

Government of Saskatchewan
Critical Incident Stress Management
Guidelines for Ministries and Employees



Table of Contents

1. Introduction	4
2. Definition of a Workplace Critical Incident.....	4
3. Understanding the Impact of a Workplace Critical Incident	5
3.1 Physical Shock	5
3.2 Emotional Shock.....	5
3.3 Changes at Work	6
4. Preparing for a Critical Incident.....	7
4.1 What is a Peer Support Team	7
4.2 Choosing Whether to have a Peer Support Team	7
5. Responding to a Workplace Critical Incident Flowchart Process	8
5.1 NO Peer Support Team	8
5.2 Peer Support Team	9
6. Responding to a Workplace Critical Incident Written Process.....	10
6.1 Pre-Incident.....	10
6.2 Post-Incident	10
6.3 Intervention and/or Consultation	10
6.3.1 Preparing Employees for Intervention – a Defusing or Debriefing.....	10
6.3.1.1 Defusing (performed by Peer Support or LifeWorks).....	10
6.3.1.2 Debriefing (performed by LifeWorks).....	11
6.4 Post-Intervention	11
6.5 Additional Considerations.....	11
Appendix A - Critical Incident Stress Management Guidelines	13
Let Us Help	13
Appendix B - Critical Incident Stress Management Guidelines.....	15
Support Resources	15
Tips for Managers, Supervisors and Peer Support.....	15
Counselling for individual employees and their families	15
Appendix C - Critical Incident Stress Management Guidelines.....	16
Responding to Bereavement	16
Immediate Reactions	16

Later Reactions.....	17
Long-term Reactions	18
Supporting an Employee/Colleague	18
Helping Individuals or a Group to and after the Funeral or Memorial Service.....	19
“I don’t know what to say!”	19
Appendix D - Critical Incident Stress Management Guidelines	21
Suicide Risk Investigation: A Guide for Managers and Supervisors	21
Risk Investigation Questions	22
Action Examples.....	22
Additional Points to Remember.....	22

1. Introduction

This guideline combines the efforts of ministries, managers, supervisors, Peer Support Teams and all employees, with the Government of Saskatchewan's Employee and Family Assistance Program (EFAP) through LifeWorks. The guideline is intended to assist ministries, particularly managers and supervisors, in preparing for and responding to a workplace critical incident, making decisions on setting up and supporting Peer Support Teams, and supporting work units through emotional processes.

Every ministry, and work unit within it, requires a process in place that supports a workplace Critical Incident Stress Management response when required (see section 4 – Preparing for a Critical Incident Response).

2. Definition of a Workplace Critical Incident

A critical incident is any situation that causes people to experience unusually strong emotional reactions that have the potential to interfere with their ability to function.

Some examples of critical incidents include suicide, death of or serious injury to an employee/family member/client, mass casualty incidents, threats to safety and natural disasters.

When a critical incident occurs in or effects the workplace, it is a workplace critical incident. Workplace critical incidents require a workplace Critical Incident Stress Management response. When a workplace critical incident occurs the manager or supervisor must be alerted as soon as possible.

When a critical incident occurs outside of the workplace it is a personal critical incident. For personal critical incidents the Government of Saskatchewan EFAP through LifeWorks, is the appropriate resource for the individual to call. NOTE: critical incidents that do not occur in the workplace may still impact the workplace. As a manager, supervisor or colleague, if you become aware an employee is being affected by a personal critical incident inform them of the Government of Saskatchewan EFAP (visit the [EFAP page on Taskroom](#)). Contacting LifeWorks is private, confidential and voluntary.

For emergencies call 9-1-1.

Contact LifeWorks for critical incident response information – the Care Access Centre is available 24/7 at **1-844-880-9142.**

3. Understanding the Impact of a Workplace Critical Incident

Reactions to a critical incident vary and each employee or work unit will have their own unique response to the sudden and unexpected event. Immediately after a critical incident some employees may feel an initial period of shock and disbelief. The shock reaction may be experienced differently. The impact may be seen through feelings expressed and the behaviours observed.

3.1 Physical Shock

The first and most profound effect of being involved in a critical incident is the effect of being physically shocked. It results from the sudden release of hormones and adrenaline into the bloodstream, and can appear as:

- Chest pain
- Dizzy spells
- Headaches
- Heart palpitations
- Lack of energy
- Neck or back pain
- Shaky feeling
- Restlessness
- Insomnia/nightmares

What occurs shortly after a critical incident is very important: information is gathered and any injuries are evaluated. This is also a critical time for everyone to observe for employee reactions. When a workplace critical incident occurs the manager or supervisor must be alerted as soon as possible, including being informed of reactions that may require additional support now or at any time. Everyone has a responsibility to reach out in an appropriate manner to affected employees.

3.2 Emotional Shock

People involved in critical incidents often report a wide range of emotional reactions. These reactions can be expressed as behavior at both the workplace and at home. These generally do not happen immediately, but occur when the physical shock has begun to wear off, usually the next day.

Emotional shock may include:

- Anger/rage
- Anxiety or helplessness
- Denial
- Easily startled
- Flashbacks
- Inability to concentrate
- Irritability
- Heightened level of suspicion
- Loss of interest in intimacy

In workplace critical incidents, emotional shock can be expressed as anger at the organization from what may be perceived as lack of sensitivity or preparation on the part of management. Lack of knowledge of the events can heighten reactions. The longer the event lasts, the greater the intensity of the experience of crisis. If those witnessing or hearing about the events continue to feel they, or those they care about are threatened by ongoing danger, the greater the impact of the event.

Employees who are experiencing emotional shock should be approached in a respectful and considerate manner. Do not argue with an employee experiencing emotional shock, instead show understanding and support (review the appendices at the end of this guideline for helpful

tips and information).

3.3 Changes at Work

After learning of a workplace critical incident, managers, supervisors and all employees need to be attentive to emotional reactions and prepare for possible behavioural changes in themselves and in others around them, such as:

- Daydreaming
- Decrease in quality of work
- Distraction
- Forgetfulness
- Making small errors
- Reluctance to go back to work
- Repetition of tasks already done

Employees who have been exposed to a previous critical incident may experience cumulative impacts that affects their behavior. Memories of previous involvement in a critical incident has the potential to be triggered or intensify the emotional reaction to the recent event. This can provoke behaviour that seems out of character or out of context. Employees expressing such behaviours should be regarded with empathy, respect and understanding from managers, supervisors and colleagues. Individual employees experiencing an emotional response that seems out of character or context may note that the Government of Saskatchewan EFAP, through LifeWorks, is an appropriate resource for the individual to call. NOTE: critical incidents that do not occur in the workplace may still impact the workplace. Inform the employee(s) of the Government of Saskatchewan EFAP (visit the [EFAP page on Taskroom](#)). Contacting LifeWorks is private, confidential and voluntary.

For emergencies call 9-1-1.

Contact LifeWorks for critical incident response information – the Care Access Centre is available 24/7 at **1-844-880-9142.**

4. Preparing for a Critical Incident

Work units within each ministry requires a clear and known response process for all employees BEFORE a critical incident occurs that includes the following:

1. How to recognize a critical incident; and,
2. What to do in the event of a critical incident.

The process *may or may not* include the establishment of a Peer Support Team.

4.1 What is a Peer Support Team

No workplace is required to have a Peer Support Team. If the duties employees perform in a workplace routinely expose them to challenging clients and work environments, a Peer Support Team is an option that can offer:

- On-site and immediate response;
- Recognition that an event is out of the ordinary and likely to cause emotional distress;
- Recognition when employees are ‘not themselves’ after an event; and,
- An ability to assist the manager/supervisor of the workplace affected respond to the critical incident and to LifeWorks.

A Peer Support Team is composed of Government of Saskatchewan employees trained to respond to employees after a workplace critical incident. Peer Support Teams perform the following functions:

- Reduce psychological harm through symptom reduction and stabilization to prevent distress from worsening;
- Re-establish healthy emotional and psychological functional capacity; and,
- Seek further assistance with the Government of Saskatchewan manager to LifeWorks when higher level assistance may be required.

4.2 Choosing Whether to have a Peer Support Team

When deciding whether a Peer Support Team is the right choice for your work unit, review the following considerations.

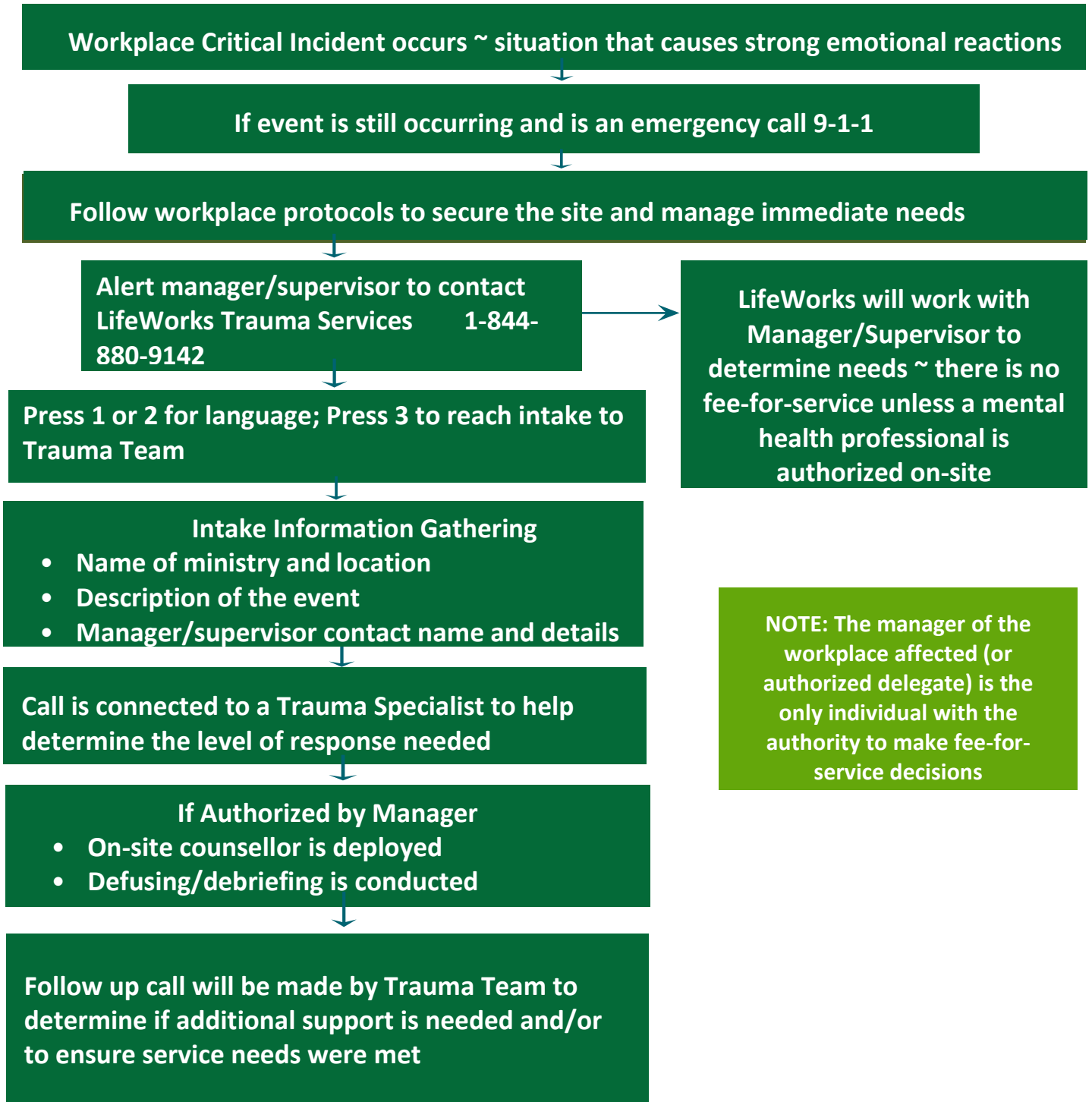
Each Peer Support Team member:

- Requires training and refresher training – this has budgetary costs and turnover management;
- Is at risk for psychological injury in the course of this duty – Peer Support Teams and managers/supervisors that respond to employees after an event require ‘help for the helper’;
- Should be immediately available on duty or on-call – this requires scheduling diligence and appropriate compensation; and,
- Must be respected and trusted by their peers – this reduces mistrust and supports effective response.

If you are still uncertain whether to arrange a Peer Support Team, or you are ready to proceed in setting one up, contact the Government of Saskatchewan EFAP at 306-787-7567. The Government of Saskatchewan EFAP will assist and guide managers in setting up and maintaining effectively functioning Peer Support Teams.

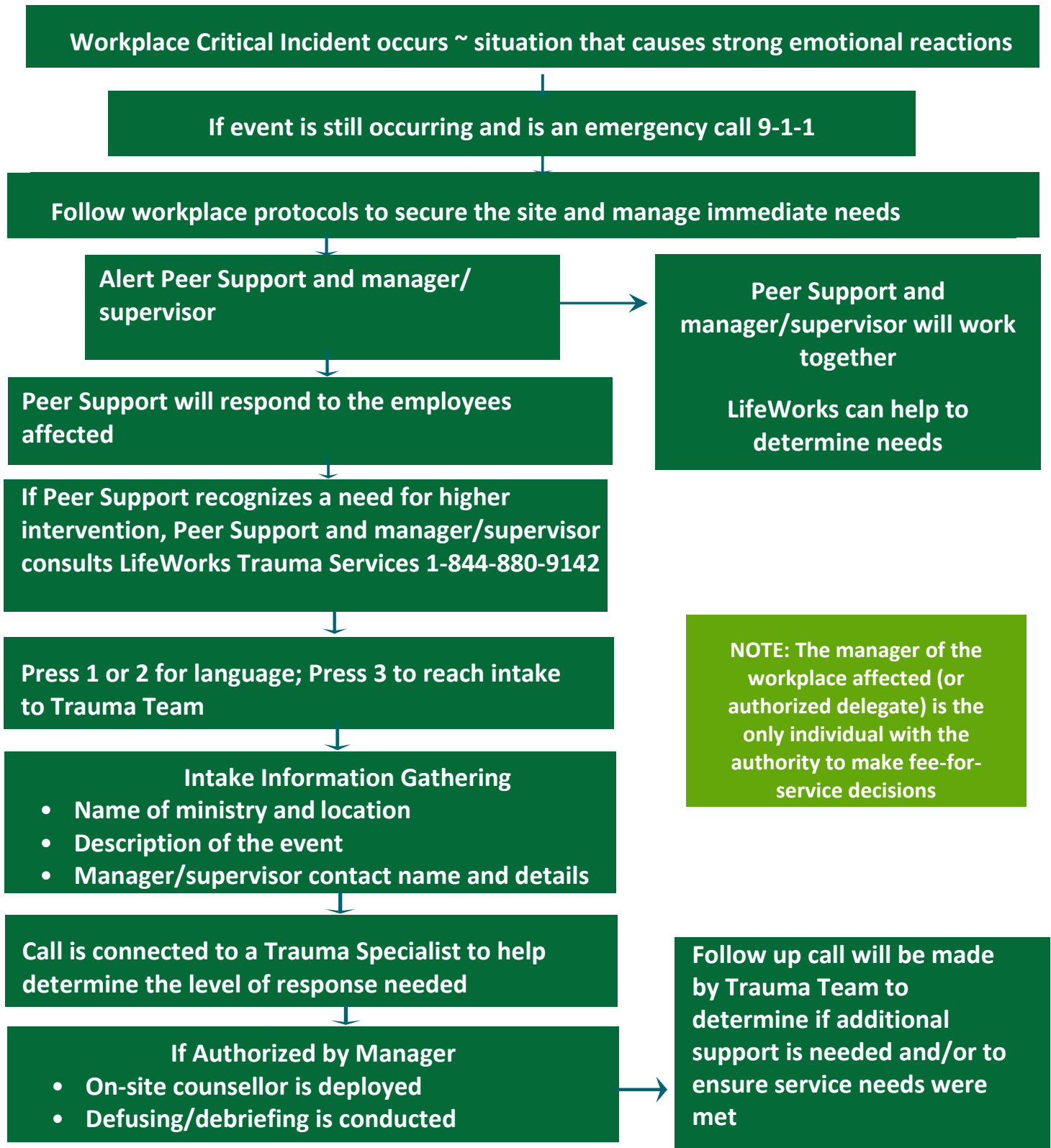
5. Responding to a Workplace Critical Incident Flowchart Process

5.1 NO Peer Support Team



Complete an OHS Incident Report [Form 101](#) on PSC Client

5.2 Peer Support Team



Complete an OHS Incident Report [Form 101](#) on PSC Client

6. Responding to a Workplace Critical Incident Written Process

6.1 Pre-Incident

Ensure all employees in the workplace know what a workplace critical incident is and the process to follow if one occurs. To choose a process Select from 5.1 or 5.2 above and fill in specific detail where required.

6.2 Post-Incident

If the critical event is an emergency and is still occurring call 9-1-1. As soon as the site has been secured and the manager or supervisor, and Peer Support Team where they are in-place, have been informed a decision is made on how to respond to employee's emotion shock. This can include a defusing by the Peer Support Team, and/or contacting LifeWorks to provide details and receive consultation. To reach LifeWorks call **the Care Access Centre 24/7 at 1-844-880-9142 – press 1 or 2 for language choice, then press 3 to reach intake to Trauma Services.** *If the manager or supervisor is heavily impacted by the event, designate another manager/supervisor to coordinate the response efforts.*

6.3 Intervention and/or Consultation

Where a workplace has a Peer Support Team, an intervention (e.g. a defusing) will be determined by the Peer Support Team in consultation with the manager/supervisor (LifeWorks can be consulted as well). Where there is no Peer Support Team or a decision is made to consult, LifeWorks's Trauma Services intake will connect you to a Trauma Specialist to discuss the impact of the event, and advise on the type of response that would be appropriate. **Consultation is free.** There is **fee-for-service when a mental health professional is authorized by the manager to be on-site.** If an on-site intervention is recommended and approved by the manager, the service(s) and fee will be outlined ahead of time at \$250/hour.

Not all critical incidents require on-site or full workplace intervention. A Trauma Specialist can assess the possible impact on individual employees and advise the best actions to take. Further assessment and assistance for individual employees could include accessing EFAP counselling services.

It is generally recommended that employees who are directly involved in a workplace critical incident speak with a Peer Support Team member where they are in place, or a trauma counsellor regardless of whether an employee feels they need it or not. By speaking with these supports individually or part of a group it helps to support the whole workplace through a healing process and identify any possible risks/reactions yet to come so that issues can be proactively addressed. NOTE: Employee participation and access to support is voluntary.

6.3.1 Preparing Employees for Intervention – a Defusing or Debriefing

Defusings and debriefings are typically differentiated by the length of time that has passed between a critical event occurring and the delivery of a workplace response. A decision regarding whether/when a defusing or debriefing should take place will depend on the context of the critical incident.

6.3.1.1 Defusing (performed by Peer Support or LifeWorks)

During the period immediately following a critical incident in the workplace, employees are often in a state of shock. Employees may need some time before they are prepared to talk in detail about their reactions. A defusing typically occurs soon after and within 24 hours of the critical incident. Where a workplace Peer Support Team or LifeWorks has determined a defusing is necessary, this process will provide an opportunity for employees to understand their initial reactions to a workplace critical incident. The major focus is to provide information about what employees may experience over the next several days and offer suggestions regarding self-care during the initial recovery period. If an on-site trauma counsellor has been arranged,

employees will also have the opportunity to meet with the counsellor individually. If required, the trauma counsellor will assist employees to an appropriate resource through the EFAP, their health care provider or other community resources.

6.3.1.2 Debriefing (performed by Peer Support or LifeWorks)

If arranged, ideally a debriefing would occur 24 to 72 hours following an event, although there are sometimes reasons why there needs to be a longer delay. Debriefings are typically more clinical in nature and are performed by trauma counsellors. Debriefings generally run 1.5 to 2 hours to give employees an opportunity to share their reactions to what they have experienced.

A debriefing aims to meet two objectives:

- Allow for mutual support; and,
- Help the participants recognize that the feelings and thoughts they are experiencing are normal reactions to an abnormal incident.

Employees will also be provided with information on self-care and learn/share successful coping skills. If required, the counsellor will assist employees to an appropriate resource through the EFAP, their health care provider or other community resources.

When preparing employees for a defusing or debriefing, make sure that everyone is aware of the following:

- Participation is voluntary. No one should be required to attend, however it should be identified what the purpose and benefits of the defusing or debriefing is.
- Information that is shared is confidential and not reported to the employer.
- Defusings and debriefings are not to be confused with group therapy. They are intended to give practical, helpful information and recommendations to participants while providing a safe, confidential forum for sharing coping strategies.
- A defusing will usually last between 30 and 45 minutes. Debriefings will usually run between 1.5 and 2 hours, but may be slightly shorter or longer depending on the size of the group and the nature of the incident. Counsellors may stay on-site for up to 4 hours.
- All members of the work team directly impacted by the event should be offered the opportunity to participate. Further assessment will need to occur to determine how to respond to those not present at the time of the incident, or those indirectly impacted.
- Depending on the nature of the incident, a Peer Support or a LifeWorks counsellor will discuss and arrange with management and supervisors whether to be included or have a separate session.

6.4 Post-Intervention

After any intervention communications between the manager or supervisor, and Peer Support Team where they are in place, and/or LifeWorks's Trauma Services will be maintained. Follow up discussions are an opportunity to assess the lingering impact of the event on the workplace and employees. If a need is identified or expressed for further intervention, an assessment and co-ordination of services can occur by the decision of the manager.

6.5 Additional Considerations

After a workplace critical incident managers, supervisors and employees may continue to be under an unusual amount of distress and anxiety. The following recommendations may assist in responding to this stress:

- All reactions experienced and observed are normal, given the circumstance that the group has just experienced. Everyone's reaction will be different.

- Individuals who seem to be excessively agitated and anxious should be supported privately.
LifeWorks can assist. Whether you are a manager/supervisor or an employee, contact them 24/7 at 1-844-880-9142 – press 1 or 2 for language choice, then press 1 to speak with counselling support.
 - **NOTE:** If you are a manager/supervisor calling to receive consultation support for an employee, it is that employee’s personal and confidential decision whether or not to speak with the service.
- Employees may benefit from the opportunity to talk with one another following the event.
 - Arrange for a room large enough to fit everyone comfortably and have something nutritious to eat and drink.
 - An effective way to address shock is to consume food low in carbohydrates, sugar and caffeine and that rehydrate and replace vitamins and minerals, such as fruits, vegetables, real juice and mineral water. Take the time to explain why these choices are being offered to encourage continued healthy eating – high in fats, sugar and caffeine can aggravate the physical shock and cause increased states of agitation and hyperactivity.
 - See [FAM policy](#) on funds available.
- Distribute copies of *“Let Us Help”*, an appendix at the end of this guideline, as a handout. Also available by calling LifeWorks’s Trauma Services is *“Taking Care after a Traumatic Event”*.
 - This information discusses the preliminary stages and reactions those involved in the critical incident may anticipate, while offering simple, clear suggestions about what can be done to help in the next few days.
- Ensure that employees who are most seriously affected are accompanied home.
 - If the employee does not have available supports arrange for a taxi;
 - Employees should avoid using public transit or going home alone; and,
 - **LifeWorks can assist, contact them 24/7 at 1-844-880-9142 – press 1 or 2 for language choice, then press 1 to speak with counselling support.**

Managers, supervisors and Peer Support Team members may face additional pressure to be in control, calm and collected. This may be difficult because everyone may be experiencing the same reactions – this is normal. Anyone that is emotionally impacted by a critical incident is encouraged to personally consult LifeWorks, or talk with the on-site trauma counsellor if one has been arranged to attend.

Appendix A - Critical Incident Stress Management Guidelines

Let Us Help

Critical incidents and traumatic events are unexpected. They can take away a sense of security and well-being, and may interfere with living usual day-to-day life at home and work. The content below covers common physical and emotional reactions to an incident/event, changes one might see at work, ways to help coping, as well as support a co-worker. It can also be given to family member of an employee who has been affected.

HOW DO YOU FEEL?

After an incident you may experience one or more of these common reactions:

PHYSICAL

- Changes in appetite
- Chest pain
- Dizzy spells
- Headaches
- Heart palpitation
- Insomnia/nightmares
- Lack of energy
- Neck and back pain
- Restlessness
- Shaky feeling

EMOTIONAL

- Anger/rage
- Anxiety or helplessness
- Denial
- Easily startled
- Flashbacks
- More suspicious of others
- Inability to concentrate
- Irritability
- Overprotection of children
- Decreased interest in intimacy or sex
- Loss of trust

CHANGES AT WORK

- Daydreaming
- Decrease in quality of work
- Increase in errors
- Forgetfulness
- Reluctance to go back to work
- Repetition of work task already done
- Tendency to over-work

Things that can help you cope

- Avoid excess caffeine or alcohol
- Maintain normal routine and activities as much as possible (e.g., work, sports, errands, etc.)
- Drink lots of water
- Maintain social activities – do not isolate
- Get plenty of sleep
- Return physical surroundings to original appearance
- Eat regular, balanced meals
- Talk about the event with friends, family and co-workers – it's important to talk it out
- Participate in moderate exercise
- Write down thoughts
- Encourage yourself staying at/going back to work

Support a Co-worker

- **Acknowledge the event.** Don't pretend it didn't happen. Be an attentive listener. Avoid asking a lot of questions – let them set the pace.
- **Offer long-term support.** There is no set recovery period for traumatic experiences.
- **Offer practical support.** Send an invitation for lunch or coffee.
- **Be observant.** Look for signs of prolonged emotional distress (more than four to six weeks). Suggest additional support (e.g. LifeWorks) if the distress remains.

Family Support for an Employee Affected

- **Listen.** Encourage openness and listen to whatever the person affected needs to say, however many times it needs to be said. Don't give advice, just listen. Don't minimize. Remember, the person may need to repeat the story.
- **Control your reactions.** Maintain focus on how the person is feeling.
- **Encourage staying at/going back to work.** Although the person may feel like quitting or not going back to where the incident occurred, it will not change what has already happened and may prevent full recovery.
- **Include the whole family in the healing process.** Include all family members in discussions so that they can gain perspective and cope with their feelings as well as the person affected.
- **Watch for signs of strain in relationships.** Marital problems are common after a traumatic event. Family members can access counselling by contacting LifeWorks at 1-844-880-9142 to connect with a counsellor and/or to book an appointment for in-person assistance.
- **Take care.** Family will be able to best support someone when eating well, getting enough sleep, and asking friends and other family members to help.

Appendix B - Critical Incident Stress Management Guidelines

Support Resources

Tips for Managers, Supervisors and Peer Support

- Remain as calm as possible. Someone needs to take charge and provide stability during what can be a time of chaos.
- It is important to recognize that you are not immune to the trauma and therefore may require your own support network.
- Do not minimize the trauma in an attempt to make you or employees feel better.
- Be available:
 - Listen to what employees need to talk about. This is important to begin the recovery process.
 - After a trauma, employees need to know that the organization cares for their well-being and safety.
- The EFAP is available – contact LifeWorks for personal and workplace support and consultation. The professional Trauma Specialist counsellors will help you assess the need for group or individual counselling and debriefing, and will organize this with you. These counsellors are also available to offer on-going support and consultation.
- Connect with Human Resource Business Partners so they can assist with operational needs.

Counselling for individual employees and their families

All employees and their family members who are covered under the Public Employee Benefits Agency Benefits Plans are eligible to access the EFAP for counselling and other services. If an employee has experienced a workplace critical incident, this can impact families as well. They can contact LifeWorks at 1-844-880-9142 to connect with a counsellor and/or to book an appointment for in-person assistance.

Appendix C - Critical Incident Stress Management Guidelines

Responding to Bereavement

Grief in the workplace is usually handled differently than in our private lives. At work people may perceive crying or displays of emotions as signs of weakness and unprofessional. Consequently, some people may deny themselves the need to grieve as they try to carry on the best way they can. Employers and employees often underestimate how the death of a colleague may impact them. They may not appreciate some of the problems associated with grief in the workplace. The grief process is a very individual one. The time an individual spends grieving depends on many things, including the relationship and emotional attachment they had with the deceased. A person might feel much better one day and worse the next.

Some reactions that grieving employees will demonstrate will be immediate, others will occur later. It is important to remember that there are also long-term reactions to the death of an employee/colleague.

Immediate Reactions

- **Crying.** Crying is the most common reaction to grief. Sometimes we will cry not knowing why. Usually it is related to a flashback or a trigger that was not recognized. Spontaneous crying could also be a reaction to exhaustion from lack of sleep (often caused by grief). It is okay to cry and let your colleague cry. Support time to be alone or to simply seek the presence of a co-worker to share the grief with. It is important to monitor sleeping patterns closely – if usual patterns of sleep do not return it may be important to go see a health care provider.
- **Guilt** is experienced more often than we like to acknowledge. We may feel guilty for being happy or for laughing when other co-workers are still sad, or in taking on some tasks usually handled by the deceased. In situations where there was a suicide, it is not unusual for co-workers to feel that they did not do enough to prevent this tragedy from happening: “why did we not see this coming?”, or “maybe if we had insisted more this would not have happened” ... You or a colleague may feel guilty for not having done enough to prevent the death. Be careful to not blame yourself or others, and be there to support one another.

When the death is sudden/unexpected we may feel guilty or angry for not having the time to say goodbye. In retrospect we may wish we were at a specific place instead of where we were at the time of the death or shortly before the death. We have no control over such sad events and there is nothing we can do to change what happened. It is important to share these feelings with a caring person.

Remember that grief is a very individual process. We must respect everyone’s need to grieve. We must also respect and acknowledge our individual needs. It is appropriate to share times of happiness with others.

- **Anger.** “Why did you leave me/us?”, “We told him not to go there and he did not listen” ... These are examples of statements made by grieving employees angry at circumstances that they associate with their co-worker’s death. This anger can be more intense if the death was an

accident, suspected foul play or a confirmed suicide. Often, we will have no closure until the investigation is completed.

To begin integrating the reality of their colleague's sudden death, it is important that employees be provided with appropriate, accurate and factual information about the situation. NOTE: keep in mind confidentiality and the family's wishes in sensitive situations such as suicide. Upset co-workers need the opportunity to respectfully speak and share concerns with a colleague, or an EFAP professional for healthy emotional support. They will also need time to integrate the reality of carrying out duties without the co-worker who has deceased.

- **Fear** is also a very common reaction to grief in the workplace. Some may want to remove pictures or personal items from the deceased's office thinking it is not appropriate to leave them there. Others may not be able to walk in front of "their office" without crying or without seeing them there and they may not want anyone to sit in that office.

Someone who is comfortable to do this should remove personal items. They can be sent to a family member or you could simply invite a family member to come and get them. There is no rule about when this should be done; it could be a decision by consensus. With the family's permission, keeping a personal item as a remembrance of a deceased colleague is acceptable.

- **Sadness.** Walking in front of the office or seeing someone else assigned to the work area used by the deceased colleague can bring on feelings of sadness. As a manager or supervisor, it is important to keep employees informed when a decision has been made to hire for the position. Let them know your intentions and the time frame you need. The hired person should be made aware that the deceased employee previously occupied the position. It is important to help employees understand and accept that the new person is not a "replacement" but a new hire for the position. Both employees and the new person may need support with their reactions to the change.

Later Reactions

While the above reactions will subside with time, grieving is a very individual process. It is important to let each employee go through it at their own pace. However, tension or conflict can arise when individuals are at different stages of grieving. Some will be doing fine and will return to normal duties. Others will still be struggling with the loss and be less ready to deal with change. It is essential to meet privately with an employee and explore what is going on. Be sure to provide them information on how to contact the EFAP for counselling or other services that may be helpful to the reacting employee(s).

A common time for tension is when there has been a new hire to take on the duties and obligations carried out by the deceased co-worker. Employees may react strongly and have difficulty accepting this "new" person as an integral, permanent part of the organization. If the "new" person is in a managerial position, some employees could have difficulties accepting their authority or accepting any advice from them. Some employees may even compare the new manager to the deceased and make statements such as to how the deceased would have dealt differently with a situation.

Long-term Reactions

There is no time limit to long-term reactions. Reactions depend on the relationship the employee had with the deceased and how the employee has dealt with grief in their past. Reactions can occur at any time. However, moments such as the first year anniversary of the death, special occasions like holidays and office parties can bring intensity to reactions. A picture, a phrase, a specific situation, all could be triggers to a sad or angry reaction for the employee, bringing them back in time and reliving painful moments of the colleague's death.

These long-term reactions are common and part of the grief process, but they can be controlled and generally disappear. Some people may need more time to recover from such reactions. They may need to see their own health care provider or may need to seek counselling.

Supporting an Employee/Colleague

It is often difficult to know what to say. Sometimes people avoid contact and limit conversations with the person who is struggling because they might "say the wrong thing". Typically, grievors have a heightened awareness of what is going on around them and are very sensitive to changes in their relationships with colleagues, friends and family. Avoidance can increase their sense of isolation and their ability to receive comfort from those they most trust.

Some people may feel that the individual grieving may in fact prefer/need to be alone. It is more often the case that they need people to treat them "normally". Many of us are afraid to talk to our colleagues about loss – our own fear causes us to avoid the individual or avoid the subject. Fear is one of the most common responses to loss. Fear may cause grievors to isolate and avoid contact as well.

So what are the alternatives to avoidance? Allow the individual grieving the loss to decide whether they wish to talk about it. By saying something as simple as "I am sorry about the loss" allows the griever to say "thank you" or to take the opportunity to talk about it – let them make that decision. When no-one ever mentions the loss, they can be left feeling even more isolated and unsupported. Trust yourself! You will know if the individual does not want to continue the conversation. Listen and they will tell you.

There are many practical and respectful ways of helping colleagues struggling with loss. Your relationship with that person will help guide you with which of these suggestions are most comfortable for you:

- Offer to help them with personal needs.
- Assist with work duties e.g. help answer the phone and greet visitors, work together on items with a strict deadline, etc.
- Help keep workspaces tidy.
- Support a quiet space to be alone, if desired.
- Remind them to eat well and get good rest.
- Bring in an extra portion to share lunch.

Helping Individuals or a Group to and after the Funeral or Memorial Service

- Offer transportation support if necessary.
- Be especially sensitive to help with tasks that the deceased.
- Offer help with the extra workload.
- Write notes of support/thank you notes.
- Listen.

These are a few examples. Your interest in helping will generate a longer list of how you might be able to help. Remember, if you don't ask, you won't know how supportive you can be. Ask before you assume what will be helpful. When someone has lost a close colleague they may feel that their life is no longer in their control. Let the person tell you what will be helpful.

Keep in mind that you cannot take on all the responsibilities for your colleague and your involvement will in some part be based on your existing relationship.

To support effectively, it is important to manage your involvement and not become exhausted yourself.

“I don’t know what to say!”

Do not say	Instead, say
I know just how you feel.	I am so sorry.
It is God’s will.	I know this is very painful for you.
We will find another great colleague.	They were very special.
They had a very full life.	I know you will miss them.
It’s time to move on with your life.	Take all the time you need.
Be strong.	<Hug>/or This must be very hard.
Something good always comes out of Tragedy. (Or every cloud has a silver lining).	<Silence> Listen.
They are better off.	We will all miss them.
Call me if you need me.	I will see you tomorrow. In the meantime, if you need me here is my number.
You must be strong for the team.	How are you managing?

Another comment that will likely be unhelpful is "You should be over it by now". While their grief process may frustrate you, concern you or even irritate you, it is ultimately their process and you may support, but not direct their journey. Remember, coping with grief takes the time that it takes.

Do not underestimate the value of listening as a sign of support and caring. Your colleague will also give you cues on their philosophy regarding death and grief that will be helpful to you in providing support. Culture and religious beliefs play an important role in how individuals cope with illness and death.

If in doubt, be honest. Some of the best conversations and learning experiences may occur when you simply state "**I don't know what to say**". Your vulnerability will be genuine and will allow your colleague/friend to be honest with you without fear.

Appendix D - Critical Incident Stress Management Guidelines

Suicide Risk Investigation: A Guide for Managers and Supervisors

As a manager/supervisor there are times when you may be speaking with employees and hear comments that raise your level of concern. These comments may include statements like: “I just want to end it”, “I don't know why I go on”, “If this happens, that's it. I have nothing to live for”, “Don't bother with me; I'm not worth it.”

These kinds of comments often leave the other person wondering "What do they mean?". It is important to get clarification when you are in a situation where someone is communicating with you in this way, especially if you feel that this person is anxious, emotional or distraught. To clarify, ask the question "**What does that mean?**". The key is to ask questions that are open ended so that they require more than a yes or no answer. Often, in situations where there may be risk for the individual, the person will speak in generalities. Clarifying questions enable us to help them be more specific about their intent.

If the employee does admit that they have been thinking about "ending it" (or uses any words that lead you to believe that they are contemplating suicide or harm to another) then you will need to do further investigation to determine the seriousness of the risk. In some cases, the person may be having thoughts of suicide based on situational issues and/or a sense of hopelessness. If, by clarifying through further questions, you become reassured that while the person may have said this comment, it is not their intent to act, then strongly recommending the need to seek help is an important step. A situation is always serious when someone feels this kind of hopelessness.

If the answers to specific questions lead you to suspect that this person may in fact harm themselves or others, then you have a responsibility to take immediate action. The individual is in need of a thorough risk assessment and must be taken to hospital at once. This may involve calling supports (e.g., family/friends/emergency contact person) to bring the person to the hospital emergency department or to **call 9-1-1**.

Calling 9-1-1 may be seen as an “exaggerated” action. The importance in calling 9-1-1 is in providing both yourself and the person you are concerned about another resource to assist in a difficult situation. If the person you are concerned about is talking about suicide, that person is also making a cry for help. Your calling 9-1-1 is in support of that person’s cry for help.

If you are unsure of the appropriate action, you always have the option of calling the EFAP to discuss the situation by calling LifeWorks at 1-844-880-9142, press 1 or 2 for language; press 1 and ask for a Trauma counsellor to provide this type of consultation.

Risk Investigation Questions

- What does that mean to you?
- Is there a plan (to hurt yourself, to hurt someone else)?
- Describe it to me?
- Have you done this (attempted suicide, been violent, threatened violence) before? If yes, (details) what happened at that time?
- Do you have access to a weapon(s)? (If they have described a plan, also ask them specifically about the weapons/tools that they mentioned in their plan (e.g. rope, gun)
- Have you been using alcohol and/or drugs recently? When?
- Do you believe that you are actually going to follow through with it?
- Are there any things that keep you from doing it?
- Are you alone at present? Is there someone who could be with you? (get a sense of any supports - and ask questions like “where do they live?” - this may lead to some help)
- Is anyone else aware of the situation? (you may discover other resources helpful to the process - is their family doctor aware? Are they already in counselling?)
- The more "yes" answers, and the more lethal the plan/previous incidents, the greater the present risk. If based on this risk assessment you determine that there may be high-risk then you need to take action.

Action Examples

- If you know the employee’s supports (e.g., family member), call to see if they are available to take the employee to the hospital emergency and ensure the employee is safe and not alone.
- If there is no one to accompany the employee to go to the hospital emergency, you must call 9-1-1 and let them know that you have concerns that this individual may harm themselves and provide your reasons.
- **Do not** let the employee go to the hospital on his or her own. Make sure the employee is accompanied by: family/friend/emergency contact person or emergency services workers by calling 9-1-1.

Additional Points to Remember

- **Do** take suicide statements and threats seriously – be cautious; do not take chances.
- **Do not** refuse to talk about “those silly thoughts”.
- **Do not** act shocked, dismayed, or frightened.
- **Do not** try to convince the individual that there’s a lot to live for.
- **Do not** make comparison with other “cases”, for example, “Look at Mr. X with all his problems. He should be the one who wants to kill himself.” (Besides, this would be a breach of confidence!)
- **Do** “stay with” the employee.
- **Do** listen and accept the right of the employee to feel as they do.
- **Do** show genuine interest and provide support.

**Professional support is available.
For emergencies call 9-1-1.**

Contact LifeWorks for critical incident response information – the Care Access Centre is available 24/7 at **1-844-880-9142**.

Visit the **Employee and Family Assistance Program** Taskroom page for more information.

