



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive



National Ambulance Service (NAS)

Workforce Support Policy

Management of a Critical Incident involving Staff Member

Document reference number	NASWS027	Document developed by	Operational Resource Managers
Revision number	1	Document approved by	NAS Leadership Team
Approval date	25th April 2017	Responsibility for implementation	Each Senior Manager
Revision date	25th April 2019	Responsibility for review and audit	NAS Leadership Team

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1.0 Policy

Our National Ambulance Service (NAS) Leadership Team has, through consultation with families and staff, drawn up a Critical Incident Management Plan. We have established a Critical Incidents Management Team to steer the development and implementation of the plan.

2.1 Purpose

What is a Critical Incident?

A workplace critical incident is an event that causes emotional or psychological trauma in people exposed to the incident directly or indirectly and is a sudden, powerful event outside the range of normal experience – and outside the workers' control.

It is important for NAS to identify potential critical incidents and procedures to follow in each instance.

Some examples of a critical incident are as follows:

- The death of a member of NAS through sudden death, accident, terminal illness or suicide.
- An accident involving patients or staff in the workplace
- Serious damage to a NAS building/vehicle through fire, flood or vandalism etc.
- The disappearance of a member of the NAS community, loss of a family member, friend, a major accident locally or abroad.

The term "*Suicide*" will not be used without consent of the family involved or until it has been established categorically that a person's death was the result of suicide. The term "*Tragic death*" or "*Sudden death*" shall be used instead.

Critical Incidents Management Team:

To ensure that NAS is in a position to respond effectively to any crisis that it may encounter, the Director NAS will establish a standing committee of the comprising of the following:

- Leadership Role: Director NAS
- Leadership Role: Chief Ambulance Officer/Operations (Specific to operational area)
- Leadership Role: Operations Performance Manager (Specific to operational area)
- Staff Liaison Officer: Operations Resource Manager (Specific to operational area)
- Communication Role: Communications Officer
- Family Liaison Officer: Area CISM Co-ordinator

3.0 Scope

3.1 This policy applies to all NAS Staff

4.1 Legislation/Other related Policies

- A. National Ambulance Service Parent Safety Statement
- B. Policy Advice, Support and Critical Incident Stress Management

5.0 Roles and Responsibilities

Leadership Role – Director NAS

- Confirms the event
- Activates and delegates the Critical Incidents Management Team
- Liaises with the Gardaí/Emergency services
- Leads/or designate leads briefing meetings for staff on the facts as known
- Gives staff members an opportunity to express their feelings and ask questions,
- Outlines the direction for the day
- Expresses sympathy to family
- Clarifies facts surrounding event
- Makes contact with other relevant agencies
- Decides how news of the event will be communicated to different groups
- Ensures provision of ongoing support to staff
- Facilitates any appropriate memorial events

Leadership Role: Chief Ambulance Officer/Operations

- As above (Director NAS section) and as delegated by the Director NAS

Communication Officer:

- With the Critical Incidents Management Team:
- Prepares a public statement
- Organises a designated room to address media promptly
- Ensures telephone lines are free for outgoing and important incoming calls
- Designates mobile numbers (to family members) for contact
- Reviews and evaluates effectiveness of our communication response

Staff Liaison/Operations Resource Manager

- Advises the staff on the procedures for identification of vulnerable staff
- Alerts staff to the HSE Critical Incident Management Policy
- Outlines specific services available within the HSE and NAS
- Puts in place clear referral procedures
- Addresses immediate needs of staff
- Provides information and updated information to staff
- Helps arrange for counselling with support of NAS CISM Team, Employee Assistance, and/or Occupational Health Service.(with local **deputy** CISM coordinator for the area)
- Provides ongoing support to staff
- Monitors station/s most affected
- Refers as appropriate

Family Liaison/ CISM Area Coordinator

- Co-ordinates contact with families (following first contact by Director and/or designate)
- Consults with family around involvement of NAS in e.g. funeral service
- Assists with all communication dealing with family of any staff member affected by critical incident
- Provides ongoing support to families affected by the incident
- Provides help to families, in arranging counselling with the support of NAS assigned Senior Psychologist
- Offers to link family with community support groups

6.0 Procedure

Action Plan

SHORT-TERM ACTIONS (Day 1)

- Immediate notification of the Critical Incident Management Team (Director and/or designate)
- Immediate contact with family/families (Director and/or designate)
- Consult with the family regarding appropriate support from the NAS, e.g. funeral service
- Ensure that a quiet place can be made for staff affected
- The Director is designated the contact for any or all media
- Gather accurate information (Team)
- Prepare a brief statement (Team)
- Protect the family's privacy (Team)
- It is important to obtain accurate information about the incident (Team):
 - What happened, where and when?
 - What is the extent of the injuries?
 - How many are involved and what are their names?
 - Is there a risk of further injury?
 - What agencies have been contacted already?

Contact appropriate agencies (Chief Ambulance Officer/Communication Role)

1. Other Emergency services
2. Other Medical services
3. CISM and/or Psychology Services

NAS Director leads the following procedures :

- Convene a meeting with Key Staff/Critical Management Team
- Organize a staff meeting, if appropriate
- Ensure any absent staff members are kept informed
- Organise timetable/routine for the day. (Adhering to the normal NAS routine is important, if this is possible)
- NAS Managers to take note of any absentees, who might need to be contacted, list of colleagues etc., or any other relevant information. This is to be given to the Staff Liaison person
- Arrange supervision of NAS personnel
- Liaise with the family regarding funeral arrangements/memorial service
- The Chaplain/Director and/or designate will liaise with the family, to extend sympathy and clarify the family's wishes regarding the NAS involvement in funeral/memorial service
- Arrange a home visit by two staff representatives within 24 hours, if appropriate. (Staff Liaison person and Family Liaison)
- Have regard for different religious traditions and faiths

MEDIUM-TERM ACTIONS (24-72 HOURS)

- Preparation of staff attending funeral
- Involvement of staff in liturgy if agreed by bereaved family
- Facilitation of staff responses, e.g. Sympathy cards, flowers, Book of Condolences, etc.
- Review the events of the first 24 hours
- Reconvene Key Staff/Critical Incident Management Team
- Decide arrangements for support meetings for family/staff
- Decide on mechanism for feedback from managers on vulnerable staff
- Have review of Critical Incident Management Team meeting
- Establish contact with absent staff

- Arrange support for individual staff members, groups of staff, and family, if necessary
- Hold support/information meeting for family/staff, if necessary, in order to clarify what has happened meeting to psychological /mental health support)
- Give any manager who feels uncomfortable with involvement in support meetings the choice of opting out
- Arrange, in consultation, with outside agencies, individual or group debriefings or support meetings with family/staff permission
- Plan for the re-integration of staff e.g. absentees, injured staff, close relative etc.)
- Staff Liaison person to liaise with above on their return to work.
- Family Liaison person + Staff Liaison + Director to visit home/hospital
- Attendance and participation at funeral/memorial service (To be decided in consultation with family)
- Decide this in accordance with family wishes, NAS management decisions and in consultation with staff
- Ensure contingency arrangements in place

Longer Term Actions

- Monitor staff for signs of continuing distress
- If over a prolonged period of time, a staff member continues to display the following, he/she may need assistance from CISM, Employee Assistance, and Occupational Health Service. Constant communication with family is essential.
- Uncharacteristic behaviour
- Deterioration in academic performance
- Physical symptoms — e.g. weight loss/gain, lack of attention to appearance, tiredness, restlessness
- Inappropriate emotional reactions
- Increased absenteeism
- Evaluate response to incident and amend Critical Incident Management Plan appropriately
- What went well?
- Where were the gaps?
- What was most/least helpful?
- Have all necessary onward referrals to support services been made?
- Is there any unfinished business?
- Formalise the Critical Incident Plan for the future
- Consult with NAS Leadership Team
- Inform new staff affected by Critical Incidents where appropriate
- Ensure that new staff are aware of the NAS management and procedures in this area
- Ensure they are aware of which staff were affected in any recent incident and in what way
- When individual staff affected by an incident are transferring to a new area, the Chief Ambulance Officer (CAO) should brief the accepting CAO Decide on appropriate ways to deal with anniversaries (Be sensitive to special days and events)
- Anniversaries may trigger emotional responses in staff and they may need additional support at this time
- Acknowledge the anniversary with the family
- Plan a NAS memorial service
- Care of deceased person's possessions. What are the families' wishes?
- Update and amend NAS records

The above should be reviewed in conjunction with NAS CISM management process and the HSE Critical Incident Management Policy, and reviewed, evaluated on a periodic basis.

7.0 Implementation Plan

- 7.1 This policy will be circulated electronically to all staff within the NAS.
- 7.2 This policy will be available in electronic format in each Ambulance Station and Ambulance Control for ease of retrieval and reference.
- 7.3 Each Operational Support and Resilience Manager will ensure that the Manager/Supervisor responsible for updating policies and procedures will return the confirmation form to each Area Operational Resource Manager to confirm document circulation to all staff.

8.0 Revision and Audit:

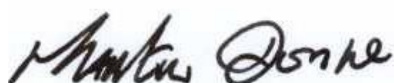
- 8.1 This policy will remain under constant review and may be subject to change to facilitate any changes/developments in service requirements
- 8.2 Revisions, Amendments or alterations to this policy can only be implemented after consideration and approval by the Director, following consideration by the NAS Leadership Team who will consult with appropriate Stakeholders.

Revision History:

(This captures any changes that are made to a SOP when it has been revised. This may be placed at the back or close to the front of the document according to local preference.)

No	Revision No	Date	Section Amended	Approved by
1	1	05/02/2018	SOP put on New Template	NAS Director
1	1	25/04/2019	Reviewed and Updated	NAS Director

9.0 Signatures of Approval



National Ambulance Service Director
On Behalf of the National Ambulance Service

Date 25th April 2019