

Critical Incident Management Plan

1. PURPOSE/ PREAMBLE

BCIT is committed to promoting individual and community well-being, safety and security by protecting the learning, teaching and working environments of students and employees. When critical incidents occur on campus, BCIT will respond by providing intervention and support to individual students or employees.

The purpose of this Critical Incident Management Plan (CIMP) is to:

- define authority
- define terminology used in the CIMP and in critical incidents
- detail procedures for the delivery of a timely and coordinated response to incidents
- define roles, responsibilities and relationships

All records of activities undertaken under this management plan will be protected by privacy legislation guidelines.

2. AUTHORITY

The BCIT Critical Incident Response Policy (BCIT Policy 7515), authorizes the development of a CIMP. The Director of Safety and Security is the Critical Incident Response Team (CIRT) Coordinator.

Related policies:

- BCIT Student Regulations Policy 5002,
<http://www.bcit.ca/files/pdf/policies/5002.pdf>
- Harassment and Discrimination Policy 7507,
<http://www.bcit.ca/files/pdf/policies/7507.pdf>
- Abusive or Threatening Behaviour Policy 7522,
<http://www.bcit.ca/files/pdf/policies/7522.pdf>
- Emergency Response Policy 7530,
<http://www.bcit.ca/files/pdf/policies/7530.pdf>

3. DEFINITION: TERMINOLOGY and CRITICAL INCIDENTS

Critical Incident - an event that is experienced as sudden, unexpected, incomprehensible, shocking, and personally upsetting. It has the potential to result in physical and/or emotional distress which affects employees and students at BCIT.

Critical Incident Stress (CIS) - the emotional, physical, cognitive and behavioural reactions, signs and symptoms experienced by a person or group in response to a critical incident. It is a normal response to an abnormal situation. It can lead to psychological stress and anxiety which subsequently may result in poor work performance, family stress, personality shifts and a variety of other problems.

Debriefing - a proactive, professionally led, post-incident intervention involving a group meeting or discussion about a distressing critical incident. A debriefing is based on the core principles of crisis intervention. It is designed to mitigate the impact of a critical incident and assist in the amelioration of stress associated with the critical incident. Debriefing will ideally be conducted within 24 to 72 hours post-incident (refer to Appendix II).

Defusing - an intervention that is a shorter, less formal version of a debriefing. It generally lasts from 30 to 60 minutes and is best conducted one to four hours after a critical incident. It is usually not conducted more than 12 hours after an incident. Like a debriefing, it is a confidential and voluntary opportunity to learn about stress, share reactions to the incident and express emotions. The main purpose of this type of intervention is to stabilize people affected by the incident so they can return to their normal routines without unusual stress. The goal is to normalize the process, emphasize resiliency and deal with logistics. Where appropriate, a formal debriefing could also be required.

Grief and Loss Counselling - a structured group or individual session following an incident. It often helps staff and students to understand their own grief reactions as well as creating a healthy atmosphere of openness and dialogue around the circumstances of the incident.

Intervention - the organized and professional response to critical incidents. The goal of an intervention is to assist affected individuals to share their experiences, express emotions, learn about stress reactions and symptoms, and to help individuals to resume normal activities. An intervention is conducted as a confidential, voluntary and educative process. It is not therapy. If the critical incident involved physical harm, an intervention would include the participation of medical personnel.

Post Traumatic Stress Disorder (PTSD) - a formally recognized psychiatric disorder which may result from exposure to a critical incident. PTSD is identified by three characteristic clusters of symptoms. The symptom clusters are:

- Intrusive/recollected thoughts
- Hyperarousal
- Numbing/withdrawal

This condition often develops slowly as a reaction to stress that has been suppressed for some time.

Critical incidents may require different levels of response and may involve:

- Incidents of people in extreme emotional distress
- Incidents involving sudden trauma or death
- Incidents of serious inter-personal conflict
- Incidents of other matters similar in nature

Examples of critical incidents include, but are not limited to, the following:

- Sudden death
- Suicide or threat of suicide
- Life threatening injury/illness
- Sexual assault
- Mental health crisis
- Drug/alcohol overdose
- Violent or threat of violent crime on campus
- Campus disturbance/riot
- Fire/explosion
- Natural disasters

The Emergency Response Policy has implemented response procedures to include but is not limited to the preceding events.

4. Procedures For Dealing With A Critical Incident

4.1 Critical Incident Reporting

Critical incidents should ideally be reported as soon as possible to a supervisor, chief instructor, program head, education manager or administrative manager who will report the incident to BCIT Safety and Security. If no such referral is possible, or if the opportunity for a timely response would be lost because of the circumstances of the critical incident, a direct referral to BCIT Safety and Security may be made. See Appendix I for a list of current contact numbers.

Police, fire and medical emergencies should be reported to the appropriate community agencies by dialling 9-1-1, and followed up with calls to First Aid, Medical Services and to BCIT Safety and Security.

After Hours and Weekends

Reporting should be done directly to BCIT Safety and Security.

Collection of Information

4.2 As much information as possible (on a need-to-know basis, to provide timely and appropriate response in clear respect for privacy legislation) should be collected about the event to assist with decisions about required actions. See Appendix III for more details on the type of information to be collected.

4.3 Assessment

The Director of Safety and Security, or a designate, will make a preliminary assessment of the facts and determine if it is necessary to assemble the Critical Incident Response Team (CIRT). Recommendation for the assembly of the CIRT can be made by the Director of Medical Services or the Coordinator of Counselling Services in response to incidents where they are the first contact who will immediately notify Safety and Security.

4.4 Critical Incident Response – Action Plan

- An **Immediate Response** (such as Police/Fire and Ambulance, Medical and Counselling Services, Safety and Security). This may include:
 - attending the scene of the incident to stabilize the situation
 - collecting relevant information about affected parties and needs to be addressed
 - assessing the need to assemble the CIRT and/or an Expanded CIRT

The Critical Incident Response Coordinator may assemble a qualified Critical Incident Response to develop an Action Plan.

The Critical Incident Response Coordinator will determine if additional

The CIRT will work within the bounds of professional confidentiality.

- **Quick Response Secondary Services**

Students or employees who are affected by the incident as victims, witnesses or perpetrators may benefit from access to activities and services that normalize their response and resiliency as well as addressing logistical concern such as:

- defusing
- debriefing
- counselling
- grief and loss counselling

- **Case Management /Follow up Plan**

The CIRT or Expanded CIRT may devise a Case Management/Follow up Plan which may include:

ongoing monitoring by departments involved

service referral needs within BCIT, for example Medical Services and Counselling Services, EAP for employees, Harassment and Discrimination Advisor/Campus Mediation Services

referrals to community resources

implementation of the policy on Abusive and Threatening Behaviour or any other BCIT policy in order to support an appropriate outcome if the situation warrants

development of the reporting responsibility, the writing of the summary report, including recommendations for changes in policy and procedures and advising senior management

The content of each intervention is confidential. A record of each incident and the responses will be maintained by the CIRT Coordinator (Director Safety and Security).

The team members who participated in the intervention may also require debriefing following the incident intervention. Human Resources and/or the EAP provider will arrange to provide this assistance.

4.5 Employee Development / Communication Plan

Pre-incident communication will focus on educating members of the campus community about the nature of critical incidents, how to report them, and how to get the help needed if they have been involved with a Critical Incident.

Brochures/web pages will be developed with checklists for use by members of the campus community to clarify the roles and responsibilities of those who respond to the incident and/or are affected by the incident.

Incident communication will focus on mitigating the effects of the incident on those who are directly involved. Relevant information will be shared with those who are impacted by the incident. Communication will be conducted in a manner that protects the interests and privacy of those involved.

Post-incident communication will focus on encouraging an orderly return to normal operations in a manner that protects the interests and privacy of those who were involved. Its scope includes, but is not restricted to, providing reminders to the community on how individuals can access Medical Services and Counselling Services, and how members of the community can become involved in any post incident analysis.

By necessity, communication will be shaped by the nature of the Critical Incident. The Crisis Communication Plan will provide a communication protocol outlining the responsibilities for the development and implementation of both internal and external communication plans that are specific to the nature of the incident.

4.6 CIRT Evaluation

Incident Response Evaluation

The Critical Incident Response Team shall meet to evaluate the effectiveness and the efficiency of the results of the application of the CIMP procedures and to make recommendations for improvements or changes.

The effects of a critical incident vary greatly and some individuals who are directly involved may require additional assistance beyond what is defined by the CIMP.

It may also be necessary for the CIRT Manager and members of the CIRT to follow up to advise members of senior management (potentially the President, Vice Presidents, members of the President's Executive Council as well as members of the affected departments). This action will meet due diligence requirements and will allow for recommendations for any changes that may be necessary as a consequence of the Critical Incident. This may also involve a written report with recommendations.

System Evaluation

Any requirement for review, revision and updating of policies and procedures recommendation of changes and improvements to institutional responses, and identification of necessary resources for education, training and improvements to the CIMP, should be identified in a written report.

4.7 Ongoing Work of the CIRT

Training

Individuals providing clinical or coordination of services within this CIMP must be provided with training opportunities designed to ensure that they are competent and qualified to provide those services. Supervisors or Managers are expected to provide

education leave opportunities for individuals who are scheduled to undergo training to satisfy this CIMP.

4.8 Roles, Responsibilities, Relationships of Critical Incident Response Team

Members of the CIRT may include the:

- Director of Safety and Security
- Director of Medical Services
- Coordinator of Counselling Services
- Manager of Human Resources
- Director of Student Services

The role of the CIRT is to develop and implement the Action Plan and to advise the CIRT Coordinator and to assist if required when individual incidents occur. It is also involved with follow up, evaluation, and education.

The Expanded CIRT may include but not be limited to:

- Vice President of Student Services
- Vice President of Education
- Vice President of Human Resources
- Deans/Directors/Managers/Supervisors/Program Heads/Chief Instructors
- Director of Marketing and Communications
- Registrar's Office Representative
- EAFP Provider

CIRT Coordinator

The Director of Safety and Security or designate is the Critical Incident Response Team Coordinator:

- receives calls for response to critical incidents from the BCIT community
- ensures the safety and security of individuals at the scene of a critical incident
- arranges for the timely and coordinated response to individual critical incidents
- develops and implements a Critical Incident Management Action Plan and a Crisis Communication Plan
- develops and implements a reporting responsibility to ensure that executives, departments and schools affected by a critical incident are notified of impacts such as institutional liability, ethics and discipline

Deans/Directors/Managers/Supervisors/Program Heads/Chief Instructors

Are responsible for:

- implementing the CIRT procedure in their area of responsibility
- identifying potential critical incident circumstances, and reporting to BCIT Security

Instructional staff/employees

Are responsible for:

- reporting to supervisory or departmental leaders any potential critical incidents or any significant symptoms which may result from a critical incident
- availing themselves of support in the event of exposure to critical incidents

Medical Services /Counselling Services

Are responsible for:

- participating on the CIRT
- planning for the Intervention
- facilitating debriefings, defusing and counselling services or grief and loss sessions
- delivering a response during normal working hours
- identifying after-hour services
- participating in case management and follow-up interventions as required
- maintaining strict confidentiality regarding critical incidents and for the individuals receiving assistance
- making clinical decisions about the appropriateness of an Intervention

Human Resources

In the event of a critical incident, the Director of Safety and Security contact the Human Resource Business Partner office immediately at 604-432-8384 and your call will be directed to the appropriate Human Resources Business Partner. The Business Partner may coordinate grief and loss/critical incident counselling for employees on an individual or group basis through the Employee and Family Assistance Plan.

If the critical incident involves the death of an employee or retiree, the Business Partner notifies all required departments/managers and works with the employee's beneficiaries, the Group Life carrier, the Pension Corporation, and the BCIT Payroll Department to process all death benefit claims. The Business Partner may coordinate grief and loss counselling for the employee's family and/or colleagues through the Employee and Family Assistance Plan.

Information about the Employee and Family Assistance Plan can be obtained by calling 1-800-387-4765 or by visiting the Human Resource website at <http://www.bcit.ca/hr/health/assitance.shtml>

BCIT

Is responsible for:

- ensuring that appropriate policies are in place to facilitate the implementation of the CIMP
- ensuring that sufficient resources are available for the implementation of the CIMP

APPENDICES

I. List of contact phone numbers for the CIRT Members:

1. Glen Magel, Director Safety and Security,
451-6875; cell, 604-220-9452; pager, 604-605-9294
2. Al Dunn, Security Manager,
604-456-8009; cell, 604-619-7348; pager, 604-735-5201
3. Sarah Cooper, Security Manager,
604-456-8009; cell, 604-328-3597; pager, 604-320-8560
4. BCIT Communications Centre, 604-451-6856

II. Sample Agenda for a Critical Incident Debriefing Session

1. Introduction of leader(s), CI reps and participants
2. Enquire if media is present and ask them to leave.
3. Purpose of meeting:
 - To share reactions and information
 - To share thoughts and concerns
4. Set some ground rules:
 - Confirm confidentiality
 - Announce time (1 hour)
5. Leader for session states, "I'm sorry this happened"
6. Provide simple and direct information about the event (do homework ahead of time and get as many facts as possible to answer questions that may arise, within bounds of confidentiality)
7. Provide information/education about the responses people might experience and the processes people may encounter as they bounce back from events such as this.
8. Ask participants to tell about their experience (story, impact, current functioning).
9. Validate key emotional reactions – listen and say a few words of comfort (be prepared for a range of reactions).
10. Closure of debriefing.
 - Review session
 - Education: Tell participants what they might expect (lingering memories, reminder of other losses, etc.)/normalize reactions)(handouts should be available)
 - Discuss with participants how they have coped with stress in the past/resilience
 - Inform them about where to go for help (brochures should be available)
 - Provide information about the next few days – how to get information, who to contact re questions, how to find out where and when classes will resume.
 - Thank them for coming.

III. Sample of information to be collected about the event to aid response

- Details of event—who, what, when, where, how
- Family information and student profile
- People directly/indirectly affected
- How individuals are affected
- Current situation in the school e.g. rumours, level of awareness, impact on students and staff
- Program name year and set number if applicable
- Contact telephone numbers
- Ethnic background and language
- Family Doctor
- Known disabilities
- Building and locker number
- Family contacts
- Close friends, including partner
- What are the impacts on classes or exams? Should they be cancelled or postponed?

Sources of information may include:

- Registrar's Office
- Human Resources
- BCIT employees
- Known Friends
- Co-workers
- Family/Parent/ Guardian
- Other people involved