh	Denise Cuggy

JMB	01-2838255. Brid De Bruin
Galway City Council	091 536400
HSA	01 6147000
State Exams Commission	(090) 644 2700
Employee Assistance Service: Spectrum Life	1800411057

Samples of Letters /Correspondence:
Available from Critical Incident Management Team and in folders.

- **Principal**
- **Deputy Principal.**
- **Office Staff.**

The Board of Management ratified this policy on the:	DATE: 18th November 2025
	Signed:
Kieran Kavanagh Chairperson	
Sarah Gleeson Secretary of the BOM	
Date of next review:	September 2026

Appendices:

Table of Appendices:

RESPONDING TO CRITICAL INCIDENTS

NEPS Guidelines and Resource Materials for Schools 2016.

	Number	Title	Resource Refers to resource material in Guidelines.	Page
	1	Student Contact Record. (Form)	R1	18
	2	Letter from School to Parents:	R2	19
	3	Sample letter to Parents/ Guardians Violent Death	R3	20-21
	4	Sample Announcement to Media	R4	22
	5	A CLASSROOM SESSION FOLLOWING NEWS OF A CRITICAL INCIDENT.	R5	22-24
	6	CHILDREN'S UNDERSTANDING AND REACTION TO DEATH ACCORDING TO AGE.	R6	25-26
	7	STAGES OF GRIEF.	R7	27
	8	HOW TO COPE WHEN SOMETHING TERRIBLE HAPPENS.	R8	28
	9	HOW TO COPE WHEN SOMETHING TERRIBLE HAPPENS.	R9	29
	10	GRIEF AFTER SUICIDE OR SUSPECTED SUICIDE.	R10	30
	11	REINTEGRATION OF THE BEREAVED CHILD IN SCHOOL	R11	31
	12	WAYS TO HELP YOUR CHILD THROUGH THIS DIFFICULT TIME.	R12	32
	13	A GENERAL INTERVIEW GUIDE FOR GUIDANCE COUNSELLORS, CHAPLAINS, OTHER DESIGNATED STAFF.	R13	33-34
	14	Checklist- Students At Risk	R14	35
	15	EXPLORING SUICIDE RISK AND GUIDANCE IF STUDENT EXPRESSES SUICIDE IDEATION	R15	36-37
	16	FREQUENTLY ASKED QUESTIONS (PRINCIPALS)	R16	39-40
	17	FREQUENTLY ASKED QUESTIONS (TEACHERS)	R17	41-42
	18	FREQUENTLY ASKED QUESTIONS (PARENTS)	R18	43
	19	CRITICAL INCIDENT POLICY & PLAN - FRAMEWORK	R19	

	20	CRITICAL INCIDENT MANAGEMENT TEMPLATE FOR SCHOOL PLAN.	R20	45-45
	21	Emergency Contact List	R21	46
	22	GUIDANCE ON SOCIAL MEDIA USE AND CRITICAL INCIDENTS.	R22	47-49
	23	TEACHERS HELPING STUDENTS IN TIME OF CRISIS OR EMERGENCY.	R23	50-57
	24	Useful Websites and helplines for accessing Resources.	R24	53-54

Appendix 1: Student Contact Record:

Name of staff member: _____

Date	Student Name	Class / year	Outcome (Include need for follow up)	Date and Time

Appendix 2: R2 Letter from School to Parents:

Coláiste Sheosaimh, Bráithre Naoimh Pádraig

St. Joseph's Patrician College

Nuns' Island, Galway, Ireland.

Dear Parent/Guardian

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

Our thoughts are with *(family name)*.

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

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

You can help your child by taking time to listen and by encouraging him/her to express feelings. All children are different and will express their feelings in different ways. It is not uncommon for children to have difficulty concentrating or 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 reaction. Over the course of the coming days, 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)*.

Guidance Counsellors:

Grace Denny

Emma Hammond

Year Head:

(as required)

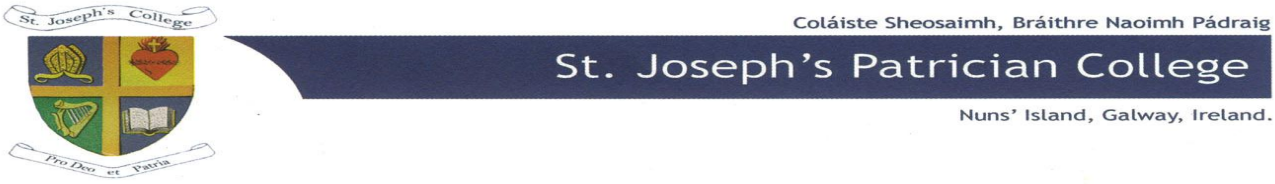
All of above are contactable through the office at 091 565980

Sarah Gleeson

Principal's signature

Appendix 3: R3 Sample letter to Parents/ Guardians Violent Death

This letter can be used as a template for schools when they are informing parents of a violent death, offering some advice and outlining what the school's response involves. (Give accurate information about the incident, but avoid using the word murder as this will not be established until the court case is completed).



Dear Parent/ Guardian

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

A child/young person from the neighbourhood, the sister/ brother of (name of student), a student here at school, was killed as a result of (a violent attack, violent incident in the street etc.) earlier this week. We are all profoundly saddened by his death. We have shared this information and 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 in their support of students.

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

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

The media are in the vicinity of the school and may approach you or your children. You need not respond to their questions if you are approached. We will not allow the media to interview your child at school and our general advice is that you should not let your children be interviewed. They are not mature enough to judge what to say and may say something they will regret later. In these times, young people tend to turn to social media to see what others are saying, or to find out more. While social media can be of great consolation, we would urge you to reinforce the need to be extremely sensitive about what your son/daughter might post to others.

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

Sincerely,

Sarah Gleeson

Principal.

Appendix 4: R4 Sample Announcement to Media

This can be used as a template by schools to be emailed, posted on the school social media site 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 *Sarah Gleeson* and I am the principal of St. Joseph's Patrician College, Galway. We learned this morning of the death of *(one of our students or Name of student)*. This is a terrible tragedy for family(ies), our school and our community. We are deeply saddened by these events. Our sympathy and thoughts are with *(Name)* family and friends.

Name of student/students was a (5th year boy) and will be greatly missed by all who knew him. We have been in contact with his/her parents and they have requested that we all understand their need for privacy at this difficult time.

Offers of support have been pouring in and are greatly appreciated. Our school 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 all day supporting and advising teachers in their efforts to assist our students at this time.

The teachers have been helping students to deal with the tragic event. The school has been open to parents to support them and to offer them advice and guidance.

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

Appendix 5: R5: **A CLASSROOM SESSION FOLLOWING NEWS OF A CRITICAL INCIDENT.**

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 may 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.	Tell the students in a calm, low key and factual voice • What has happened • Who was involved • When it happened • The plan of 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. You will probably be aware, through social media, that 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 Section 11, R24. 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 R9). 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. In addition to conversations they may have with friends on social media they may need to talk to someone in person about how they are feeling. Depending on the incident and the age of the students distribute handouts R7, R8, R9, R10.

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 **Advising About Social Media Use**	Discussions may begin with an outline of the various social media currently being used by 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 of ways in which it has gone wrong. Media involving live communication such as Skype or Viber 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 in R22.
STEP 6 **Empowerment**	Help the students to identify strategies that they might use to help manage their reaction, for example, talking to family and friends, getting enough sleep, taking plenty of exercise and appropriate use of social media - 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 7 **Closure**	End the session by focusing 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 playground 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 • 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 crisis and lessons learnt from their experiences. There will also be opportunities for structured discussion within the school's social, personal, and health education programmes. Social Personal & Health Education (SPHE) curriculum time is an ideal context in which to offer support.

Appendix 6: R 6 CHILDREN'S UNDERSTANDING AND REACTION TO DEATH ACCORDING TO AGE.

(This may be used with various groups and individuals)
Children's understanding and reaction to death will depend on their age and their developmental stage. The following are guides only as children will differ in their reactions and grasp of events for a range of reasons other than age alone.

AGES 0 – 2 YEARS

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

AGES 2 – 5 YEARS

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

How you Can Help:

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

AGES 5 – 9 YEARS

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

HOW YOU CAN HELP

Encourage the child to talk and cry about the deceased if they wish to, otherwise respect their silence

- Answer questions and provide as much factual information about the death as possible
- Reassure them that thinking and feeling ceases after death
- Be vigilant in relation to bullying.

AGES 9 – 12 YEARS
AGES 9 – 12 YEARS
ADOLESCENTS

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

- May wish to stay at home close to parents.

How You can Help:

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

ADOLESCENTS

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

How You can Help

- Offer them time to listen
- Allow them to express their grief in their own way
- Be prepared for mood swings
- Don't feel left out if they seem to value their friends more than their parents
- Children's use of social media should be monitored and supported by parents.

If parents are grieving themselves, they may be emotionally unable to support their other children. In this instance, another supportive adult in the child's life, e.g. other family members, friends, neighbours may need to
offer emotional support.
It should be remembered that for children with special educational needs, their understanding of what has
happened will be in line with their developmental age.

Appendix 7: R 7 STAGES OF GRIEF.

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

Denial, numbness, shock (up to 6 weeks)

- Death of the person may be denied
- Refusal to talk about the death
- Emerging feelings may be suppressed
- 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
- Emotional pain accompanied by dejection, hopelessness, lack of concentration
- Physical pangs of pain including loss of appetite and disturbed sleep
- 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.
- Changed relationship with the deceased – able to think of the deceased without pain
- Able to participate emotionally in new relationships.
- Reduction in physical/emotional symptoms.

Less guilt.

Appendix 8: R8: **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
- 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?
- 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
- If your feelings and reactions seem different from those of your friends, remember everyone reacts Differently.
- 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
- 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; www.reachout.com.au

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

Appendix 9: R9: **HOW TO COPE WHEN SOMETHING TERRIBLE HAPPENS**.

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

Feelings:	**Behavioural.**
• Fear • Anxiety • Guilt • Mood swings • Insecurity • Shame • Shock • Regret • Yearning • Anger • Numbness • Tearfulness • Confusion • Loneliness • Isolation	• Nightmares • Social withdrawal • Over reliance on use of social media • Loss of concentration/forgetfulness Physical/Verbal aggression • Misuse of drugs, including alcohol • Irritability
Physical	**Thoughts**
• Tiredness • Sleeplessness • Headaches • Stomach problems - Bowel/Bladder problems • Loss or increase in appetite	• Disbelief • Denial • Sense of unreality • Preoccupation with images of the event/person

Appendix 10: R10: 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 normal
- 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
- 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 and compassionate 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
- 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
- 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"
- Useful websites: www.spunout.ie; www.youth.ie; www.reachout.com.au
- Allow yourself to laugh with others and at yourself. This is healing
- 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

Appendix 11: R11: REINTEGRATION OF THE BEREAVED CHILD IN SCHOOL

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

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

Appendix 12: R12: 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 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, taking exercise, or talking
- Do not be surprised by changes in behaviour or personality. They will return to their usual selves in time
- 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.
- 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
- As well as advising your child about appropriate use of social media, monitor their use, particularly during this vulnerable time. Useful website: www.webwise.ie

Appendix 13: R13: 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.

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.

Student name	***DOB***	***AGE***	***M/F***	***Class/ Year***

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.

- Where were you when the event occurred?
- What did you see or what did you hear about what happened?
- How are you feeling now?
- How well do you know those who were hurt or killed?
- Has anything like this happened to you or any of your family before?
- How will your life be different now?
- How do you think this will affect your family in the days to come?
- What bothers you the most about what happened?
- What could you/they have done?
- Do you think anyone could have done something to prevent it?

Yes	No	Who

Thinking back on what happened

	Not at All	A Little	More Than A Little	Very Much
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

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

Appendix 14: R14: Checklist- Students At Risk

		Yes	No
1	Unexpected reduction of academic performance		
2	Talking about suicide		
3	Ideas and themes of depression, death and suicide in their work		
4	Making statements about hopelessness, helplessness or worthlessness		
5	Change in mood and marked emotionally instability		
6	Significant grief or stress		
7	Withdrawal from relationships		
8	Break up of an important relationship		
9	Discipline problems, being in trouble in school		
10	Withdrawal from extra-curricular activities		
11	Giving personal belongings away		
12	Loss of interest in things one cares about		
13	Neglect of physical appearance		
14	Physical symptoms with emotional cause		
15	High risk behaviours		
16	Alcohol or drug abuse		
17	Bullying or victimization		
18	History of suicidal behaviour e.g. cutting or overdose risk behaviours		
19	Family history of suicide/attempted suicide		
20	Over use or reliance on social media		

Appendix 15: R15: 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.

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.

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

Previous attempt

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

Personal/family history

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

Physical/emotional history

A student who has experienced major personal difficulties, whether as a result of physical (recent hospitalisation, chronic illness) or significant emotional difficulties (depression, loneliness, guilt, anger etc.) is more at risk. **"How**

have things being going for you? Have you been ill? Has anything significant happened to you recently?"

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

Means
Does the student have the means and a place to do it. Ask **"How do you intend to do it?"** Are the means available lethal? Have they access to a 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 in 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 16: R16: FREQUENTLY ASKED QUESTIONS (PRINCIPALS)

The following is a summary of questions often asked by principals in the aftermath of a critical incident.
Q. **What do I do first on hearing news of the incident/death?**
A. If the source of the news is the affected family, express condolences and get as many facts as possible sensitively. If it is from another source, check for veracity; obtain the facts; the numbers injured etc. Ascertain who is to contact the next of kin. The Gardaí may have already undertaken this role.

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

Q. **What should I do on the first morning back at school?**
A. Call a meeting of the Critical Incident Management Team. If the team is not available call a meeting of the BOM and Senior Management. Set up a team for the duration of the crisis.

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

Q. **How do I manage communication?**
A. Schools will need to manage telephone and email contacts, as this can be stressful. Assign one or two suitable people to this task. Provide clear guidance on what to say or write. An agreed factual statement should be available. This can be placed on the schools' social media site.

Q**. How do I keep staff up to date?**
A. The staff room is a very important room for teachers on this day. Informal briefings can take place during the breaks, as well as more formal meetings at the beginning and end of each day.
Q. How do I dovetail the school's part in the funeral/religious ceremonies with the wishes of the parents/guardians?
A. The school chaplain or local clergy/parish priest may be the main link person here. Ensure that the parents' wishes are respected and that participation of any students or friends is agreed with them. Ensure that beliefs about death or particular customs about funerals of different religious or ethnic groups are understood and respected.

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

Q**. How do I handle the media? (See Section 9 – Dealing with the media)**
A. Delegate one suitable person to deal with the media. Prepare a media statement.
- State that it is a difficult time for the school community

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

Q. What/when should I tell staff/students about the incident?
A. Give the facts, as you know them. This is the best way to counter rumour and fantasy. It should be done as soon as possible to prevent staff and students hearing from other, sometimes inappropriate, sources.

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

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

Q. **How long does it take to come to terms with bereavement?**
A. There is no definite answer to this. Each individual progresses at his/her own pace and there are enormous variations, (see R7).

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

Q. Where a lot of well-intentioned friends are calling to the house and perhaps staying out late at night, what should I advise a grieving family to do?
A. Encourage them to set clear limits, when friends can call and when they should leave. Often the bereaved adults need to be reminded that setting clear limits is good. Friends may stay too long because they do not know when or how to leave the house. School can help by suggesting time limits to the friends. This is especially important at exam time when rest is essential.

Q. What can I do about phone texting or social media use, especially if unreliable (or inappropriate) messages are being passed about?
A. A critical incident highlights the need for a well-established school policy on this issue (see R22). Students should be advised that they are being given reliable and up-to date information by the school. They should be encouraged to report to a teacher all social media communication received which are at variance with the facts as known, or which are a cause of worry or concern - especially about friends.

Q. How long do we leave the memory area in the classroom/corridor

A. Sometimes out of respect for the deceased a space/table is set up with a picture, candles flowers, messages, cards, etc. This can offer a focal point in the initial days of grieving. The items can be brought to the funeral service as part of the offertory procession.

Appendix 17: R17: Frequently asked Questions (Teachers)

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

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

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

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

A. You should acknowledge the situation and clarify the facts, as they are known. Honesty is essential. Encourage questions so that the students have a clear understanding. 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?

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 R6, R7 and R9). 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 R5. An advantage here is that students may feel safer and more secure with their regular classroom teacher.

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 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. If you need help, or a friend is in difficulty, it is best talk to us rather than relying totally on social media."*

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 18: R18: FREQUENTLY ASKED QUESTIONS (PARENTS)

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. Information on social media is not reliable and always needs to be checked.

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. 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. Advise on and monitor safe use of social media.

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/HSE Services.

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 20: R20: CRITICAL INCIDENT MANAGEMENT TEMPLATE FOR SCHOOL PLAN.

CRITICAL INCIDENT MANAGEMENT TEAM.

Critical Incident Management Team		
Role	**Name**	**Phone**
Team leader:	*Sarah Gleeson*	
Garda liaison	*Hugh Rogers*	
Staff liaison	*Barry McDermott/* *Robert Grealish*	
Student liaison	*Prefects / Student Council*	Contacted in the school
Community liaison	*Sarah Gleeson*	
Parent liaison	*Sarah Gleeson*	
Media liaison	*Kieran Kavanagh*	
Administrator	*Sharon Mulryan* *Ciara Stapleton*	

Short term actions – Day 1

Task	Name
Gather accurate information	Principal Sarah Gleeson
Who, what, when, where?	
Convene a CIMT meeting – specify time and place clearly	Guidance Office ASAP
Contact external agencies	NEPS
Arrange supervision for students	Deputy Principal Barry McDermott/ *Robert Grealish*
Hold staff meeting (as soon as possible)	**All staff (Teaching and non-Teaching).**
Agree schedule for the day	
Inform students – (close friends and students with learning difficulties may need to be told separately)	Guidance Counsellors / Care team / Year Head
Compile a list of vulnerable students	Care Team / Year Head
Prepare and agree media statement and deal with media	Chairperson BOM
Inform parents	Principal Sarah Gleeson
Hold end of day staff briefing	All Staff (Teaching and non-teaching) / Care Group

Appendix 21: R21: Emergency Contact List

AGENCY	CONTACT NUMBERS
Garda	Mill Street 091 563161
Hospital	UHG - (091) 524 222
Fire Brigade	112 / 999
Local GPs	Dr Grace Doyle (retired but available for advice)
HSE	1850 24 1850 or 01 240 8787
Community Care Team	(091) 523 122 Galway Local Health Office
Child and Family Centre	Susan Forde - Family Support Services Manager - (091) 548327.
Child and Family Mental Health Service (CAMHS)	Ballard House - (091) 580100 Merlin Park - (091) 731401
School Inspector	Kenneth Nally
NEPS Psychologist	Grainne McDonnell 087 316 5402
DES	(01) 889 6400
ASTI	01-6040160
Clergy	Augustinian Church
State Exams Commission	(090) 644 2700
Employee Assistance Service	1800 411 057

Appendix 22: R22:

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 are appropriate, including communication via electronic media, such as email, texting and social media etc." (The Teacher 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.ias.ie and www.samaritans.org/ireland/links.**

- 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.

Appendix 23: R23: TEACHERS HELPING STUDENTS IN TIME OF CRISIS OR EMERGENCY.

1.LISTEN

2.PROTECT

3.CONNECT

4.MODEL

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:**

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 returning to other school-based activities?

- What might be preventing a student from paying attention or doing homework?

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.

2. **PROTECT.**

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.

3. **CONNECT.**

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
- 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.

4. **MODEL.**

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.

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

- 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.

Appendix 24: R24: Useful Websites and helplines for accessing Resources.

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.

WEBSITES:

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 wellbeing 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.hospicefoundation.ie**

Lifelines supports all people who are affected in anyway by self-injury within the United Kingdom and beyond. It supports people who self-injure, and their family and friends. **www.selfharm.org**

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

Resources and support for those dealing with suicide, depression or emotional distress, particularly teenagers and young adults. **www.papyrus-uk.org**
A national charity committed to improving the mental health of all children and young people. **www.youngminds.org.uk**
An Irish website covering all aspects of health, lifestyle, culture and craic. It's an online youth information centre, a magazine, a health clinic, a contact directory, a youth media forum a take action initiative, a community building place and lots more. **www.spunout.ie**
A site that focuses on issues relating to youth in Ireland today. **www.youth.ie**
An Australian site that helps young people through tough times. **www.reachout.com.au**
Mental Health Ireland aims to promote positive mental health and to actively support persons with a mental illness, their families and carers by identifying their needs and advocating their rights. The pro teen matters web magazine, which is created by young people for young people, has information about physical and mental health, frequently asked questions, competitions, jokes and stories. **www.mentalhelathireland.ie**
Non-judgemental information and support. **www.gayswitchboard.ie**

HELPLINES

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

Childline: 1800 666 666 (free calls)

The Samaritans: 1850 60 90 90 (local call costs)