CRITICAL INCIDENT POLICY & PROCEDURES

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<th><strong>Approving authority</strong></th>
<th>CEO &amp; President</th>
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<tr>
<td><strong>Approval date</strong></td>
<td>10 February 2014</td>
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<tr>
<td><strong>Purpose</strong></td>
<td>This policy outlines the policy and procedures for reporting and managing critical incidents.</td>
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<td><strong>Responsibility for implementation</strong></td>
<td>Vice President</td>
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<td><strong>Reviewed:</strong></td>
<td>February 2016</td>
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<td><strong>Next scheduled review</strong></td>
<td>February 2018</td>
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<td><strong>Document Location</strong></td>
<td>R:\Higher Education\HR\HR Policies\Critical Incident Policy &amp; Procedures.doc</td>
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Acknowledgement:
This policy is based on the Critical Incident and Mandatory Reporting Policy & Procedures applicable to the Ozford Education Group comprised of OZFORD ENGLISH LANGUAGE CENTRE (CRICOS: 02501G), OZFORD COLLEGE (CRICOS: 02427A) and OZFORD COLLEGE OF BUSINESS (CRICOS: 02573B).

1. **Principle**

The Institute of Higher Education (herein referred to as the “Institute”) recognises that planning for the management of a critical incident is essential to enable the Institute and its staff to meet the duty of care owed to its students.

All students at the Institute have the right to feel safe and to be safe. Staff members have a legal and moral responsibility to report and respond to critical incidences involving the students with whom they have contact with.

2. **Rationale**

2.1 The Institute recognises that appropriate infrastructure must be in place to ensure that all necessary support services are provided in the event of a critical incident. This document outlines the Institute’s policy, support mechanisms and procedures for managing a critical incident.
2.2 This policy will ensure that the Institute has:

- an effective approach in responding to critical incidents as they occur
- appropriate support and counselling services available to those affected
- appropriate training and information resources provided to staff.

2.3 Under Standard 6.4 of the National Code the registered provider must have a documented critical incident policy together with procedures that cover the action to be taken in the event of a critical incident, required follow-up to the incident, and records of the incident and action taken.

3. Definition

A critical incident is defined by the National Code as ‘a traumatic event, or the threat of such (within or outside Australia), which causes extreme stress, fear or injury’.

Critical incidents are not limited to, but could include:

- missing students
- severe oral, written or psychological aggression
- death, serious injury or any threat of these
- natural disaster, and
- issues such as domestic violence, sexual assault, drug or alcohol abuse.
- signs of physical and/or sexual abuse, and neglect.

Non-life threatening events can be classed as critical incidents.

4. General Guidelines

4.1 Planning the response

Relevant department heads and the Vice President should take responsibility for organising and coordinating the Institute’s response. This will involve calling together the Critical Incident Team.

4.2 Providing information to those affected by the incident

The Vice President will provide information and facilitate appropriate venues for its dissemination. Students and academic staff have a need to accept the reality of the event, and the inevitable discussions that follow are better based on fact rather than on rumour or supposition. It is important that rumours are discounted.

4.3 Resuming normal routines as soon as possible

Once the event has been formally acknowledged - perhaps through meetings, a memorial service, or whatever is appropriate - the next step may well be to resume, as far as practicable, normal timetables, so that any ongoing recovery strategies can take place against a background of predictability.

4.5 Assessing the psychological/emotional needs of those affected.

After a traumatic event, the people involved will need support. The nature of this support will vary amongst individuals but generally those closest to the incident will need more assistance than others. On advice from staff, the Student Welfare Officer should determine the nature and degree of support needed. At a minimum level, this should mean providing opportunities for those involved to express and share with others the reactions that they had to the incident. Those in charge and those providing support also need extra consideration during this time.
5. **Critical Incident Team**

5.1 The Critical Incident Team will be comprised of:

- Vice President
- Head of School
- Head of Student Services & Administration

5.2 When a critical incident occurs, the Vice President will call a meeting with the Critical Incident Team that will be responsible for:

- assessing risks and response actions
- liaison with emergency and other services
- contact with students’ relatives and other appropriate contacts
- liaison with other external bodies, such as Homestay hosts, guardians or foreign embassies, and
- counselling and managing students and staff not directly involved in the incident.

6. **Action Plan**

6.1 The Critical Incident Team will set in motion a Critical Incident Action Plan to manage critical incidents and various aspects arising from the incident, including communication strategies:

- creating and disseminating a plan and its procedures
- reviewing the plan, and
- staff development and training
- reviewing management of the critical incident.

The Institute staff will be made aware of the critical incident policy and procedures and be given appropriate training, to understand the procedures to use in managing a critical incident.

7. **Media Management**

7.1 A media management procedure is be included in the management plan to ensure the most positive and supportive response from the media.

7.2 Only the Director and Vice President may speak to the media on behalf of The Institute.

8. **Reporting and recording of incident and action taken**

8.1 The Educational Services for Overseas Students Act 2000 (ESOS Act) requires The Institute to notify the Department of Education and DIBP as soon as practical after the incident.

8.2 In the case of a student's death or other absence affecting the student's attendance, the incident will need to be reported via the Provider Registration and International Student Management System (PRISMS).

8.3 All aspects of the incident and its management will be recorded on the student files and Critical Incident File in the form of a file note.

9. **Follow-up and evaluation**

9.1 A review and evaluation of the response to the critical incident will be conducted and the procedures reviewed by the Critical Incident Team and/or other stakeholders.
9.2 Changes to the policy and procedures, including updating resources, will be made as soon as practicable following the review and evaluation.

10 Critical Incident Procedures

10.1 Notifying the CEO/Vice president- On-campus Incidents

10.1.1 If the incident is on campus, the first action will be to contact the emergency services - fire, ambulance or police – as would be the case with other OH&S matters.

10.1.2 Key details to report include the time, location and nature of the incident (e.g. threat, accident, death or injury), names and roles of persons involved (e.g. staff, student, people not from The Institute).

10.1.3 The CEO/Vice president must also be contacted immediately of any incident, particularly when the incident involves death, serious injury or a threat to life or property.

10.2 Notifying the Vice President - Off-campus Incidents

10.2.1 If the critical incident involves a student or staff member and is off-campus, the person receiving the information must immediately contact the CEO/Vice president who will communicate with other staff as appropriate.

10.3 Response to Critical Incidents

10.3.1 The Vice President will urgently deal with any emergency situation then calls a meeting with the staff involved to make decisions as to how to proceed.

10.3.2 At the initial meeting, the task of the group is to:
   • create for themselves a clear understanding of the known facts.
   • plan an immediate response
   • plan ongoing strategies
   • allocate individual roles/responsibilities for ongoing tasks.

10.3.3 Issues to be considered in immediate response:
   i. Contact with next of kin/significant others - what is the most appropriate manner of contact?
   ii. Arrangements for informing staff and students
   iii. Guidelines to staff about what information to give students
   iv. A written bulletin to staff if the matter is complex
   v. Briefing staff and delegating a staff member to deal with telephone/counter inquiries
   vi. Managing media/publicity
   vii. Identification of those students and staff members most closely involved and therefore most at risk:
      • Those directly involved
      • Personal friends/family of those involved
      • Others who have experienced a similar past trauma
      • Other students, staff, supervisors etc
viii. Arrange a time and place for an initial group/individual debriefing session with Counsellor/s. In this session, an opportunity is given to share the impact of the event, discuss various interpretations of the event in cultural/ethnic terms, the resulting sense of vulnerability, the experience of painful emotions and the normalisation of reactions

ix. Organise a tasks timetable for the next hour/s, day/s etc

x. Plan ongoing feedback and regular meetings so that the coordinating team is continually in touch and working together

xi. Confirm access to emergency funds if necessary

11. **Ongoing and follow up response**

These issues may need to be discussed at subsequent meetings:

- Availability of mobile phones
- Notification of and liaison with sponsor/agent if applicable
- Arrangements for visits to/from family
- Liaison with police, doctors, hospital staff, etc.
- Hiring independent interpreters
- Death notices
- Funeral/memorial service arrangements
- Refund of student’s fees to pay repatriation or associated expenses
- Copy of death certificate
- Consideration of personal items and affairs (household and academic)
- Insurance matters, OHSC coverage, ambulance fees
- Formal stress management interventions required for students and/or staff (release from classes, leave, rescheduled assessment or exams)
- Liaison with academic staff
- Arrangements for further debriefing sessions for groups/individuals as required
- Liaison with Department of Immigration and Citizenship if studies will be interrupted
- Fees issue to be resolved if student cannot continue with their studies
- Legal issues: helping students get access to legal assistance if required
- Arrangements for further debriefing sessions for groups/individuals as required
- Follow up condolence or other letters to student’s family
- Financial assistance for families of affected person(s) if residing in Australia
- Organising students/staff for hospital visits.

12. **Additional assistance**

12.1 When an international student dies or sustains serious injury, The Institute may be required to assist the student's family.

12.2 This may include:

- hiring interpreters
- making arrangements for hospital/funeral/memorial service/repatriation
- obtaining a death certificate
- assisting with personal items and affairs including insurance issues
- assisting with visa issues.
12.3 In addition the following need to be notified:

- Homestay or accommodation provider
- Library
- Information Technology Services

13. Reporting the Incident

13.1 The Educational Services for Overseas Students Act 2000 (ESOS Act) requires The Institute to notify Department of Education and DIBP as soon as practical after the incident and in the case of a student's death or other absence affecting the student's attendance, the incident will need to be reported via the Provider Registration and International Student Management System (PRISMS).

13.2 Key details to report include the time, location and nature of the incident (e.g. threat, accident, death or injury), names and roles of persons involved (e.g. staff, international or domestic student).
Appendix 1: Checklist for Staff Managing Critical Incidents

☐ The CEO/Vice president will seek information about the incident and will request that the information is not immediately made public.

☐ The CEO/Vice president/CEO or delegate will urgently deal with an emergency matter then call a meeting with the Critical Incident Team:

☐ As soon as possible, the CEO/Vice president will liaise with relevant staff to prepare a communication plan.

☐ Response and ongoing strategies including individual roles and responsibilities developed

☐ Liaison with police, doctors, hospital staff and other relevant professionals carried out

☐ Department of Education/DIBP notified

☐ Legal assistance arranged if required

☐ Follow-up letters to family sent

☐ Incident report for The Institute records prepared and placed on student file and critical incident file

☐ Next of kin (parents/guardian) contacted and support provided to family and friends

☐ Arrangements made for visits from family and friends, e.g. accommodation, travel, crisis support and referral to appropriate services
**Appendix 2: Checklist for Review and Evaluation of Critical Incident Management**

How well were the following actions undertaken by the Critical Incident Management Team?

1 = poorly; 5 = very well, most appropriately. Please add comments to clarify your choice.

<table>
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<th>Question</th>
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**Appendix 3: Critical Incident Recovery Timeline**

In order to successfully manage a critical incident, The Institute will always take appropriate action and provide support during and after a critical incident. The recovery timeline following a critical incident will vary depending on the circumstances.

**Immediately (and within 24 hours)**

- Gather the facts
- Ensure safety and welfare of staff and students and arrange for first-aid if necessary
- Where possible notify the time and place of the debriefing to all relevant persons
- Manage the media
- Set up a recovery room
- Keep staff, students and parents informed.

**Within 48-72 hours**

- Arrange counselling as needed
- Provide opportunities for staff and students to talk about the incident
- Provide support to staff and helpers
- Debrief all relevant people
- Restore normal functioning as soon as possible
- Keep parents informed.

**Within the first month**

- Arrange a memorial service, if appropriate
- Encourage parents to participate in meeting to discuss students' welfare
- Identify behavioural changes and the possibility of post traumatic stress disorder and refer to Appendix 4 for mental health services
- Monitor progress of hospitalised staff or students
- Monitor mental and physical health of all helpers.
In the Longer Term

- Monitor staff and students for signs of delayed stress and the onset of post traumatic stress disorder - refer for specialised treatment

- Provide support if needed.

In the Long Term

- Plan for and be sensitive to anniversaries, inquests and legal proceedings

- Access specialist support if needed.
## Appendix 4 – Crisis and Assistance Services (correct at February 2014)

<table>
<thead>
<tr>
<th>Service</th>
<th>Contact Details</th>
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<tr>
<td>Aidsline</td>
<td>800 4448 or 625 2437</td>
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<tr>
<td>Alcohol &amp; Drug Information:</td>
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<tr>
<td>Directline1800 888 236 Family Drug Help 1300 660 068</td>
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<tr>
<td>Australian Funeral Directors Association:</td>
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<tr>
<td>Advice Line: (03) 9859 9966</td>
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<tr>
<td>Australian Search And Rescue:</td>
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<tr>
<td>Aviation Rescue 1800 815 257</td>
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<tr>
<td>Maritime Rescue 1800 641 792</td>
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<tr>
<td>Court Network:</td>
<td>(information, support &amp; referral services for people attending court, M-F, 9-5) 9603 7433</td>
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<tr>
<td>Eating Disorders Foundation of Victoria:</td>
<td>9855 0318</td>
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<tr>
<td>Gay and Lesbian Switchboard Victoria:</td>
<td>(counseling, information and referral 6-10pm daily, 2-10pm Wednesday) 9827 8544</td>
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<tr>
<td>Interpreting Service:</td>
<td>131 450</td>
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<tr>
<td>Maternal And Child Health Line (24 hrs):</td>
<td>132 229</td>
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<tr>
<td>Mensline Australia:</td>
<td>(for men with family and relationship concerns) 1300 789 978</td>
</tr>
<tr>
<td>Nurse-On-Call:</td>
<td>(24 hour health advice and information from a registered nurse) 1300 606 024</td>
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<tr>
<td>Poisons Information Centre:</td>
<td>131 126</td>
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<tr>
<td>Quit Line: (stopping smoking) 137 848</td>
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<tr>
<td>Road Trauma Support Team:</td>
<td>(Confidential service for people affected by road trauma) 1300 367 797</td>
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<tr>
<td>SANE Mental Illness Helpline:</td>
<td>1800 187 263</td>
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<td>9-5 M-F)</td>
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<tr>
<td>Mental Illness Fellowship Victoria:</td>
<td>8486 4222</td>
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<tr>
<td>Suicide Helpline Victoria:</td>
<td>(24/7 crisis intervention, support &amp; information) 1300 651 251</td>
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<tr>
<td>Teen Challenge Careline:</td>
<td>1300 889 288</td>
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<tr>
<td>YouthLaw - At Frontyard 19 King Street, Melbourne 3000 Ph: (03) 9611 2412</td>
<td></td>
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<tr>
<td>Tenants Union of Victoria 55 Johnston Street, Fitzroy 3065 Ph: (03) 9411 1444</td>
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Appendix 5: Sample Letter

Letter to Parents (Sample letter in the event of a death or injury of injury)

Dear Parents,

The Institute has experienced (the sudden death, accidental injury) of one of our students. We are deeply saddened by the death/events.

(Brief details of the incident, and in the event of a death, perhaps some positive remembrances of the person lost)

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 that he/she may like to discuss with you. You can help your child by taking time to listen and encouraging them to express their feelings.

If you would like advice or assistance you may contact the following people at the Institute:

Vice President – (name and contact details)
Head of Student Services - (name and contact details)
Student Welfare Officer - (name and contact details)

Yours sincerely,

Rong Liu
Vice President
Appendix 6: Police Involvement and Coronial Investigations

While critical incidents are not only cases of sudden unexpected death, the police are required to investigate all cases of sudden unexpected death. Police actions include:

- Reporting such a death to the Coroner
- Notifying next of kin
- Obtaining official identification of the deceased (this must be done by someone who has known the deceased for some time)
- Conducting investigations on behalf of the Coroner - for example, interviewing witnesses and others who may have been involved, collecting clothing and other items for use in evidence, delivering specimens for analysis.

Coronial Investigations

Every death reported to the Coroner must be investigated. The body of the deceased will be taken to the morgue where it may be viewed by the relatives but not touched. Once the coronial inquiries are complete (and this may take some time), the body will be released to funeral directors to await instruction from the next of kin. At this stage the body may be touched.

Post Mortems (autopsies)

Most reported deaths require a post mortem examination to determine the medical cause of death. This usually involves an internal and external examination of the body, and of tissue, organ and blood specimens taken from the body. Cultural and religious objections to a post mortem may be discussed with the coroner or a court social worker. However, these objections very rarely influence the coroner’s decision to conduct an autopsy.

Inquests

An inquest is a public hearing before a coroner (and occasionally a jury) to decide the circumstances of death. Once initial investigations are completed, the Coroner may (as in 90% of cases) dispense with an inquest. However, the Coroner may order an inquest or, in certain circumstances (such as murder), an inquest may be legally required.
Appendix 7: Preparing for Funerals

This information is taken from materials published by the Australian Funeral Directors Association. A variety of reading material is available. Inquiries may be directed to:

Australian Funeral Directors Association
PO Box 291
Kew East VIC 3102
(03) 9859 9966

When someone dies

When death occurs, the first practical consideration in most cases will be the need for a doctor’s attendance. The deceased’s doctor or the hospital authorities will explain what steps, if any, are required to establish the cause of death and complete the necessary death certificate. Meanwhile, the family may begin making their desired funeral arrangements, which can be completed when the death certificate has been signed.

Arranging a funeral

Initial interviews with the funeral director can be at a location nominated by you. While some people may have a fairly clear knowledge of the arrangements they want to make, others may want to consider a range of alternatives before making any decisions. The funeral director is there to guide and advise on the many matters which need to be considered.

Decisions to make will include:
- Time and location of the funeral
- Type of service
- Burial/cremation (reflection of the religious or ethnic attitudes and family traditions)
- Type of coffin
- Viewing arrangements
- Choice of participants
- Floral arrangements, motor vehicles and other relevant matters

The funeral director

The funeral director will take responsibility for arranging, with the family concerned, the time and place for an appropriate funeral service by coordinating and liaising with clergy members, doctors, hospitals and cemetery or crematorium officials.

The funeral director will lodge notices in the press, arrange floral tributes, provide a hearse and other vehicles, a funeral chapel and any other facilities and personnel required to carry out the wishes of the family being
served. All official forms must be completed and taken to the appropriate people at the right time. The funeral director, for example, registers the death with the Registrar of Births, Deaths and Marriages.

**The funeral ceremony**

All reputable funeral directors are able to provide a broad range of services to suit the precise requirements of the bereaved family. Funerals can be as different as the people they are for, with their main purpose being to help the bereaved in the first stages of grief. The order, style and content of service can all be varied to suit the family’s needs. A personal tribute from a family member or close friend, or perhaps including appropriate cultural traditions, may make the service more meaningful.

**Special circumstances**

Deaths from suicide and AIDS may sometimes present special problems because of old religious discrimination and/or social stigma. Nevertheless, the need for people to mourn and the rituals of the funeral are still essential for friends and family.

When there is no body (e.g. drowning accidents, abduction) it is still important to acknowledge the life of the deceased and help the family and friends to accept that death has occurred. A special memorial service to allow everyone to say goodbye and be able to get on with their grieving is essential. The use of photos, significant objects associated with the deceased’s life, and perhaps candles are a great help to use in place of the body.

**Grieving**

Grief is not a single response, but a complicated series of feelings, emotions and even physical manifestations of a person’s reaction to the bereavement. Grieving is an intensely personal process. Each death is unique and everyone affected will respond differently. Most survivors however, will pass through similar stages of grief from initial shock, numbness, and often denial and anger to realisation, acceptance and finally re-adjustment.

The intensity of grief experienced will be affected by a number of factors, including the degree of attachment to the deceased and the duration and quality of relationship with them. The greater the attachment, the longer it is likely to take to resolve grief. However it is not the passage of time itself which brings resolution, but the working through of stages of grief.
Appendix 8: General Guidelines for Academic Staff

Practical ideas to use with all age groups

1. Let the students tell you what happened.

2. Discuss what actually happened: give facts and sort rumour from fact.

3. Allow discussion time:
   - Where were you when it happened?
   - How did you find out?
   - What did you feel?
   - How might others feel?
   - The notion of blame is difficult. Instead try to incorporate what can be done now, into the discussion.

4. Some students like to write or draw - to recall events, people, and emotions - or to vent them.

5. Talk to the class about how they will respond and support survivors/victims during their absence (letters, visits etc.) and when they return to the Institute.

Practical ideas for use with adolescents

1. Group discussions are important and useful. They allow time to express and normalise their reactions and it is helpful if teachers and adolescents share their reactions. "Crazy" thoughts, extreme emotions such as helplessness, frustration, anger and survivor guilt may need to be recognised and vented.

2. It is important and useful to end discussions on a positive and practical note as follows:
   - What heroic acts were observed?
   - What can we do right now - contribute to a memorial service, practical support for victims and families?
   - What can we do in longer term? Discuss possible improvements to the way the situation was managed – what could we do better?

3. Plan a follow-up time. Offer referral for individual counselling. Let students know what sort of help is available and that it is okay to seek help. Peer support can be valuable if peers are emotionally able to handle it.

4. If moved to tears, don't be afraid to let students/adults see - it can be very supportive and empathic.
For Staff: Coping with your own reactions to a critical incident/event.

It is important that teachers pay attention to their own mental and physical well-being and take time to ensure that they look after themselves, as well as their students, when a critical incident occurs.

Individuals have a wide range of responses to critical incidents and may be surprised by their own reactions or those of others. An individual's memories or experiences, and/or the accumulation of critical incidents, may increase the likelihood of a particular incident triggering a personal crisis.

Effects of critical events may include:

- Physical effects, such as changes in appetite and/or libido, sleep disturbances, increased susceptibility to illness, breathlessness, dry mouth, tremor and fatigue and increased sensitivity to noise, light and smell.

- A range of emotional responses, which may include anger, irritation, sadness, hostility, aggression, feeling inadequate, and denial.

- Altered thought patterns such as confusion, disorientation, forgetfulness, difficulty with tasks and normal routines, flashbacks, nightmares, poor judgment, and inability to assess others and oneself realistically.

The longer-term effects may include burnout or exhaustion, lack of interest in work or life in general, withdrawal from family and friends, escapism and over work. These responses impact upon family, social and work relationships and activities.
Appendix 9: Other Resources Available For Reference

ISANA has developed a critical incident kit which is available at: http://www.isana.org.au/files/ISANACriticalIncidentsKit.pdf

The Independent Schools Council of Australia (ISCA) has developed a Critical Incident policy as part of their Transition Support Handbook which is available at: http://www.isca.edu.au/ (pp133-142).
Student Critical Incident Report

Name of student: ___________________________________________________________

Teacher: ________________________________ Course: ___________________________

Time, date and place of incident: ____________________________________________

Description of incident:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Action taken by teacher/staff:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Action taken by Staff/Head of School: Comments:

☐ Student removed from classroom ____________________________________________

☐ Student interview conducted _______________________________________________

☐ Student placed on monitoring

program _________________________________________________________________

☐ Follow up reported to teacher/staff _________________________________________

☐ Other action ___________________________________________________________