

Policy Document

Reference: HR59

Critical Incident Stress Management Support

Version:	3
Date Ratified:	May 2023 by TJNCC
To Be Reviewed Before:	May 2026
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Executive Lead:	Chief People Officer

Version Control Schedule

Final Version	Issue Date	Comments
1	November 2018	New policy
2	June 2020	One year review
3	May 2023	

Statement on Trust Policies

The latest version of 'Statement on Trust Policies' applies to this policy and can be accessed [here](#)

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1. INTRODUCTION

- 1.1 University Hospitals of North Midlands (the Trust) is committed to protecting the health, safety and well-being of its employees. The Trust recognises and supports staff who, in the course of their work may be subjected to actual or threatened violence and aggression or any other untoward incident that may cause trauma, distress or raise the normal stress response in individuals.
- 1.2 The aim of the policy is:
- To give clear definition of a critical incident and how the Trust supports staff following such incidents
 - Provide a framework to enable managers and staff to support themselves and their colleagues
 - Ensure legal compliance
 - The aim of the guidance in this policy is to reduce the impact of critical incidents on staff, and decrease the likelihood of long-term detriment by means of a consistent and effective support mechanism.

2. STATEMENT

- 2.1 Any situation or event at work that may be distressing for the staff members involved.
- 2.2 The Trust recognises that it has a duty under the Health and Safety at Work Act 1974 to take all reasonably practicable measures to protect the health, safety and welfare of employees at work. This includes taking steps to ensure that staff do not suffer, where ever possible, a critical incident in the workplace,
- The Management of Health and Safety at Work Regulations (1999) require employers to assess health and safety risks, and to introduce prevention and control measures based on those risk assessments. Critical Incidents are seen as being a health and safety risk, and in accordance with the Regulations, the Trust will give priority to reducing incidences in the work place and providing staff with the appropriate support who have been involved in a critical incident.
- 2.3 The main objectives of the Critical Incident Stress Management Policy (CISM) are to:
- Define a critical incident
 - Describe what support is available for staff who have been involved in incidents and how to access it
 - Define roles and responsibilities for all employees in relation to CISM
 - Ensure staff receive appropriate awareness and/or training on CISM
- 2.4 An overarching statement which is applicable to policy can be found on the Trust Policies Intranet page.

3. SCOPE

This Policy applies to all areas and staff employed by the Trust equally and includes (but not an exhaustive list):

- Volunteers;
- Agency staff;
- External secondees working temporarily with the Trust;
- Locum staff;
- Executive and Non-Executive Directors;
- Those employed in a temporary capacity.

4. DEFINITIONS

4.1 Definition of a Critical Incident

A critical incident is a serious violent, aggressive or traumatic incident in which both of the following were present:

- The person(s) experienced, witnessed or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of others.
- The person(s) response involved intense fear, helplessness or horror

Events that can trigger the need for support include, but are not limited to:

- Being involved in a critical clinical or non-clinical incident or near miss, especially one involving serious harm to a patient, or patient suicide on a Trust site
- Being involved with a major incident involving a large number of casualties and/or deaths, especially incidents involving children
- An attack upon a member of staff by a patient
- Being witness to an act of serious self-harm or suicide
- Being witness to an act of violence at work
- Being threatened and made to feel vulnerable by a patient, a patient's relative(s) or other persons within the workplace.
- The sudden death or serious injury of a work colleague.
- The sudden unexpected death of a patient or work colleague.
- The sudden death of a patient who has received long-term care within the Trust

4.2 Definition of Critical Incident Stress Management (CISM)

Critical incident stress management (CISM) is an adaptive, short-term psychological helping-process that focuses solely on an immediate and identifiable problem. It can include pre-incident preparedness to acute crisis management to post-crisis follow-up. The framework of support available includes:

4.3 Defusing

Defusing is a short intervention which can be undertaken by the manager of the team or other staff member not directly involved in the incident and who has attended the relevant training. It is a form of immediate support and can be used to establish whether there is a need for a full CISD support to be arranged or whether the support can be contained within the team

4.4 Critical Incident Stress Debriefing (CISD)

Critical Incident Stress Debriefing is a specific, 7 phase, group supportive crisis intervention process. It is one option of support under the umbrella of Critical Incident Stress Management. The CISD process does not constitute any form of psychotherapy or counselling, it is simply a supportive, crisis-focused discussion of events (frequently called critical incident or serious incidents) with those involved. It aims to reduce the distress and reactions that staff are having or have experienced and offers "normalisation" processes, information and signposting support.

CISD support is usually only conducted after serious events, that is, it involves death, serious injury or the perceived potential for them. CISD support is conducted by a professional specifically trained in this area. Attendance and participation in such a session is voluntary and should never be imposed upon staff.

The ideal time to conduct a CISD support is between 72 hours and 14 days following an incident, although the timing is less important than the CISD support actually taking place. CISD support should only involve those team members who were involved in the actual incident and are willing to attend. CISD support can take between one and three hours dependent upon the incident and number of staff requiring support.

CISD purpose is NOT to critique the incident and does NOT form part of any subsequent investigation. The contents of a CISD support are confidential; notes or records are made for purely statistical purposes.

CISD support has three benefits:

1. To mitigate the impact of a critical incident on the staff involved and to educate staff on the impact of trauma and the psychological and physiological effects
2. To accelerate NORMAL recovery in people who are experiencing the NORMAL signs, symptoms and reactions to an ABNORMAL event
3. The process can be adapted to different situations (for example, to provide group support to witnesses following a serious disciplinary hearing, work based change etc) and can help to restore group cohesion, performance and working relationships

5. ROLES AND RESPONSIBILITIES

5.1 Chief Executive and Trust Board

The Chief Executive has overall accountability for Health, Safety and Welfare for all persons. The Trust Board acknowledges its responsibility in terms of providing and maintaining a healthy and safe working environment for all its employees. It is responsible for monitoring the policy and procedure and any concerns raised as a result the Trust Board will promote a positive culture across the Trust through policy, training, information, consultation and provision of appropriate support services for staff and managers. The Trust Board will provide and maintain appropriate resources to implement the policy.

5.2 Executive Lead

The Executive Lead for this policy is the People Directorate. They are responsible for ensuring that there is an appropriate policy lead, the policy is reviewed and updated appropriately and that compliance with this policy is monitored.

5.3 Policy Lead (OD Consultant for Wellbeing and Engagement)

- Ensure review of the policy on an annual basis and meets the requirements of the policy on policies
- Full review of the policy every three years or sooner if changes are required
- To ensure that the policy is produced in the agreed trust format using the trust template
- All contributors are contacted at times of review
- Ensure that compliance is being met against this policy

5.4 Line Managers have a responsibility to:

- Consider the impact of critical incidents seriously and provide immediate and on-going support to staff in line with the CISM Policy.
- To understand the importance of confidentiality if they were involved in the incident and were attending the Critical Incident Stress Management session themselves. The role of a Critical Incident Stress Management session is to support staff and help them to understand the impact an incident may have upon them and to educate and normalise any symptoms they may be experiencing. It is not used to assess possible errors or lessons to be learned as this would be the role of an operational debrief and inappropriate in this forum. The only exceptions to a break of confidentiality should be in extreme circumstances such as serious professional misconduct or where other staff, patients, clients, relatives etc could have been put at risk of harm resulting in failure in duty of care.
- Understand the various levels of CISM support available to all staff and to ensure that support is provided.
- To ensure that appropriate consideration has been given to the training needs of the department regarding CISM training and wherever possible ensure that staff attend either 3 Day CISM training or half day CISM Essentials training
- Be vigilant for prolonged distress or uncharacteristic behaviour in staff following a Critical

Incident, and ensure that remedial action is taken (See Appendix 1)

- Ensure a supply of “Coping with a Personal Crisis” leaflets as well as the general “Staff Support and Counselling Services” leaflets are available. (These can be obtained from the Staff Support and Counselling Services Department and also available on the Trust’s Intranet Site).
- To raise awareness of this policy and the CISM Team

5.5 Senior Managers are responsible for:

- Taking a lead in ensuring that staff support is a priority in the aftermath of a serious critical incident
- Ensuring sufficient staffing/resources to make CISM support operationally possible and the CISM team members are released for annual updates
- Ensuring appropriately identified staff receive training in Critical Incident Stress Management Awareness enabling the appropriate support to be available either directly from team members, via the Critical Incident Stress Management Team or the Staff Support and Counselling Service.

5.6 Staff Support and Counselling Service

- To provide awareness and support to managers and staff in developing a greater awareness of the impact a critical incident may have, including trauma and potential Post Traumatic Stress Disorder (PTSD) and identify support available.
- To provide supportive sessions to staff to help staff process the accumulation effects of working in areas of high stress as a normal aspect of their role – these sessions will be provided as and when required and on request from staff but do not have to be in response to any one specific incident
- To provide training to staff as follows:
 - 3 Day Critical Incident Stress Management Training
 - Half Day CISM Essentials
- To offer support to individuals who have been off sick following an incident(s) designed to enable them to return to work
- Refer to specialist agencies as required
- To provide confidential counselling/support for individuals who self-refer to the Staff Support and Counselling Service
- Inform the Trust of any changes and developments in the field of CISM
- To support the Critical Incident Stress Management Team members via regular updated training workshops, information and resources, support post incident and development of updated toolkits and in house promotion
- Staff Support and Counselling Service will produce Annual Usage Reports clearly identifying the number of debrief and/or support sessions provided including numbers of staff, locations and hours.

5.7 Critical Incident Stress Management Team

Peer support is a system of giving and receiving help founded on key principles of respect, shared responsibility and mutual agreement of what is helpful. Therefore members of the CISM Team are staff working in areas with other staff where incidents may take place. Staff can offer support, empathy and understanding, providing a framework in which to operate can have great impact.

5.8 CISM Team Members:

- Are identified and nominated for the 3 Day Training Programme via their manager, heads of department or service
- Will attend 3 Day Critical Incident Stress Management Training
- Will attend annual update workshops
- Appear on the CISM Team Register (managed and maintained by the Staff Support and Counselling Service)
- Promote and support the CISM Policy

- Provide appropriate support in the form of defusing and/or CISD
- Will ensure that activity is recorded on the CISM Register of Activity Database maintained and managed by the Staff Support and Counselling Service

5.9 Staff

- As individuals we are all responsible for our own welfare and need to be aware when our ability to perform our role effectively may be impaired. In some circumstances, following a critical incident, some staff may be affected and therefore should seek appropriate support
- Raise issues of concern with your Safety Representative, Line Manager, Human Resources, Occupational Health or Staff Support and Counselling Services
- Consider opportunities for counselling and other forms of support when recommended
- Attend appropriate training as identified by the line manager
- Accept responsibility to willingly work with managers/other departments
- Attend organised CISM support sessions, e.g. defusing sessions or Critical Incident Stress Debrief sessions when offered.

5.10 Wellbeing Leads

- The Wellbeing Leads will perform a pivotal role in ensuring that this policy is implemented
- The Wellbeing Leads will oversee monitoring of the efficacy of the policy and other measures to reduce stress and promote workplace health and safety
- The Wellbeing Leads will notify the Staff Support & Counselling Service whenever possible of any incidents that are reported that they recognise would benefit from the support of the Service.

6. EDUCATION/TRAINING AND PLAN OF IMPLEMENTATION

6.1 Education and Training

Appropriate awareness and training will be available to staff, records of which will be recorded and monitored via the ESR system within the Trust as well as reported via the Staff Support & Counselling Service Annual Report. This training aims to raise awareness of critical or serious incidents in the workplace and how to respond effectively to such events and the implications on the Trust and awareness on how to support staff in the workplace. It aims to provide information and understanding on the psychological and physical effects of trauma and to provide the skills to assess when it is appropriate to request formal critical incident stress management support for staff affected by serious or untoward incidents in the workplace.

Training also gives staff effective skills required to support other staff following serious or untoward incidents in the workplace, where staff may be left feeling shocked or distressed by such events. Managers and supervisory staff having completed the training will then be equipped with the skills required to support staff but will also be able to identify the additional training needs of staff in their own areas and nominate appropriate staff to attend this course.

The following courses will be made available to staff via an annual programme of training:

Training Available	Course Contents	Target Group
Critical Incident Stress Management – The Basics Half Day Workshop Available regularly across the year in addition teams can request Staff Counselling Service to deliver short sessions to raise awareness within their own areas of work	The aim of this day workshop is to raise awareness of critical or serious incidents in the workplace and how to respond effectively in supporting staff in such events. It will equip delegates with the knowledge to: <ul style="list-style-type: none"> • Recognise what constitutes a critical incident • To identify the need for a full CISD and referral process to gain support 	Recommended for any staff working in areas where incidents are likely to be experienced.

Training Available	Course Contents	Target Group
	<ul style="list-style-type: none"> To understand the need to support staff following such incidents An introduction to a Defusing Skills An introduction into Psychological First Aid The importance of peer support 	
Critical Incident Stress Management 3 Day Training	This is an intense programme designed to equip staff with the skills to deliver defusing skills and to conduct or participate in CISM events.	Directorate management teams are responsible for ensuring that teams in key areas nominate appropriate staff to attend.

6.2 Implementation

The manager/person in charge of the area at the time is responsible for ensuring that the environment returns to normal functioning, with minimum disruption to staff and patient care as soon as possible and to report the incident in line with Trust procedures and policies.

Directorate Heads and Managers, however, also have a responsibility for the welfare of staff involved in critical incidents, and should not underestimate the value of making personal contact at this time to express their concern for staff. This can prevent the later onset of morale problems. Managers should reinforce the use of Defusing and CISM support and assist in enabling this process by making it operationally possible through the provision of additional short term cover for the period of the Defusing or CISM support. Managers/team leaders/persons in charge should also be mindful in offering support to individuals (Appendix 1 Guidance for Managers).

CRITICAL INCIDENT STRESS MANAGEMENT – SUPPORT OPTIONS

Type of Support	Description	Who can offer this support?
Defusing Process	<p>This can be provided to individuals and groups/teams</p> <p>The purpose of the defusing process is to offer reassurance and support and to check out staff are safe and unhurt. The emphasis is to normalise, educate and inform on the possible effects that the incident could have upon them in order to reduce the potential for the development of prolonged or extreme reactions to the incident. It can also be used to establish if a CISM support should be arranged. Defusing should take place immediately after the area has been made safe, or at the latest at the end of the shift, preferably before any staff members involved go home. Depending upon the size of the team and the seriousness of the incident, the time taken for the Defusing is approximately a half an hour.</p>	<p>Critical Incident Stress Management Team Member</p> <p>Staff Support & Counselling Service telephone 0300 124 0104</p>
Critical Incident Stress	Critical Incident Stress Debriefing	Critical Incident Stress

Type of Support	Description	Who can offer this support?
Debrief	<p>(CISD) is a specific, 7-phase, group, supportive intervention process. The CISD process does not constitute any form of psychotherapy or counselling. It aims at reduction of distress and restoration of group cohesion and relationships. In general all those present during the critical incident should be offered to be included in the CISD however it is not obligatory to attend if a member of staff feels unable to for whatever reason.</p> <p>Team members who were away or not on duty during the incident also need to be considered for a separate support meeting as they too can be affected by the news of such events. Absent members of staff often feel guilty or responsible in some way, particularly if for example, someone who was hurt had exchanged a shift with a colleague.</p>	<p>Management Team Member</p> <p>Staff Support & Counselling Service telephone 0300 124 0104</p>

7. MONITORING AND REVIEW ARRANGEMENTS

Minimum requirement to be monitored	Process / Method	Responsible individual/ group / committee	Frequency of monitoring	Responsible individual / group / committee for review of results	Responsible group / committee for monitoring action plan
Process for identifying the number of incidents within the Trust	Review of incident reporting numbers, category, location and severity summarised in minuted form and held on a database	CISM steering committee	Bi-annually	CISM steering group	Quality Governance Committee
Process for identifying the number of support (CISMs) provided	<p>Staff Support & Counselling Service Annual Usage Report</p> <p>Bi monthly statistical report</p>	<p>Staff Support and Counselling Service</p> <p>Staff Support</p>	<p>Annually</p> <p>Bi-monthly</p>	Patient and Organisational Safety Team	Directorate Boards

Minimum requirement to be monitored	Process / Method	Responsible individual/ group / committee	Frequency of monitoring	Responsible individual / group / committee for review of results	Responsible group / committee for monitoring action plan
How will staff know about the support available	<p>At Induction Training</p> <p>Health & Safety Training</p> <p>Trust's intranet website including access to the CISM Policy and information on the Staff Support & Counselling Service</p> <p>Post incident information to be provided by Line Manager</p>	<p>Training Department</p> <p>Patient and Organisational Safety Department</p> <p>Staff Support and Counselling Service</p> <p>Line Managers</p>	<p>Annually</p> <p>Annually</p> <p>Annually</p>	Directorate Boards	Directorate Boards

The policy will be reviewed one year post ratification, unless changes in national legislation override this.

8. REFERENCES

Health & Safety Executive (HSE) (1974) Health & Safety at Work Act. HSE website. HSE. Available at: www.hse.gov.uk

Health and Safety Executive (HSE). 'Workplace Trauma & its Management' HSE website.HSE. Available at: www.hse.gov.uk

NICE Guidelines. 'Early Intervention for PTSD in Adults' 2005 NICE website. Available at: www.nice.org.uk

Appendix 1 - Guidance for Managers - Supporting Staff

1. Be aware of what are natural responses to trauma/highly stressful situations and reassure staff that what they are experiencing is natural and normal and that the incident/situation itself is the abnormal event.
2. Be alert to staff who might be especially vulnerable, perhaps because of past experience or particularly close involvement with the incident or those involved in it. Talk to employees individually, and check if extra support is needed.
3. Be present and around if possible. People need to spend time talking to each other as they work, and it helps for the manager to join in casually and encourage this by example. This applies not only to those directly involved in the incident, but also those who witnessed it, had friends or colleagues involved, etc. Sharing experiences in this everyday way is helpful. Utilise the skills of any CISM Team members from the team in offering immediate support. Consider and explore with the team the need to arrange formal Critical Incident Stress Management Sessions. If individuals are affected encourage them to attend the Staff Counselling Service to gain understanding and coping methods.
4. Communicate about what is happening. Informing staff of what has happened, and of unfolding events, needs to be done sensitively and quickly. Managers may wish to convene a 'first thing every morning' meeting for staff in the aftermath of a big disaster. It is best to keep such meetings brief, factual and information sharing, practical rather than emotion focused
5. Do not necessarily send people involved in an incident home. As far as possible, immediate psychological first aid is best provided by being with and sharing experiences with work colleagues and friends, rather than removed to talk to a stranger. Wherever possible, re-establish normal working routines as soon as possible, albeit gently and flexibly, and enable people to talk about what has happened as they work, thereby avoiding any onset of denial.
6. Do not normally encourage staff to "go home for a few days to get over it". It is far better (i.e. less likely PTSD symptoms will follow) if they get on with routine and are with "the team". Evidence and research suggests that suggesting staff remain within their work role All the evidence is that keeping people at work to encourage and reinforce a normal identity is far better than encouraging "victim" or "ill" identities by putting someone on sick leave. This will often require tolerance and support for a period when staff are not as productive as normal.
7. Keep in touch. In the weeks that follow an incident, GPs may sign people off work on sick leave "to aid their recovery"; occasionally it may be important to do so. However, line managers should keep in touch by telephone, visiting and/or getting colleagues to visit. Encourage a rapid return to work, even part-time, etc. as being back at work among colleagues is normally the best possible therapy for preventing long-term complications.
8. There are special situations which tend to bring to the surface fundamental cultural issues. Different cultural and religious attitudes to death, disaster and trauma are one of the areas where this is to be expected.
9. Give Time. Many people take up to three weeks to settle down after major trauma/incidents. Counselling in the form of reassurance, explanation, and general normalisation of the response may be appropriate during this period but most people need nothing more.
10. Accept that for a period normal working may be disrupted. For some staff, workloads may need to be temporarily re-assessed, or less complex tasks assigned. However, after a period of time, it is appropriate to gently re-instate the boundaries of normal working.