

1 INTRODUCTION

1.1 Introduction to the chapter

The purpose of this chapter is to provide an overview of the current study. It offers an elaboration of the title, along with the justification, aims and rationale of the study. It offers a definition of critical incident and suicide cluster and includes information about the local context, which gives background to the study. The chapter also explores the role of the educational psychologist (EP) and offers an outline of the remainder of the study.

1.2 Elaboration of the title

The current study investigated how three organisations responded to a critical incident involving a suicide cluster. A critical incident is a rare event which is classified by as an emergency. The study considers the impact of a suicide cluster involving young people on the working practice of professionals from three organisations. The study explored the processes and procedures followed at the time of the critical incident, within each organisation and when joint working. The study also explored feasible and desirable ways of improving systems when responding to a critical incident to encourage a joined up delivery of services within the LA. Of interest were the experiences of personnel when responding to the critical incident.

1.3 Background: The local context

In 2008 following a spate of suicides of young people under the age of 25 an emergency response was put into place within one LA in Wales. Given the nature of the event the incident was considered to be a 'critical incident'. A number of LA agencies responded to the critical incident, the nature of which placed great demand on local resources. A critical incident of this nature involving a suicide cluster had not been experienced within the LA before and children and young people attending local schools were greatly affected, as well as members of the local community. The educational psychology service (EPS)

responded to the challenges faced by schools and worked alongside other professionals during the crisis.

1.4 Justification for the research

1.4.1 Policy

In line with the Welsh Government publication *Talk to me, the national action plan to reduce suicide and self harm in Wales 2009-2014* (WAG, 2009) local service delivery plans to reduce levels of suicide have been described in the consultation document of 2008, *Improving Futures*. The proposals are informed by the United Nations guidelines *Ottawa Charter* (1986) framework on which health promotion initiatives are set out anchoring them in community type development. The *Ottawa Charter* states that a strategy is more likely to succeed if it challenges various agencies to deliver policy recommendations. With reference to the Ottawa policy recommendations the current research focuses on further developing the strategy in Wales on the following three policy priority areas / key initiatives:

6.1.1 Develop and implement a short term emergency structure / protocol for use now and in any future incidents. The structure identifies individuals with lead responsibility and the process required to be followed.

6.1.3 Assess what actions are already being undertaken and identify service gaps, share good practice and provide advice on delivering a coordinated approach to service delivery.

6.1.4 Develop a robust communication mechanism to maintain and enhance the coordinated approach amongst key partner agencies. This will ensure the dissemination of information to support the joined up delivery of front line services and community based voluntary organisations tasked with the aims and delivery of this strategy.

‘Siaradwn Ni’ or the ‘Let’s Talk’ Big Lottery funded project aims to reduce stigma and improve public awareness regarding mental health issues across two LAs in Wales. The project intends to achieve this through providing a knowledgeable and trained framework of support and suicide prevention, encouraging earlier recognition and response and working with relevant agencies to create a structure of referral, support and interagency collaboration. The current research may provide a unique perspective to consider for professionals tasked with addressing these concerns.

1.4.2 Priority

Stevenson, commissioned from the Mental Health Directorate, Abertawe Bro Morgannwg, Wales, completed *Report for Silver Group* document (Stevenson, 2009) following a recent suicide cluster in one LA in Wales. The Silver group was formed as a strategic group of the Local Service Board comprising a multi-agency suicide prevention team. Stevenson (2009) reported on a) closure of the emergency response and b) future response guidelines. In his report Stevenson (2009) recommended that ‘research of the incidents needs to be developed with local input to research governance and linked to the national strategy on suicide and self harm prevention’ (p.11). In particular he advocated the use of narratives; personal stories and voices of the experiences of various stakeholders. He anticipated that this would provide guidance for operational staff in agencies and co-ordination with schools in the area.

The current research is considered to be relevant as it proposes to gather information about the experiences of key professionals involved in the critical incident response. It also has the purpose of adding to existing literature through responding to the key recommendations contained in the Silver Group report.

1.5 The current study

1.5.1 Outline

The current study examines the response of one LA in Wales to a critical incident involving a suicide cluster occurring between 2008 and 2009. A qualitative design was employed. School staff, counsellors working within the Counselling Service and EPs were interviewed, all having been directly involved in the critical incident response. The research questions explored how different agencies responded to the critical incident and the process and procedures followed both within and between organisations. Possible improvements to the current systems were also explored.

The current study differs from other research in the additional use of more sophisticated methods of gathering data which incorporate social constructionism (Burr, 1995) and systemic points of view (Campbell, Draper & Huffington, 1988). The methodology is novel in that it combines different (mixed) methods in order to generate rich data. The approaches and theoretical perspectives are outlined in the research analysis. The focus is on a single case which makes use of a grounded theory approach (Glaser & Strauss, 1967) and Soft Systems Methodology (SSM; Checkland & Poulter, 2010). Grounded theory has not been used in this area of investigation before and is considered to be an innovative approach to data gathering and analysis compared with the more conventional methods, which often attempt to fit data into predetermined theoretical perspectives. Furthermore, using an approach such as grounded theory has the benefits of incorporating a psychological dimension to the research.

The grounded theory analysis showed that school staff, EPs and counsellors responded in different ways to the critical incident. SSM highlighted feasible and desirable change issues to guide future critical incident response as well as identifying the need for professional support and training. The study concludes that greater multi-agency collaboration is required in a critical incident response. EPs need to be mindful that trauma can affect the psychological well being of

professionals working in crisis as well as their own. Hence, consideration should be given to relevant support and supervision programmes at the time of a crisis. Needless to say, there is also a need for guidance, planning and ongoing training, where emphasis is placed on a joined up approach to crisis management.

1.5.2 Rationale

The objective of the current research is to investigate the interaction between various LA agencies during the period 2008 and 2009 at the time of a critical incident involving a suicide cluster. This aims to support current Welsh Government policy priority and tie into the suicide prevention strategy in one LA in Wales and the corporate plan on suicide prevention. The aim of the study is to add to existing literature and research to help inform a critical incident response plan to reduce suicide and suicide attempts. In the longer term the LA strives to reduce the number of referrals to agencies as a result of early intervention approaches and aims to encourage collaborative working amongst relevant agencies.

Gathering perspectives on how to improve a local area response to a critical incident may help ensure effective, equitable, and efficient use of key resources with appropriate referrals being made to specialist services. The research may highlight means of supporting the LA and multi-disciplinary practice by considering the needs of groups of vulnerable young people aged between fourteen and nineteen, who have recently suffered loss or made a suicide attempt.

1.6 Relevance to Educational Psychologists

A UK government review of EPs' contribution to the document, *Every child matters: Change for children* agenda (Department for Education and Skills; DfES, 2004) acknowledged that EPs make a distinctive contribution to the safeguarding of children and young people (Woods, Bond, Tyldesley, Farrell & Humphreys, 2011). Over recent years EPs have experienced increasing

involvement in work within the field of disaster psychology. A considerable number of children and young people of school age have experienced a traumatic event, such as a road traffic accident, an act of violence or a sudden bereavement (Alisic, 2012).

Psychology services play a lead role in critical incident response involving children and young people (Woods et al., 2011). The most likely critical incident encountered by EPs is suicide (Rees & Seaton, 2011), also identified as one of the main causes of death amongst young people (Debski, Spadafore, Jacob, Poole & Hixon, 2007). School psychologists are likely to be amongst the most qualified professional groups to work directly with vulnerable young people who have experienced loss or feel suicidal. EPs work at group and at systems level empowering school staff, imparting psychological knowledge and skills and providing training opportunities to support pupils affected by suicide (Andriessen, 2009). Furthermore, psychologists can convey accurate mental health information to combat miscommunication from sources such as the media (Schulenberg et al., 2008). Communication and coordination of services are essential to maintain normal working practice.

It is well recognised that the contribution of SPs to a critical incident response is paramount and significant (e.g. Schulenberg et al., 2008; Vernberg et al., 2008). There is an expectation by the LA that EPs provide support to schools if the LA identifies an incident as an emergency or critical incident, as outlined in their emergency plan. However, while there are national guidelines encouraging schools and LAs to develop emergency plans, this is not a legal obligation (Rees & Seaton, 2011), thus implying there is limited standardisation of practice in critical incident response. In addition, there is uncertainty about what protocols and procedures EPs should follow when responding to an emergency, which has implications for the role of the EP in their work with schools and with other agencies.

As well as working at individual, group and systemic levels, working with other agencies is essential when responding to a crisis, such as a critical incident. During a critical incident EPs work collaboratively with other organisations and,

if appropriate, refer 'at risk' pupils to services such as the Child and Adolescent Mental Health Service (CAMHS) (Debski et al., 2007). More recently with the advent of Children's Services, increased emphasis is placed on EPs working within a multi-agency context (German et al., 2000). Having a joined up response to critical incidents with partner agencies would make sense to prevent duplication of work and to use resources more effectively and efficiently. Importantly, it has been recognised by researchers that an integrated model of crisis response is needed (Jimerson, Brock & Pletcher, 2005; Jimerson, Oakland & Farrell, 2007). This has relevance to the role of EPs as key contributors to a multi-agency response involving a critical incident. Undoubtedly work underpinning the creation of a plan should be informed by research in the field of critical incidents.

1.7 Critical incident defined

A number of psychological studies within the disaster and crisis literature emphasise the role of EPs in supporting schools during traumatic events (e.g. Carroll et al., 1997; Greenway, 2005; Houghton, 1996; McCaffrey, 2004; Posada, 2006; Rees & Seaton, 2011). Yet the terminology used by theorists to describe such events is inconsistent. Carroll, et al. (1997) defines a school crisis as 'any sudden unexpected incident involving loss, grief and shock' (p.113). McCaffrey (2004) refers to 'crisis' in schools as 'outside the range of human experience, which would be markedly distressing to anyone' (p. 110). Greenway (2005) cites Young's (1998; as cited in Greenway, 2005) definition of a traumatic event, thereby acknowledging that trauma in schools is overwhelming and incapacitating, deemed beyond that which people can cope psychically. Adding to this, Greenway (2005) proposed that traumatic events are 'typically unexpected and uncontrollable, contradicting the efforts by school to establish a predictable routine and consistent discipline to ensure pupil learning, safety and security' (p. 236).

Generally within the disaster and crisis literature the term 'critical incident' is common, though ill-defined. Posada (2006) makes reference to EP support for schools during a 'critical incident' (p. 200), yet uses a definition of 'disaster'

(cited in Yates, Axson, Bickman & Howe, 1989) to describe this. Houghton's (1996) construct of a critical incident provides the parameter for her study on critical incidents involving schoolchildren. Key terms within her definition include 'sudden', 'unexpected' and 'distressing', which appear to be salient across the crisis literature. Houghton's definition also incorporates events conceptualised as critical incidents in schools, such as significant acts of violence, serious accidents, traumatic bereavements and extreme acts of vandalism. In her study Houghton acknowledged that experience of trauma may differ for individuals even when exposed to the same traumatic event.

More recently, Rees & Seaton, (2011) define a critical incident as 'any incident that has a dramatic and potentially traumatising impact on school aged children or school personnel, for example, a sudden death, extreme violence (including shootings / knife attacks), suicide, bullying, bombing, terrorism, accidents or disasters such as floods, storms and fires' (p. 76). Rees and Seaton's definition is considered to be helpful to the current study as it incorporates the concept of trauma as well as encompassing examples of present day critical incident events experienced by schools. However, as the term 'critical incident' appears to be synonymous with the expression 'school crisis', which is frequently used within disaster and crisis literature, within the current study these terms will be used interchangeably.

1.8 Suicide cluster defined

The term 'suicide cluster' has been defined as a group of suicides or suicide attempts, or both, which occur closer in time and space than is considered usual for the community (Centres for Disease Control; CDC, 1988). Suicide clusters are rare and account for approximately 1% to 5% of adolescent suicides (Hacker, Collins, Gross-Young, Almeida & Burke, 2008). Cox et al. (2012) distinguish between mass clusters and point clusters. Mass clusters occur over a brief period of time and are associated with media-related phenomena. Point clusters 'occur in small communities and involve an increase in suicides above the baseline rate observed' (Cox et al., 2012, p. 208). Establishing whether the media contributed to the unusually high number of

suicides that occurred during the critical incident of 2008 and 2009 is beyond the remit of the current study. However, the defining features of point clusters are considered pertinent to the current study.

The suicide cluster in the current study involved a group of suicides of young people in one LA. The majority of the young people who had completed suicide had already left school. Although pupils at school were greatly affected by the impact of the suicides on the local community, the effect was greater when suicide attempts and completed suicides were by teenagers attending school. Whilst an act of suicide by someone in the community may not have been considered beyond the capacity of the school management structure to cope and thus, treated as a sad event, collectively the group of suicides (subsequently defined as a cluster) had a 'dramatic and potentially traumatising impact on school aged children' (Rees & Seaton, 2011, p. 76) and therefore was deemed by the LA to be a critical incident.

1.9 Outline of the remainder of the study

The following literature review examines the theoretical and research literature which is relevant to critical incident responses. It begins with a literature review in the field of disaster psychology and then explores organisational response to critical incidents. The third chapter outlines the epistemological position of the researcher, provides details the design of the study and justifies why grounded theory and SSM have been used in a mixed method approach. It provides details of participants and ethical considerations that the study raised and how these were dealt with. The chapter outlines the procedure including data gathering and analysis. The fourth chapter provides the results of the study, interpreted through grounded theory and SSM. The final chapter provides a discussion of the findings and details of the limitations of the study and how these were addressed. In chapter five a conclusion is drawn which considers implications for the role of the EP when working in partnership with other agencies involved in critical incident response. Finally, suggestions for further research are made in both the Discussion and Conclusion chapters that may contribute to improving organisational response to critical incidents.

2 LITERATURE REVIEW

2.1 Introduction to the literature review

The aim of the research is to explore one LA's response to a critical incident involving a suicide cluster which occurred between 2008 and 2009 in one LA in Wales. Very few studies to date have documented response strategies to suicide clusters (Cox et al., 2012), thus, a general overview of critical incident response (which include acts of suicide) is considered more informative. Nevertheless, it is beyond the scope of this research to investigate a wide range of critical incidents occurring at schools.

The terms EP and school psychologist (SP) are used interchangeably within the current study. Educational psychologist is the legally approved title in the United Kingdom for school psychology practitioners, whereas the term school psychologist is universally accepted and encompasses the varying differing titles used across different countries to describe school psychology practitioners (Woods et al., 2011).

The current study does not offer a comprehensive review of the impact of trauma on children but considers the affect of trauma (due to critical incident exposure) from a professional and an organisational perspective, which is an understudied area in disaster psychology. The emphasis is placed on SPs and an overview is provided of the multi-agency partners involved in a critical incident response, which in the current study includes counsellors and school staff.

An in depth review of how school counsellors' respond to critical incidents was not afforded due to the small scale nature of the present study. Within the psychology literature the term counsellor (or counselor) is often used loosely, with reference to trained counsellors as well as mental health professionals or psychologists who may provide counselling approaches (e.g. Daniels, Bradley and Hays, 2007). Although school counsellors are considered to be one of the

main contributors to the multi-agency critical incident response, the literature review provides a broader insight into how key agencies work together when responding to a crisis.

A wide ranging literature search indicates that research on school teachers' perspectives on supporting children exposed to trauma is 'virtually non-existent' (Alisic, 2012 p. 52). In sum, there is very limited research on a single agency contribution to a critical incident and for the purpose of the current research general organisational preparedness, intervention and response is mainly reviewed rather than any specific professional group.

A detailed account of current policies and guidelines in relation to emergency procedure and critical incident response is beyond the remit of this study. Instead examples of national, regional and local guidelines and frameworks have been provided with reference to relevant policy documents. Emphasis is placed on documentation relevant to schools and the EPS.

This chapter is divided into two parts. Part one (section 2.2) reviews research into the affect of trauma on the helper of victims exposed to a disaster (or crisis) and considers the implications this may have for professionals in the workplace. Part two (section 2.3) explores organisational crisis preparedness, intervention and response. The relevance of various models, frameworks and guidance to inform pre-crisis, in-crisis and post-crisis management are considered. Research relevant to multi-agency working and collaboration during a crisis is reviewed. Finally, the study takes into account the implications this has for psychology training. Gaps in the current literature are identified and the rationale for the current study is proposed.

2.1.1 Key sources

The design incorporated a literature review with thorough and systematic database searches of PsychInfo and ERIC, using the terms: trauma psychology; critical incident; crisis or disaster and emergency preparedness, intervention and response; suicide; prevention and postvention; schools; school

or educational psychologist; counsellor and teacher; multi-agency. The library catalogue and the electronic journal resource at Cardiff University were utilised. It was important to seek out articles relating to the following themes; trauma, schools, professionals (e.g. counsellors, school staff and educational psychologists) and crisis response. The search was narrowed by using combinations of the key descriptor words to interrogate the databases. For example, trauma *and* critical incident\$ *and* schools; school psychologists *or* educational psychologists *or* educational psychology service *and* critical incident *or* crisis(es); emergency preparedness *or* intervention *or* response *and* critical incident\$ *or* crisis(es) *and* school\$. The terms counsellor, teacher and multi-agency were then incorporated to generate further studies. The literature on how organisations respond to critical incidents affecting schools was sparse and the search was widened to include articles about natural disasters and emergencies, many of which were American, although a small number provided a UK perspective. A thorough literature search was undertaken in order to find UK policy documentation, legislation and guidance at local, regional and national level informing critical incident response and emergencies. Electronic sources, such as the word wide web were also utilised.

PART ONE

2.2 Crisis psychology

Crisis psychology has become a growing field of interest amongst contemporary psychologists. Attention to this area coincides with increasing worldwide concern about the affect of disasters and crises on communities (Saari et al., 2011). It has been estimated that by 2050 two billion people will have been affected by disasters (Aten, Leavell, Gonzalez, Luke, Defee & Harrison, 2011). It is well documented that the impact of an emergency on children and young people in school and in the community can be catastrophic, particularly where there is loss of life (e.g. Alisic, 2012; Vernberg et al., 2008). An abundance of research literature arose from the 9/11 disaster in 2001 (e.g. North et al., 2010) and Hurricane Katrina in 2005 (e.g. Schulenberg et al., 2008; Rizzuto & Maloney, 2008; Vigil & Geary, 2008). The American Psychological Association

(APA; 2006) reported being overwhelmed during 2005 by requests to respond to international and national disasters. Consequently, the APA 'moved into new areas that encourage consideration of the role of psychology in addressing all phases of disaster response' (p.514). This new focus may have encouraged psychologists in the field to add to the literature, particularly with regard to understudied groups such as emergency management professionals (e.g. LaFauci Schutt & Marotta, 2011) and disaster preparedness of organisations (e.g. Kano & Bourque, 2007). Furthermore, EPs have been called upon more frequently to respond to critical incidents in schools (e.g. Carroll et al., 1997; Rees & Seaton, 2011) due to the increased need for trauma-focused services (Vernberg, 2008).

Yutrzenka and Naifeh (2008) distinguished between a disaster and a crisis for the purpose of professional psychology training. Yutrzenka and Naifeh (2008) concur with McFarlane and Norris (2006, as cited in Yutrzenka & Naifeh, 2008) characterisation of a disaster as a traumatic shared experience signified by a) a rapid onset, b) an identifiable peak and c) a danger period which is time limited. A disaster is thought to be a phenomenon of national concern where the impact is considered to be beyond the resources of the community. One well documented example is that of Hurricane Katrina (e.g. Vigil & Geary, 2008).

Yutrzenka and Naifeh (2008) suggest that a crisis is more likely to be encountered by psychologists in their professional practice than a disaster. A crisis has been described as a state of emotional disequilibrium where the usual coping skills of an individual and community are deemed inadequate and where the outcome may be positive or negative (Roberts, 2000, as cited in Yutrzenka & Naifeh, 2008). If the outcome is negative then the crisis can be classified as a behavioural emergency where there is imminent risk (e.g. high risk of suicides).

The United Kingdom Civil Contingencies Act (2004, section 19, point 1a) defines an emergency as 'an event or situation which threatens serious damage to human welfare in the United Kingdom or in a part or region', which can involve loss of human life. This definition has commonality with others related terms in that the response to the incident is deemed so great that agencies

require resources that are beyond the scope of their normal day to day operations.

Woods et al. (2011) describe a response to an incident involving crisis (or an emergency) as a 'critical incident response'. A critical incident response affecting schools is frequently referred to as a 'school crisis', which has been described by Rees and Seaton (2011) as being an extraordinary traumatic event affecting pupils and school personnel, which may result in loss of life (see 1.7 critical incident defined).

A number of studies have reported examples of emergencies and disasters experienced by schools (e.g. Greenway, 2005; Houghton, 1996; Jimerson et al., 2005; Kano & Bourque, 2007). Houghton (1996), in her survey of 179 EPs and emergency planning officers, found that more than half of the reported cases involved the violent death of a child, some by suicide. In 2007 a survey undertaken by Kano and Bourque identified the 25 most frequently occurring emergencies and disasters experienced by 157 schools in California. Angry parents, power failures and animals or insects on campus were reported to be the most common. Surprisingly, suicide did not feature despite suicide being one of the main causes of death amongst young people (Debski et al., 2007). More recently a survey completed by 277 SPs from around the world indicated that suicide is the highest ranked crisis incident that they are asked to respond to, amounting to a quarter of all survey citations (Rees & Seaton, 2011).

Interestingly, all three studies (Houghton, 1996; Kano & Bourque, 2007; Rees & Seaton, 2011) used survey data, some sampling participants from a specific geographical area (Kano & Bourque, 2007), or from small number of respondents worldwide (Rees & Seaton, 2011), who may not be representative of the general population. In Houghton (1996), and Rees and Seaton's (2011) studies, participants were selected from specific professional backgrounds (emergency planning officers, EPs and SPs), which limits the generalisability of the findings to other professional groups involved in critical incident response.

It appears that what constitutes a disaster, an emergency, critical incident or a crisis is a matter of degree and may differ depending on local circumstances, social and cultural differences, preferred terminology as well as the constructions of the responder, which are likely to be informed by his / her professional stance. In operational terms it appears that a disaster / emergency implies a first response by emergency teams and front line services, whereas a critical incident or school crisis may implicate a range of people from diverse professional backgrounds intervening at different stages. In the literature the terms disaster, emergency, critical incident and crisis are sometimes used interchangeably, which can add to confusion.

2.2.1 Trauma and psychopathology

Traumatic events are no longer thought to be rare occurrences that are only experienced by a minority of people (Courtois & Gold, 2009). According to Copeland, Keeler, Angold and Costello (2007), more than half of 9 to 13 year olds in America have been exposed to more than one traumatic event as defined by the *Diagnostic and Statistical Manual of Mental Disorders* (DSM – IV; American Psychiatric Association, 2000, as cited in Alisic, 2012). Research suggests that children and young people have vulnerability to trauma if they experience the death of family members, friends or significant others (Cox et al., 2012). Alarming, suicide rates among young people have increased over recent years (Cox et al., 2012). Critical incidents in schools are often associated with the suicide of a young person (Rees and Seaton, 2011). The impact of a suicide on peers can be devastating, affecting schools and the community. However, it should be acknowledged that most children remain functional, gaining their sense of safety from established routines, reliable support systems and from trusted adults and do not have poor outcomes (Williams et al., 2008).

A review of the international disaster literature published between 2006 and 2007 indicated that research on the mental health of children following disasters was sparse (Williams, Alexander, Bolsover & Blakke, 2008). More recently, it has been thought that trauma reactions often occur immediately after a significant negative event, such as a national disaster. Symptoms commonly

include panic, anger, confusion, poor sleeping patterns, fatigue, headaches and feelings of hopelessness (Aten et al., 2011). Longer term post traumatic disorders become evident over an extended period of time, possibly weeks or months following the disaster (Williams et al., 2008). However, generalising the findings from large scale disasters and emergencies to children and young people exposed to trauma during a school crisis may be problematic as the magnitude / severity of the events differ.

Most adults have encountered at least one traumatic event in their lifetime (Bonanno, Galea, Bucciarelli & Vlahov, 2007). In a review of the literature Vigil and Geary (2008) found that adolescents and adults are more at risk of psychological disorders if they have been exposed to a natural disaster. Vigil and Geary (2008) compared adolescents who had lost their home due to the devastation of Hurricane Katrina to a match sample of adolescents who had been unaffected by the hurricane. As one would predict, higher symptoms of psychological distress and depression were identified for those who had experienced the hurricane than those who had not (Vigil & Geary, 2008). A recent study has shown that the psychological affect of a disaster may extend beyond the locality in which it occurred, creating a ripple effect (Aten et al., 2011). One clear example of this is the impact of 9/11 on communities worldwide (e.g. North et al., 2010).

Research suggests that both children and adults are vulnerable to the affect of disaster exposure and that trauma responses in adults are the same as those experienced by children and young people (Williams et al., 2008). However, the extent to which trauma impacts an individual depends on situational factors (e.g. proximity and level of involvement), personality factors in resilience, the availability of social support and the degree to which his / her life is disrupted (Williams et al., 2008). The frequency of trauma exposure has also been identified as a potential risk factor for psychological disorders (LaFauci Schutt & Marotta, 2011). Emergency workers, first responders as well as emergency management professionals who are repeatedly exposed to the affects of trauma are particularly vulnerable (LaFauci Schutt & Marotta, 2011).

2.2.1.1 Traumatic stress response of the helper

Traumatic stress research previously focused on the consequences for the victim rather than the helper. An assumption was that professional training in critical incident response would negate the affect of trauma. To the contrary, there is much evidence to suggest that emergency personnel can suffer psychological, social and physical reactions to trauma.

van der Ploeg, Dorresteyn and Kleber (2003) analysed 132 questionnaires completed by forensic doctors located at 11 public health services in the Netherlands. All participants had responded to at least one critical incident event. Of interest were standardised measures relating to post traumatic symptoms of avoidance, fatigue and burnout, as well as work related stressors. van der Ploeg, et al. (2003) found a cumulative effect of stress, suggesting a positive correlation between trauma exposure and psychological and physical symptoms of stress. However, data collected at a single point in time and retrospective self report measures were identified as methodological limitations of the study (van der Ploeg et al., 2003). Any conclusions drawn from van der Ploeg, et al. (2003) should take into account the magnitude of shocking events witnessed by forensic doctors during rescue work (e.g. exposure to decomposed bodies), which may differ from professionals involved in critical incident intervention at schools. Thus, generalising the findings beyond emergency first responders may be problematic.

Emergency responders at disaster scenes hear vivid and detailed descriptions of terror events and listen to the intrusive thoughts of their clients (Linnerooth, Mrdjenovich & Moore, 2011). Negative consequences to professionals involved in emergency response include burnout and post traumatic stress disorder (PTSD). van der Ploeg et al. (2003) found that fatigue and burnout in professionals who respond to critical incidents are also associated with negative factors in the workplace, such as lack of information about work, poor communication and limited autonomy. However, according to Bonanno et al. (2007), 'despite the frequency with which these events occur, only a relatively small subset of people typically experience severe enough loss or trauma

reactions to meet the criteria for post traumatic stress disorder' (p.671). This suggests that that a full recovery is likely for many professionals exposed to trauma.

There is a plethora of research about the affect of disaster exposure on emergency workers and first responders (e.g. Linnerooth, Mrdjenovich & Moore, 2011; North et al., 2010; Yutrzenka & Naifeh, 2008). Fire fighters, police, medical personnel and mental health professionals have been the focus of previous studies. However, the affect of disaster exposure on emergency management professionals who work at disaster sites dealing with people in crisis, is less well documented. LaFauci Schutt and Marotta (2011) reported that emergency management professionals are affected in similar ways to emergency workers and first responders when exposed to disasters. Emergency management professionals 'share many of the same role conflicts and ambiguities as do health workers' (LaFauci Schutt & Marotta, 2011, p. 8), working under similar pressures and prioritising disaster response above other routine duties at work. Trauma exposure frequency, burnout, personality factors and role issues are the highest predictors of PTSD symptoms in this population. LaFauci Schutt and Marotta (2011) conclude that trauma can impact professionals working across different levels of disaster response, not just those in front line services but professionals undertaking emergency management roles.

2.2.1.2 Vicarious traumatization

Professionals need not be physically present at a disaster site to be affected by trauma. Even if they are, behavioural changes can occur through indirect exposure to the behaviour of others; a phenomenon known as vicarious learning (derived from the social learning theory; Bandura, Ross & Ross, 1963). Similarly, trauma psychology research has found that indirect (vicarious) exposure to trauma through clients can have a negative impact on professionals. The term 'vicarious traumatization' describes the cumulative effect of engaging therapeutically with trauma victims (McCann & Pearlman, 1990). It has been proposed that emergency responders experience indirectly

the primary traumatic stressors of those that they are helping (Hayes & Frederickson, 2008). This puts them at risk of developing secondary traumatic stress disorder (STSD) where symptoms such as, 'hypervigilance, a restricted range of affect, and acting or feeling as though the events were re-occurring', are experienced (Hayes & Frederickson, 2008, p.92). STSD is similar to PTSD, but thought to be a secondary reaction to a traumatic event rather than a primary one (Hayes & Frederickson, 2008). Baum (2010) in her analysis of the trauma literature identified other related conditions, such as compassion fatigue, as having common precipitating factors: the therapist becomes a victim of trauma through engaging with traumatised clients.

A recent qualitative study undertaken by Alisic (2012) explored teachers' perspectives on providing support to traumatised pupils, aiming to bridge the gaps in the literature in this understudied topic (Alisic, 2012). The purposeful sample of 21 teachers working within 13 schools in the Netherlands was diverse in terms of school background, levels of experience and gender. Semi-structured interviews revealed a number of interesting themes, including 'the emotional burden of working with traumatised children' (Alisic, 2012, p. 56). Alisic found that some teachers were reminded of previous personal emotional experiences when supporting pupils who had been exposed to trauma. This made it more difficult for the teachers to directly engage with the pupils to support their emotional needs. Irrespective of this, the teachers were still motivated to provide indirect support, such as developing school protocols and classroom materials surrounding trauma and loss. A weakness of the study was the reliance on participants' willingness to take part in the semi-structured interviews. It could be argued that teachers in the study were more (or perhaps less) confident in supporting traumatised pupils than those not willing to participate. Additionally, the reliability of the study is open to question as teachers' views of past events (retrospective accounts) were obtained, not observable behaviours (Alisic, 2012).

Research shows that when human resources are depleted, the ability to cope with workloads and show empathy to clients is compromised (Mendenhall, 2006). This suggests that the psychological and physiological wellbeing of the

helper can be affected by his / her client's trauma experiences, which in turn can have implications for the vulnerability of therapists and psychologists in the workplace. Daniels, Bradley and Hays (2007) propose the constructivist self-development theory (Trippany, White Kress & Wilcoxon, 2004) which suggests that distorted schemas act to protect individuals from traumatic experiences. Heightened safety needs, negative feelings about coping abilities, self doubt and over controlling behaviours are common. From an ethical point of view, psychologists need to be mindful that their work with clients can be affected by their own psychological health and well being. Psychologists are advised to take steps to address personal issues in order to protect their clients (Johnson et al., 2011). Professional advice and guidance for EPs is offered from professional bodies; for example, the British Psychological Society (BPS; 2006) and the Health and Care Professional Council (HCPC; 2009) around ethical practice. The HCPC requires that psychologists declare any issues of concern that may affect their professional practice.

2.2.1.3 Shared trauma

Over recent years the affect of shared trauma (otherwise known as shared traumatic reality or shared reality) on the helper has been a topic of intrigue within the field of disaster psychology. Shared trauma is evident when there is double exposure to trauma, both as a professional responding to crisis and as an individual experiencing the same crisis. Baum (2010) analysed the psychological literature with the aim of conceptualising the phenomenon often described as 'shared trauma', 'shared reality', or shared traumatic reality'. Baum (2010) referred to shared traumatic reality as 'situations in which helper and helpee, psychotherapist and client, are exposed to the same communal disaster' (p. 249). These happenings are characterised by a blurring of personal and professional boundaries. The phenomenon was first identified in the 1940's and in recent times is better understood, having frequent reference within the 9/11 literature.

Furthering previous research Baum (2010) reported that shared traumatic reality comprises four features, all of which must be present:

(1)The disaster is a collective trauma, that is, a traumatogenic event that can potentially traumatize the entire community; (2) The communal disaster is a current one, not one in the distant past; (3) Both the client and the psychotherapist or survivor and helper belong to that community, even if they have been there only for a short time; (4) The helping professional suffers double exposure both as an individual member of the stricken community and as a professional providing services and care to the persons who are themselves adversely affected by the disaster. (p 252).

Given that many professionals who respond to a disaster or a critical incident live in the same community as the survivors whom they help, the prevalence of shared traumatic reality may be underestimated. According to Gregerson (2007), first responders endure primary victimisation from living in the affected area as well as secondary trauma through supporting crisis victims. Gregerson argued that emphasis should be placed on helping the helpers as well as helping the victims. Gregerson (2007) provided an account of her own experiences as a clinical psychologist supporting victims of trauma in America; thus, adding to the literature in the field. However, conclusions drawn from Gregerson's (2007) personal reflections can only be tenuous due to the subjective nature of personal narratives that are not grounded in research (similarly with Greenway, 2005). Nevertheless, Gregerson's in-depth rich picture of the impact of dealing with trauma provides a platform for future research.

The degree to which shared traumatic reality is experienced by other professionals, such as teachers and pastoral staff, who support children and young people during school crises, is an important area for future research, particularly with the rise in critical incidents affecting school populations. It has been recognised that there is a need for psychological services for school personnel as well as for students following a critical incident (Daniels, Bradley & Hays, 2007).

What is apparent is that the affect of crisis is multifaceted, posing a threat to the emotional wellbeing of professionals and to the stability of organisations, which can increase complexities during the in-crisis stage of an emergency. One possible hypothesis is that the interaction between personality characteristics and external factors (e.g. trauma exposure frequency) may determine how people cope with trauma. Understanding the impact of trauma on professionals may motivate organisations to channel more effort into supervising the helper as well as supporting the victim (Gregerson, 2007).

2.2.1.4 Post crisis adjustment to the workplace

At the post-crisis stage of disaster there may be expectations for emergency personnel to resume day to day work as usual. This may be problematic given that post traumatic stress responses can occur immediately following a disaster (LaFauci Schutt & Marotta, 2011). Given the dearth of research on emotional recovery by professionals in the workplace following exposure to disaster, North et al. (2010) investigated post disaster adjustment to the workplace in the wake of the 9/11 attacks. 12 focus groups comprising 85 employees from New York companies affected by 9/11 discussed return to work issues with respect to mental health. North et al. (2010) reported tensions between organisational productivity and that of meeting employees' emotional needs. Conflicting pressures between organisational and personal recovery may create a climate which compromises both personal and professional recuperation.

North et al.'s (2010) study is positive in that it elicited the thoughts, feelings and reactions of participants based on their personal experiences of return to work protocols following a traumatic event. However, a major limitation of the study is that the first interviews took place more than one year after the 9/11 attacks, with a further year taken to complete all focus group activities. Therefore, the data may have lacked detail and clarity. Another weakness is that the participants volunteered to take part; hence, their views may not reflect those of other work colleagues. Further research is needed to explore the factors which promote professional recovery at the workplace following a disaster, to facilitate positive adaptation and enhance work ethics.

2.2.2 Positive adaptation and adjustment to trauma

The vulnerability of practitioners working with victims at disaster sites is well documented (e.g. Baum, 2010; Linnerooth, Mrdjenovich & Moore, 2011). Burnout, compassion fatigue, vicarious trauma and acute stress disorder are all manifestations of trauma, which can be conceptualised as normal responses to abnormal circumstances (Gregerson, 2007). In the disaster literature some researchers have focused on psychopathology rather than the ability of people to cope when faced with trauma (e.g. Aten et al., 2011; van der Ploeg, et al., 2003). However, Linley and Joseph (2005) proposed that many people exposed to trauma can adapt and adjust in positive ways; suggesting that there is, 'human capacity for growth through adversity' (p.263). This perspective stems from the field of positive psychology (Seligman & Csikszentmihalyi, 2000).

2.2.2.1 Protective factors

There are a number of protective factors which lead to improved outcomes for responders and victims exposed to trauma. Social support has been identified as a protective factor for PTSD (Brewin, Andrews & Valentine, 2000). The perception of control improves coping ability (van der Ploeg et al., 2003), even though crisis situations are often characterised by a lack of control. Individual differences in personality, such as hardiness, can reduce levels of stress (Kobasa, 1979).

Studies have been undertaken to investigate the protective and maintaining factors that support therapists when working with traumatised individuals. Harrison and Westwood (2009) explored both individual and organisational practice and found that empathetic engagement, which was previously considered to be a risk factor, can be a protective factor. Harrison and Westwood (2009) suggest a balance, where professionals neither over identify nor avoid their client's narratives about trauma.

2.2.2.2 Resiliency perspective

Disaster psychology research has almost entirely focused on psychopathology until recent years when there has been a shift in emphasis towards resiliency based perspectives. This coincided with the growing popularity of positive psychology and the recognition that many individuals can become psychologically stronger after experiencing adversity. Resilience has been defined as 'the human ability to adapt in the face of tragedy, trauma, adversity, hardship, and ongoing significant life stressors' (Newman, 2005, p. 227). Resilience is a multidimensional concept comprising numerous actions and behaviours (Newman, 2005). According to Litz (2005), resilient individuals maintain steady functioning after exposure to trauma, but longitudinal research is needed to investigate how they adapt psychologically over time. The resiliency theory goes against the cumulative effect of stress theory (van der Ploeg, et al., 2003) in that research involving disaster survivors' report on their intentions to 'bounce back' from the stress and uncertainty of the event (Newman, 2005). Such findings led Gregerson (2007) to conclude that resilience is the most *likely* outcome of exposure to traumatic events. A more recent study examining crisis counsellors' perceptions of training and services found that 85% of the counsellors derived strength from being a victim of the same disaster as their clients (Hansel et al., 2011). Their own experiences helped them to relate to other survivors, which would support the resiliency model.

2.2.2.3 Adversarial growth

Disaster psychology has moved from a deficit model of trauma response, through to resiliency perspectives, arriving at a position where positive responses to adversity have been reported (Schnurr & Green, 2004). Currently, there is widely held belief that participation in crisis response (e.g. rescue work) can positively impact on individuals, leading to personal growth (Auerbach et al., 2006; van der Ploeg et al., 2003). Positive adaptation to trauma is often referred to as positive adjustment or post traumatic growth. These terms are collectively known as 'adversarial growth', which is described as a shift towards more optimal functioning as a consequence of experiencing an adverse event

(Linley & Joseph, 2005). Positive changes following exposure to loss and trauma have been reported by a significant proportion of people (Linley & Joseph, 2005). However, there appears to be a lack of empirical research surrounding the prevalence of adversarial growth or how to measure and operationalise it.

2.2.3 Summary part one

Disaster psychology is a relatively new field of interest which has grown rapidly over the past decade or so due to the rise in natural and human-made catastrophes resulting in substantial loss of life (e.g. Gregerson, 2007; Van der Ploeg et al., 2003). In the psychology literature the terms disaster, emergency, critical incident and crisis are often used interchangeably. The latter two are most likely to involve SPs, as disaster and emergency implies the call up of first responders and emergency services. For the purpose of the current research the term critical incident or school crisis is preferred to describe a suicide cluster affecting young people attending school.

Research suggests that trauma brought about by crisis not only affects the victims of disaster but can have a profound affect on the helper. It has been proposed that engaging with traumatised victims may have negative outcomes for crisis responders (e.g. van der Ploeg et al., 2003). This has important implications regarding potential vulnerability and risk, not only for the professionals but for the organisation in which they operate. Then again, more recently following a change in attitude in psychology, there is a view that exposure to trauma may positively impact an individual leading to personal growth (e.g. Auerbach et al., 2006).

It has been argued that whilst there is a shift in perspective towards the positive affects of trauma on human development; the underlying psychology and rationale of earlier theories and models that consider the negative impact of trauma should not be discounted (Linley & Joseph, 2005). This suggests that it is possible that individuals exposed to trauma, experience a range of different outcomes, which can be interpreted through various theoretical perspectives

including, psychopathology, resilience and adversarial growth. To progress research in trauma response Linley and Joseph (2005) recommend the development of a model that encapsulates both negative and positive aspects of human reactions and behaviours, which will offer a broader framework for the differing perspectives on how individuals are affected by trauma.

The majority of studies within the disaster and crisis literature have been undertaken using survey data (e.g. Houghton, 1996; Kano & Bourque, 2007; Rees & Seaton, 2011; Vigil and Geary, 2008), questionnaires (e.g. van der Ploeg, et al., 2003), interviews (e.g. Alisic, 2012) or focus group activities (e.g. North et al., 2012), where the views of the participants have been gathered retrospectively. Some psychologists have shared their personal experiences and reflections having supported victims of trauma in a professional capacity (e.g. Greenway, 2005; Gregerson, 2007). Whilst the methodologies used in the above studies can be criticised in terms of their validity and reliability, the findings have nevertheless provided insight into how people respond to traumatic events.

Arguably, the use of alternative more ecologically valid methods, such as naturalistic observations where the behaviours and interactions of victims are analysed during a disaster or where participants are interviewed when in crisis, raises significant ethical issues. Furthermore, at a disaster scene there may be a reluctance to allow access to researchers and if front line emergency services are involved access may be prohibited. A more appropriate method of data gathering involves listening to the narratives of those who have been personally affected by trauma, through interview or focus group activities at a time when they are more 'ready' to engage (post crisis) and have fully consented. In socially sensitive research ethical principles need to be adhered to, which will help build the confidence and trust of participants and result in a more meaningful enquiry.

The current study aims to draw on the constructions of professionals who worked within schools and in the wider school system to support children and young people, families and the community exposed to trauma and more

specifically, explore how professionals (EPs, counsellors and school personnel) within three key organisations responded to a critical incident involving a suicide cluster affecting schools in one LA. To fully understand the impact of crisis on organisations, professional experiences, perceptions, and behavioural responses need to be acknowledged, which are intrinsic to, and enmeshed in the organisational response. Neither can be considered in isolation. Organisational psychology research has contributed to further understanding of how organisations manage crises, and these studies and the implications of their findings will now be considered.

PART TWO

2.3 Organisational crisis preparedness, intervention and response

Disaster psychology literature suggests that natural and human made disasters are more commonplace than witnessed a decade ago (Gregerson, 2007). As a result more organisations have already experienced crisis, or are currently in the midst of crisis. Emergencies and critical incidents threaten the safety and stability of organisations due to their uniqueness, unpredictability and rapid escalation, which leave organisations unprepared, with little time to react (Stachowski, Kaplan & Waller, 2009). Pearson and Clair (1998, as cited in Simola, 2005) define organisational crisis as ‘a low probability, high impact event that threatens the viability of the organisation and is characterised by ambiguity of cause, effect and means of resolution as well as a belief that decisions must be made swiftly’ (p. 60). This broad, yet comprehensive definition still holds within the organisational crisis literature (e.g. Simola, 2005; Stachowski et al., 2009).

Simola’s (2005) overview of the field of organisational crisis management stimulated interest in this area; in particular with regard to the stages of crisis response. Simola extended psychological theory and promoted a practical framework and assessment tool that could be applied at a time of organisational crisis. In practice, the success of the model is purely speculative without further

empirical research to validate it. However, embarking on research can be problematic, given the unpredictable nature of crisis events and the challenges and sensitivities associated with working with organisations in crisis.

The systems in which organisational crisis management operate are multidimensional, involving the interplay between the many facets of an organisation and its various stakeholders. Organisational crisis management requires the 'capacity to conceptualise complex problems within the dynamics of multiple interacting systems and subsystems at the individual, group and organisational levels' (Simola, 2005, p. 182).

Organisations can be conceptualised as being dysfunctional or functional, and the mode of functioning manifests itself in the way that organisations deals with stressors. Simlola makes a distinction between organisations that are 'crisis prone' and 'crisis prepared'. Crisis prone organisations have poor boundaries, a culture of blaming others, whilst at the same time projecting the organisation's own feelings of inadequacy and anxiety. Whereas, crisis prepared organisations possess a culture of positive self regard and recognise the potential threats that crisis can bring to the organisation.

Crisis prepared organisations are considered to be resilient if they are able to maintain stability while going through significant change (Simola, 2005). Rizzuto and Maloney (2008) suggest that organisations can better prepare for crisis if they develop a culture that can willingly adapt to change. It appears that flexibility is essential to an organisation's ability to respond to unpredictable crisis events. As such, personnel working in professional teams need to adapt to the changing pressures, demands and dynamics of a crisis situation (Stachowski et al., 2009) while at the same time, although seemingly contradictory, preserve stability, consistency and control.

2.3.1 Stages of crisis

To help deconstruct the complexities of a crisis event, models and frameworks have been developed to identify which stage of crisis an organisation is

experiencing, thus providing structure for the organisation to predict, prepare and intervene during an emergency. Valent (2000) maintains that a crisis progresses through five different phases; pre-impact (before the crisis), impact (during the crisis), recoil (immediately following the crisis), post-impact (days and months after the event), recovery and reconstruction (months and years after the event). Valent's (2000) model of different phases of a crisis event is useful in that multiple frameworks of activities, intervention and response can be integrated within the model at each stage of crisis (Jimerson et al., 2005). However, there appears to be disagreement between psychologists about how many stages of crisis exist and about what comprises an adaptive organisational response.

Simola (2005) modified a framework used by health professionals to manage organisational crisis before, during and after a crisis. The 'levels of prevention' framework originated from public health practice having had specific application to the field of community and health psychology and later occupational health psychology. Simola (2005) proposed that the levels of prevention framework could be applied in a parallel way to organisational crisis across the four different levels of crisis response; promotion, primary, secondary and tertiary prevention. Promotion refers to the attempts made by professionals to create a healthy, resilient and proficient organisation. Primary prevention refers to those activities designed to protect the organisation from crisis. Secondary prevention aims to minimise damage caused during the acute stage of crisis when the organisation is in chaos.

The secondary prevention guidelines recommend alerting the crisis management team to assess and contain the crisis and to identify and respond to stakeholder needs, including the community at large. Simola (2005) maintained that an essential element required to contain a crisis is an appropriate communication channel which sends out the message that the organisation is still functioning and maintaining control. The final level, known as tertiary prevention, refers to organisational rehabilitation following the crisis.

Simola (2005) intended to bring about further understanding of the management of organisational crisis amongst consultant psychologists. Simola (2005) provided insight into organisational crisis response and outlined possible practical activities at each level of prevention. Although each critical incident is unique in time and place and each organisation has different values, principles and working practices, the levels of prevention framework is a useful model that can be applied generically across various organisations at a time of crisis.

Rizzuto and Maloney (2008) proposed that organisations progress through pre-crisis, during crisis and post-crisis stages. Rizzuto and Maloney (2008) focused on the organisation's management structure at the time of crisis and how the stability of the management structure is affected at each stage of crisis. Rizzuto and Maloney (2008) applied Smith's 1990 model of crisis management to analyse the responses of one organisation to the ensuing chaos and destruction brought about by Hurricane Katrina. Smith (1990) identified three stages of organisational crisis. Firstly, the crisis of management stage, where the organisation prepares for crisis (pre-crisis). Secondly, the operational crisis stage, which describes the organisation's responses at the time of the crisis (during crisis) and finally, the crisis of legitimation stage, which is the point at which individuals within the organisation either place trust in, or question, the legitimacy of the management structures (post-crisis).

According to Rizzuto and Maloney (2008), most organisational crisis management literature focuses on the legitimation stage rather than the operational stage when the organisation is in crisis. Rizzuto and Maloney (2008) maintain that in the post-crisis stage the organisation regains stability, albeit that the position of equilibrium is different from before. Arguably, if the legitimacy of management is questioned at the post-crisis stage, then organisational recovery will be jeopardised and a state of equilibrium may not be forthcoming. Although Rizzuto and Maloney's (2008) case study portrays an animal welfare company's rescue and recovery operation at the time of hurricane Katrina, this may not reflect the response to human disaster. However, the effective management of the crisis by the organisation provides a better understanding of how other establishments can respond to such challenge.

There is no disputing the importance for organisations to prepare, assess and respond during a critical incident. Frameworks are fundamental to providing a structure to help guide professionals and organisations response during a critical incident.

2.3.2 Emergency and major incident preparedness and response: Guidance and frameworks

When responding to disasters, critical incidents, major incidents or civil emergencies, which can threaten serious damage to the functioning and stability of the nation and put human welfare at risk, appropriate action needs to be taken. Many agencies are involved in major incidents, thus various guidance and frameworks have been devised to ensure that suitable processes and procedures are followed across different levels of response. Some examples are provided below of the guidance and frameworks across UK national and regional levels (which incorporate the counselling service), as well as those relating to specific organisations such as the EPS and schools. If a school crisis were to occur, then it is likely that similar processes and procedures will be adhered to, depending on the severity of the event (e.g. whether the crisis impacts at national, regional or local levels).

2.3.2.1 National level: Policy and guidance

In accordance with the *Civil Contingencies Act* of 2004, national frameworks for emergency preparedness and response have been developed to support councils faced with crises, these are reviewed annually. National guidelines devised for England and Wales by the Cabinet Office comprise six related activities outlined in the integrated emergency management plan (IEM); anticipation, assessment, prevention, preparation, response and recovery. The first four activities are pre-emergency elements of the IEM.

The *National Emergency Preparedness* guidance (Cabinet Office, 2012) informs civil protection professionals how to implement their duties under the

Civil Contingencies Act (2004). Prior to the Act counselling services and other support services were set up as an extension of emergency planning for major incidents to offer psychological help in the immediate aftermath of a disaster (Nightingdale, Smith & Scott, 1997). Currently, organisations providing psychological support, such as the EPS and the counselling service, are *expected* to be involved in emergency preparedness response. Cooperation is also required from voluntary agencies. The integration of counsellors as members of the emergency response team continues to be a developing role; the counsellor is recognised as being valuable in all phases of emergency planning, response and recovery (Uhernik, 2009). It is argued that the applied psychological and sociological developmental principles that counsellors bring to a crisis situation and the appreciation and promotion of individual and community resilience are beneficial (Uhernik, 2009).

The National *Emergency Response and Recovery* guidance (Cabinet Office, 2013) aims to establish good practice based on lessons learnt during response to and recovery from emergencies, both nationally and internationally. The Emergency Response and Recovery guidance aims to further develop professional understanding of emergency responses across national, regional and local levels, including the roles and responsibilities of different organisations as well as joint working practices. It offers a common frame of reference and shared terminology to promote a collective understanding of emergency response and recovery.

There appears to be shared understanding of the multi-agency arrangements for response and recovery in emergencies with respect to the management structures and frameworks utilised by category one responders (e.g. emergency services, LA, the National Health Service, primary care trusts and health bodies). These are generic across all emergency services and are organised at three levels, strategic (gold), tactical (silver) and operational (bronze). Professionals working at the operational level are usually the first to respond to a crisis. First responders provide clarity about the status of the situation, help with the development of safety plans and, if appropriate, signpost to psychological services (e.g. CAMHS) if more specialist support is needed to

ameliorate the impact of trauma (National Child and Traumatic Stress Network, 2008). The response is subsequently cascaded from the operational level through to tactical and strategic levels. This is a bottom up response originating from workers 'on the ground' to senior officials within the organisational structure. The tactical group have responsibility for resource allocation and for identifying ways to implement the strategies identified by the strategic group. The strategic group membership comprises of senior personnel, some of whom are government officials. Although the response structure is set out in a strategic plan, further empirical research is needed to investigate precisely how those professionals responding at local, regional and national levels work together in an emergency.

In 2010, arising from the Welsh Government publication *Talk to me, the national action plan to reduce suicide and self harm in Wales 2009-2014* (WAG, 2009), a discussion document, *Developing guidelines for responding to suicide clusters*, was produced by the Vulnerable Groups Team, Public Health Wales (2010). The discussion document put forward guidelines for responding to suicide clusters in accordance with the recommendations proposed by the Centre for Disease Control USA about the containment of suicide clusters (O'Carroll, Mercy & Steward, 1988). One issue identified when compiling guidelines for the response to suicide clusters is whether 'a suicide cluster response could be integrated within existing emergency plans, or whether some other process should be developed' (Vulnerable Groups Team, Public Health Wales, 2010, p. 6).

2.3.2.2 Regional level: Example of guidance in one council in Wales

The response guidance in one LA in Wales reflects the *Civil Contingency Act* (Cabinet Office, 2004) which provides a working definition for the Major Incident Plan (2010) adopted by the council outlining professional responsibilities and obligations during an emergency. The Major Incident Plan clarifies the protocols to be followed by the council in an emergency through the Emergency Incident Control Plan. Each directorate has an emergency plan which shows how the responsibilities laid out in the Major Incident Plan will be put into effect. If an

emergency happens, designated professionals within the council become 'category one responders' under the Act. At this stage of emergency the role of the council is to support the emergency services.

The Major Incident Plan is supported by a second plan relating to recovery from a major emergency. This is known as the Recovery Plan, which outlines the processes and procedures needed in the recovery phase. The aim of the plan is to coordinate the process of recovery in terms of the emotional, social, economic and physical wellbeing of the community, and is based on the assumption that recovery is best achieved when the recovery process begins at the onset of the emergency or within the early stages of response.

The Directorate Emergency Plan specifies the role of EPs during an emergency. It is argued that the unique contribution of SPs during a crisis is the ability to provide psychological support to children and young people and to support and empower school staff (Saari, Karanci & Yule, 2011). EPs provide a coordinated approach and often take the lead role in crisis response affecting schools.

In the event of an emergency the council provides a framework (reflected in the Emergency Incident Control arrangements) for a multi-agency response. The roles and responsibilities of partner agencies are defined within the framework and a structure is provided aiming to promote collaboration.

2.3.2.3 Educational Psychology Service: Critical incident guidance

EPSs can provide critical incident response guidance to schools and the community. The details within the guidance may vary from one LA to the next depending on local circumstances and working arrangements. By way of example, critical incident guidance produced in one LA in England outlined the specific roles and responsibilities of EPs as well as a response structure to support schools and the community, should an incident occur. The guidance also outlined a model of psychological support for use in schools. Included in the appendices of the critical incident guidance was useful information about

death, grief and childrens' reactions as well as practical resources, guidance and proforma.

Posada (2006) described the role of EPs in developing guidelines in conjunction with multi-agency partners for the purpose of planning for emergencies in one LA in England. The EPs contribution around psycho/social support highlighted the unique and important contribution of educational psychologists to the emergency planning process. Similarly, McCaffrey (2004) outlined how a consultation approach to critical incident response was developed by Kent EPS; underpinning the model was a systems approach to service delivery to support schools at a time of crisis. Central to the consultancy model was the process of building capacity through working with school staff on how to support individuals and groups of vulnerable pupils following a critical incident (McCaffrey, 2006). EPs are well placed with their understanding of systems and organisational change to empower educational establishments to cope with the early stages of a critical incident. Over recent years the number of EPS published guidelines providing psychological advice and information for school staff have increased (e.g. Dundee City Council, 2008; East Sussex County Council, 2013; Hertfordshire County Council, 2011; Somerset County Council, 2013). Fewer LAs in Wales have published guidelines, although this does not mean that the information is not available within LAs.

Critical incident guidance produced in one EPS in Wales displayed a flowchart to describe EP response at two levels; critical incidents and serious incidents. Emphasis was placed on guidelines surrounding confidentiality and a fast track service to the CAMHS was described. The importance of debriefing for EPs was also highlighted. Some EPSs in Wales have generic critical incident response information available for schools in the form of literature, practical guidance and resource packs. Sometimes the roles and responsibilities of EPs are referenced in other documents, for example, within school emergency frameworks.

2.3.2.4 School emergency plans and frameworks

The UK government Department for Education offers guidance on developing school emergency plans (Department for Education, 2013). In Wales the local councils prepare school emergency plans where key individuals are assigned to undertake different roles and responsibilities. Typically a plan provides a range of guidance on emergency procedures, including how to prepare and respond to emergencies and how to respond to the school community. The documents are often developed in consultation with partner agencies such as the EPS and the Counselling Service. The EPS may outline what assistance can be provided to schools by way of a psychosocial response. For example, a school emergency framework (Porthcawl Comprehensive School, 2006) produced in one LA in Wales documented a three-tiered model developed by the EPS to determine the role of the service and level of response to sad events, critical incidents and emergencies.

Crisis frameworks and plans differ across regions and localities depending on decision making and best practice. National guidelines in the UK recommend that schools and LAs develop crisis plans; however, this is not written in legislation (Rees & Seaton, 2011). Consequently, the procedures and processes outlined in some emergencies plans may be vague or sketchy. This was evidenced in an American study, which showed that most school districts in California did not have extensive emergency plans, despite the majority of schools in the region having experience of emergencies (Kano & Bourque, 2007).

2.3.3 Incorporating the psychological views and needs of school age children.

Woolsey and Bracy (2010) gathered views from 16 national and international experts in aspects of emergency response about whether the physiological and psychological developmental needs of children aged between six and ten years are accounted for in emergency planning. The analysis revealed that the psychological needs of primary age children are not considered in emergency

response plans. However, the methodology employed by Woolsey and Bracy (2010) involved a content analysis of telephone interviews and may be subject to bias in the following ways; firstly, the trends and themes that evolved from the data may have reflected the particular view points of the researchers and secondly; interviewees may have wished to present a strong argument about the views of young children being neglected in emergency planning with the aim of influencing change. Nevertheless, Woolsey and Bracy (2010) felt that there were sufficient justification to address these concerns through the training of emergency responders across all sectors, including operational and policy planners. Importantly, further empirical research needs to be undertaken to ensure that the views and needs of pupils of all ages can be understood and responded to in emergency planning.

2.3.4 The role of parents and carers

Parents and carers play an important role in supporting young people experiencing trauma. Stover, Hahn, Im and Berkowitz (2010) found that a lack of parental understanding of the affect of trauma on their offspring may prevent the family from providing the necessary emotional support to facilitate recovery. Additionally, a lack of awareness of the impact of significant events may also result in the failure of parents to seek out intervention for their children. This study reinforces the importance of psychoeducation for families and the need to encourage communication between parents and child to promote early intervention.

Vigil and Geary (2008) looked at the relationship between family coping styles and psychological well-being in the aftermath of hurricane Katrina. 81 adolescents took part in the survey, 50 of whom lived in a relocation camp, having been displaced by the hurricane. 31 young people unaffected by the hurricane were matched on socioeconomic status, age and ethnicity. Parents/guardians of both groups participated in the study if their children were aged between five and 18 years. Measures comprised standardised self-report instruments assessing the psychological wellbeing of the adolescents and family functioning as reported by parents / guardians. The findings showed that

the group who were relocated to the camp in the aftermath of the hurricane reported higher symptoms of distress and depression and significantly lower levels of self-esteem than the non affected group (Vigil & Geary, 2008). Interestingly, the families of the young people affected by the hurricane tended to seek out more community based support than the families of the non-affected group (Vigil & Geary, 2008). This would suggest that when trauma impacts on youngsters' psychological wellbeing, calling upon nonfamilial support is one coping strategy used by parents/ guardians. However, any conclusions drawn from this study should be treated with caution given that hurricane Katrina was a catastrophic global disaster that may not be representative of other disasters. Furthermore, the participants' unique experience of living in a relocation camp may not be reflective of other populations affected by crisis.

Vigil and Geary (2008) proposed that family members faced a dilemma when considering whether the parental support that they provided for traumatised adolescents was adequate, or whether additional support from specialist providers (e.g. counsellors) was needed. Evidence suggests that good coping behaviours of families can build resilience in young people, which leads to better psychological outcomes following a disaster. An over reliance on external support from community based resources was associated with reduced confidence in parental support and increased perceptions of vulnerability and stigmatisation. External support can be disempowering and may undermine families' coping behaviours (Vigil & Geary, 2008). Furthermore, parents' suggestions for their children to seek help may build a perception that the threat is greater than first anticipated (Williams et al., 2008). These factors need to be taken into account when developing school emergency frameworks, particularly as schools have close links with families and the community.

A parallel may be drawn about pupils' perceptions of the ability of staff to support them during a school crisis if members of staff are perceived to be over reliant on help from outside agencies. A key area for future research should be whether specialist outside agency support during a crisis undermines the perceived coping ability of school staff.

2.3.5 Crisis intervention

To prevent crises occurring is problematic, as by nature disasters and critical incidents are sudden and unexpected events. Knowing what to do when faced with an event and having available strategies and resources can instil confidence and facilitate recovery. School staff face uncertainty about and struggle with, how to best support traumatised children (Alisic, 2012). Generally, teachers feel unequipped to support pupils exposed to trauma, perceiving that they lack the necessary skills and knowledge. The majority of teachers interviewed by Alisic (2012) indicated that they welcomed support from their colleagues, which was forthcoming and would contact a SP for support and guidance when needed, though they did not always act upon this.

It is important for professionals to offer support to schools at the various stages of crisis. Nearly a decade ago, Brock and Jimerson (2004b), claimed that crisis intervention is immensely important for preventing or alleviating common stress reactions and harmful behaviours and for ascertaining those likely to experience longer term psychological affects, as well as for identifying referral pathways to health professionals (Jimerson et al., 2005).

To date little empirical research has been undertaken to investigate how organisations intervene in the wake of crisis. Most of the literature in the field of disaster psychology focuses on the reactions of individuals and groups to crisis. Research on disaster preparedness of organisations and schools is less well documented (Kano & Bourgue, 2007). It has, nevertheless, been acknowledged that EPs plays a vital role in supporting schools during a crisis (e.g. Carroll et al., 1997; Greenway, 2005; Houghton, 1996; McCaffrey, 2004; Posada, 2006; Rees & Seaton, 2011). Models and guidelines identifying how EPSs can respond to critical incidents in schools have been reported by McCaffrey (2004) and Posada (2006), providing a UK perspective. The approaches described by these authors were developed with the aim of meeting LA needs and have been considered useful in practice.

Models and frameworks go some way in helping organisation know how to respond during a critical incident. However, there still appears to be lack of shared understanding amongst professionals regarding *specific* intervention strategies used during a crisis (Jimerson et al., 2005). Furthermore, it is unclear whether similar approaches are used across organisations, even when responding to same event. Likewise, when considering schools as organisations Jimerson et al. (2005) report that ‘there is minimal empirical research addressing specific strategies of crisis preparedness and response used in schools’ (p. 277). This is surprising given the impact critical incidents can have on children and young people attending schools. Over recent years there have been calls to address these issues by providing a better understanding of the models and strategies used to support schools facing crisis.

2.3.5.1 Crisis intervention models and strategies

Acknowledging that SPs provide specialist input during critical incidents in schools, Rees and Seaton (2011) gathered a variety of information via a survey of 277 SPs from around the world about their experiences of crises, with the aim of informing the working practice of EPs within one psychology service in Wales. However, given the potential for professional diversity between SP practice overseas, compared with EP practice in the United Kingdom, to generalise the findings of Rees and Seaton (2011) may be problematic. Nevertheless, the insight gained from the survey has undoubtedly informed future research in the field of critical incidents affecting schools.

One area of significance was the identification of the models and theories used by SPs when responding to a school crisis. The National Organisation for Victim Assistance (NOVA; Young, 2002) model of crisis intervention had the greatest number of citations for use by school psychologists in the survey undertaken by Rees and Seaton (2011). The NOVA model is designed for managing crisis within the first 72 hours of the event. NOVA is underpinned by psychology based on the theoretical framework of Maslow’s basic hierarchy of human need and incorporates four stages; physical care and safety, crisis interventions, post

traumatic counselling, and growth and survival. NOVA also offers an 'in-crisis' protocol with a number of steps to follow when formulating a response plan. NOVA aims to provide an holistic approach to crisis management across individual, group and systemic levels, positively impacting both school as an organisation and the wider community (Jimerson et al., 2005). However, the limitation is that the implementation of NOVA depends on having available a highly trained NOVA crisis response team.

An alternative model known as Psychological First Aid (PFA; Everly & Flynn, 2005) has been considered appropriate for use in large scale disaster responses such as Hurricane Katrina (Schulenberg et al., 2008; Uhernik, J., 2009). PFA is a mental health protocol for responding to disaster within the first few hours. Vernberg et al. (2008) provide an overview of the PFA practical guide entitled *Psychological First Aid Field Operations Guide*, which has been developed from evidenced based practice and which provides strategies, interventions and techniques to support survivors of disasters and terrorism. The principles of PFA surround the importance of safety, sound communication patterns, conveying hope, drawing on inner resources and seeking out others with available resources, facilitating problem solving and building up a network of social support. As with NOVA, PFA has practical relevance, primarily for re-establishing the safety and security of survivors. Both models focus on restoring cognitive and emotional functioning in individuals. However, PFA needs to be viewed with caution due to the lack of controlled studies as to its effectiveness (Daniels, Bradley & Hays, 2007).

Multi-modal models of intervention such as BASIC-Ph (Lazarus, 1976) have international recognition and application in crisis intervention work. BASIC-ph provides a framework to assess individual coping styles across six components: belief and values, affect, social, imaginative, cognitive and physiological. Emphasis is placed on looking at inner resources and strengths with the aim of developing individualised programmes based on specific needs. BASIC-Ph is an early identification and assessment tool, which aims to help with signposting to more specialist services (e.g. mental health services). BASIC-Ph is appropriate for individual case work and can be used therapeutically to help

survivors recover from trauma. It is not designed for managing organisational response to crisis, thus does not have wide application.

While numerous models and frameworks exist there are common psychological techniques used across models, such as ventilation and validation (Rees & Seaton, 2011). Ventilation occurs when survivors are given permission to tell their story and are listened to. Validation is when responders help survivors understand that their reactions are not uncommon even though their experiences are unique (Jimerson et al., 2005).

One interesting finding from the survey undertaken by Rees and Seaton (2011) is that not all school psychologists employ a model of intervention during a crisis, but instead apply psychology eclectically, relying on intuition, experience or common sense. Arguably, generalisability of the findings may be an issue, given that the data represents the collective views a number of countries. It is unclear whether eclectic practice is more prevalent in one country as opposed to another. Furthermore, given the small sample size of 277 responders worldwide, the findings may not be representative of all SPs' practice.

Unique to SPs is the application of psychological theory to practice when working within schools and wider systems (Farrell et al., 2006). When responding to crisis, typically SPs apply bereavement and grief counselling theory, cognitive behavioural therapy / psychology, post traumatic stress disorder therapy, solution focussed therapy and group psychology / processes (Rees & Seaton, 2011). These psychological interventions can be used eclectically by SPs after determining the presenting strengths and needs of the client(s) and the stage of crisis.

2.3.5.2 Developing an integrated approach

The International Crisis Response Network (ICRN) was set up on behalf of the International School Psychology Association (ISPA) to look at prevention and intervention in emergencies from an international perspective, taking into account cultural diversity. One objective of the ICRN is to establish an

international crisis response team 'to increase cooperation and solidarity among school psychologists throughout the world in helping schools and communities strengthen their coping skills and resilience following a natural or human made disaster' (Jimerson et al., 2005, p. 296). Also identified is the need to develop programmes for professional training and to ascertain the processes required for helping responders avoid negative consequences, such as burn out and compassion fatigue. The International Crisis Intervention Project also emerged from the ICRN in 2000; its members aim to promote the exchange of ideas, knowledge and experiences of crisis prevention and intervention in schools.

The growing effort to move towards a shared understanding and integrated model of crisis preparedness and intervention is unsurprising (Jimerson et al., 2005; Rees & Seaton, 2011). However, getting to this position is not without challenge, given the disparity between the different models of intervention used by practitioners across the different stages of disaster. Further complications are that empirical findings and lessons learnt from disaster research may be difficult to generalise due to the uniqueness and ambiguity of each crisis event (Stachowski et al., 2009).

Brock and Jimerson (2004) recognise the uniqueness of each crisis situation suggesting that 'there is no single activity that will provide resolution for all in the aftermath of crisis events' (p. 37). Brock and Jimerson (2004) recommend using multi-faceted intervention approaches to crisis which should be informed by the unique set of circumstances encountered. Jimerson et al. (2005) summarised the established frameworks which could operate within an integrated model of crisis preparedness and intervention for school and the community. Jimerson et al. (2005) proposed incorporating multiple models and frameworks within Valent's (2000) different phases of a crisis event (as outlined in 2.3.1). Examples include NOVA, PFA and multi-model models of intervention such as BASIC-Ph. Jimerson et al. (2005) concluded that a shared foundation of crisis preparedness and intervention should be established internationally which places emphasis on developmental and school considerations. Jimerson et al.'s (2005) efforts are invaluable to 'facilitate collaboration amongst diverse colleagues across multiple contexts' (p. 275).

Rees and Seaton (2011) concur with Jimerson et al. (2005) that an eclectic integrated model of crisis intervention is called for, which can be used flexibly at different stages of the crisis response. Rees and Seaton (2011) gathered rich survey data from an international perspective of the experiences of SPs when responding to crises. The results of the survey have fuelled the debate about how to respond to events when they are higher in frequency, such as suicides. Given the occurrence of suicide and the significant affect that suicide clusters have on schools and the community, psychologists have questioned whether acts of suicide should trigger a distinct crisis response (Rees & Seaton, 2011). An understanding of the underlying mechanisms involved in suicide cluster behaviours is limited due to a lack of empirical research (Haw, Hawton, Niedzwiedz & Platt, 2012). Discussions on school crisis prevention and intervention amongst SPs are facilitated through the ISPA. How to respond to suicide clusters is a topic of ongoing discussion (Goldney, Davis and Scott, 2013).

2.3.6 Multi-agency collaboration

Multi-agency working has been emphasised since the review of German, Wolfendale and McLoughlin (2000) on the role of the EP in child protection. It is evident that over the past decade attempts have been made to improve multi-agency collaboration and joint working. *The Children Act* of 2004, published as an outcome of the Victoria Climbié Inquiry Report, requires multi-agency collaboration in order to safeguard children. In line with the Act the Welsh Government has produced the guidance, *Safeguarding Children: Working Together Under the Children Act* of 2004, from which business plans are regularly reviewed. *The Children Act* (2004) aims to enable better joint working between agencies to keep children and young people safe. According to the National Institute for Clinical Excellence (2006), the provision of social and psychological care to children during a crisis is likely to be coordinated by the EPS in conjunction with partner agencies such as CAMHS, social services and education, which involves multi agency collaboration.

The Major Incident Plan (2014) in one LA in Wales acknowledges that recovery management in the wake of an emergency is most effective when agencies involved in safeguarding and human welfare have a significant role in all levels of decision making. This would suggest multi-agency collaboration and consultation are seen as beneficial in crisis work. The extent of collaboration within and between agencies during a critical incident response may be understated. Rees and Seaton (2011) looked at the degree to which SPs collaborate with others and found that the majority of SPs surveyed (83%) indicated that they had not worked alone during a crisis. Many SPs worked alongside fellow professionals. Counsellors were mentioned more frequently than any other outside agencies as engaging in joint working with SPs. Other organisations included health professionals (e.g. CAMHS, school nurses and paramedics), social services, police, and education welfare officers.

In their article Daniels et al. (2007), highlighted issues faced by school staff affected by school violence. The authors advocated having counsellors in crisis teams, 'members of crisis planning teams must advocate for inclusion of crisis counselling, resources and referral services for students as well as teachers and other school staff in the crisis response plan' (Daniels et al., 2007, p.657). Furthermore, Daniels et al. (2007) proposed that effective school crisis support plans should incorporate cooperative working arrangements between team members from related disciplines, such as school psychologists, counsellors, social workers, and community members. However, their conclusions were drawn from reviewing the literature from the viewpoint of counselling psychologists, rather than employing methods of data collection where opinions are gathered from multiple perspectives, including those professionals involved in emergency response and crisis intervention.

Generally, the view taken by SPs is that working in isolation during an emergency is unhelpful (Rees & Seaton, 2011). This would suggest that when schools are in the throes of crisis there is multi-agency collaboration. Rees and Seaton (2011) concluded that 'collaboration is seen as a highly important effective practice' (p. 73).

An opposing view, which goes against common reasoning, is that assistance provided by external statutory and voluntary agencies during an emergency does *not* help organise or stabilise operations (Rizzuto & Maloney, 2008). Rizzuto and Maloney (2008) proposed that, 'external agency support can contribute to increased complexity during the operational crisis stage' (p. 83). Though counterintuitive, this is the case when additional support is very much needed. While multi-agency working and collaboration are considered essential to crisis response, it is argued that there are barriers to this way of working created by the very professionals actively engaged in this field of work. Turf battles, resource capacity, dual relationships and professional boundaries are some which have been mentioned (Mendenhall, 2006).

Mendenhall (2006) recommends that trauma teams work collaboratively and flexibly to identify and negotiate overlap in roles, rather than engage in turf battles. It is clear that those professionals who work in different multi-agency crisis teams strive towards the same goals: to improve outcomes for children (Ko et al., 2008). Despite different areas of expertise, underpinning the work of crisis teams are similar sets of values and principles which operate for the benefit of children and young people, families and the community, which is to reduce the negative affects of trauma (Ko et al., 2008).

Joint working and collaboration, as well as the need to build up relationships to allow multiple systems to work together are paramount (National Child and Traumatic Stress Network, 2008). There are increasing pressures to promote cross disciplinary working, whilst at the same time avoiding duplication of work. However, because of the ensuing chaos caused by a critical incident there is often a lack of clarity about roles and responsibilities within and between organisations, which can create unease amongst professionals. Alisic (2012) reported a blurring of boundaries between the tasks of a teacher and that of a mental health provider when supporting traumatised children, which created role confusion. Adding to this was the balance between pupils' emotional recovery and continuity of education. To improve teacher confidence in supporting traumatised pupils Alisic (2012) recommended the development of a

policy within schools on the roles and responsibility of school staff in response to crisis.

Rees and Seaton (2011) propose that SPs value working within a structured system with protocols, policies and procedures, training and supervision. While respecting this, there has been a growing interest in how crisis teams adapt and adjust their responses to cope in an ever changing dynamic crisis situation (Stachowski et al., 2009). Research has shown that teams who fail to be flexible at a time of crisis may be less successful (Gersick & Hackman, 1990). According to Stachowski et al. (2009) to be effective, existing norms and structures should be modified if necessary to meet the shifting demands of a crisis situation. Furthermore, to reduce uncertainty good communication is essential in effective teamwork to update colleagues about the situation as it unfolds (Waller & Uitdewilligen, 2008). Stachowski et al. (2009) conclude that training in crisis response needs to ensure that crisis teams do not follow rigid and prescribed procedures that suppress flexibility.

According to Rizzuto and Maloney (2008) more understanding is needed about collaboration with other agencies and how personal and organisational factors interact during the crisis response. The true meaning and value of multi-agency collaboration and the extent to which there is overlap and duplication of practice across organisations provides scope for further research.

2.3.7 Implications for professional training

Since the 9/11 disaster in 2001 there has been a plethora of research on crisis preparedness and response (e.g. Jimerson et al., 2005; Mendenhall, 2006; Rees & Seaton, 2011; Rizzuto & Maloney, 2008). Arising from this is the need to apply psychological theory to practice in the field of disaster. This has direct implications for professional training in emergency response. Vernberg et al. (2008) found that the skills, knowledge and experiences of professional psychologists in critical incident response varied widely. Rees and Seaton (2011) found that 19% of SPs surveyed had not received any formal training in critical incident response. Yet, according to Yutrzenka and Naifeh (2008), there

is a high probability that psychologists will work with clients at the time of a crisis.

Yutrzenka and Naifeh (2008), in their review of the research literature on disaster psychology, traumatic stress and graduate education, maintain that few psychologists are adequately prepared, will take leadership or supervisory roles, or apply or expand on traditional research methodology to investigate disaster related issues. The authors outlined the requirements for the completion of the doctoral clinical psychology programme in South Dakota. Components include; crisis intervention; disaster mental health; traumatic stress and serving the diverse community in disaster. Arguably, there may be a greater need for training programmes in some areas because of the potential to experience natural disasters, for example, those in hurricane-prone locations (Daniels et al., 2007). Further research is required to establish the extent to which graduate doctoral training in disaster psychology is required within different communities worldwide.

Given that professional psychologists are amongst the first to be called to deal with traumatic events (Vernberg et al., 2008) the need for continuous professional training is obvious. According to Schulenberg et al. (2008) psychologists apply various skills during crisis intervention work, including planning, coordinating, communication, organisational, problem solving, and decision making. Continued professional development is important with regard to disaster psychology to allow for assimilation and accommodation of novel approaches and new directions in research. For example, training providers in the past have placed emphasis on individual trauma, but neglected the phenomenon of shared trauma (Yutrzenka & Naifeh, 2008). Schulenberg et al. (2008) recommend that psychologists receive general and specific training in disaster response, provided through both formal and informal opportunities.

The European Federation of Psychologists' Association (EFPA) Standing Committee on Disaster, Crisis and Trauma Psychology (DCTP), recommend that psychology undergraduate courses include DCTP as an area of training (Saari et al., 2011). Yutrzenka and Naifeh (2008) also recognise the need to

incorporate training in the field of disaster psychology within professional psychology doctoral programmes. Though Yutrzenka and Naifeh (2008) place emphasis on the clinical psychology training route there is also a requirement for SPs to access appropriate training (Rees & Seaton, 2011). The training needs in critical incident response for clinical psychologists and SPs should be equitable, as both professionals work in related disciplines serving families and communities. Furthermore, self care advice in managing stress for psychologists ought to be provided, which should also be incorporated into models of supervision (Hayes & Frederickson, 2008).

Professionals employed by schools (e.g. teachers, learning support staff, pastoral staff and lunchtime supervisors) are invariably the first to respond to a crisis happening at school. Regardless of this, school personnel training in emergency response and emergency drills may not be common place (Kano & Bourque, 2007). Having a written emergency plan may provide a sense of security and preparedness, but to be fully effective, written plans must be tied into training programmes and resources (Carley & Harrald, 1997).

Research suggests that training in emergency preparedness and response is appropriate for all professionals who work directly or indirectly to support children and young people at school. Disaster psychology is a relatively new field of research and although it is recognised that training is critical to develop an understanding of crises, a caveat exists, in that training may not be forthcoming due to a lack of understanding of these phenomenon (Hughes, Derrickson, Dominguez & Schreiber, 2010).

2.3.8 Summary part two

Trauma not only affects professionals working at disaster sites, it also impacts organisations. Organisations are 'soft systems' (Campbell, Draper & Huffington, 1988), which operate through complex human interaction and decision making processes incorporating multiple perspectives. Organisational dynamics have been considered analogous to family systems, which have been conceptualised as being functional or dysfunctional (Simola, 2005). Some organisations may be

more resilient than others. If organisations are unstable following a crisis, then the legitimacy of the management structure may be called into question (Rizzuto & Maloney, 2008).

There appears to be consensus held amongst psychologists that crisis situations comprise pre-crisis, in-crisis and post-crisis stages. However, there is lack of agreement about whether these stages can be further subdivided (Valent, 2000). LAs have emergency plans that link to national strategy for dealing with crisis. Frameworks and guidance have been written to clarify roles, responsibilities and duties to help organisations manage and respond to each stage of crisis. The guidance described in the current study provides an overview of national, regional and local response, as well as that of relevant organisations, such as the EPS and schools. Knowing what to do during a critical incident can assist organisations to prepare their response. To be meaningful LA plans could also incorporate the needs and views of children and young people (Woolsey & Bracy, 2010) and families (Vigil & Geary, 2008; Williams et al., 2008) in the community whom they serve.

The crisis literature cites various models of school crisis preparedness and intervention used to support schools at each stage of crisis. Some are targeted at an individual level (e.g. PFA; Everly & Flynn, 2005) and others at an organisational level (e.g. NOVA; Young, 2002). However, there does not appear to be a consistent approach used by all emergency or crisis responders.

Often a number of specialist agencies are involved in the same crisis response, and this way of working is based on the premise that a wealth of expertise should provide a better outcome for children and young people and the community. There are clear benefits for multi-agency working and this approach is encouraged (Woods et al., 2011). Yet, due to a lack of clarity about roles and responsibilities and professional boundaries, multi-agency teams do not always work together collaboratively during a crisis and at times engage in turf battles (Mendenhall, 2006). Due to crises being unique, unpredictable and highly stressful, further research is needed to advance understanding of these phenomena, which should ultimately lead to better training to help equip

organisations to cope (Hughes et al., 2010; Saari et al., 2011). A number of theorists in the field of disaster psychology have reviewed the literature (e.g. Daniels et al., 2007; Simola, 2005; Yutrzenka & Naifeh, 2008), and offered far greater theoretical insight and understanding. Whilst one recognises the importance of literature reviews, in order to inform future research there is also a need for researchers to utilise methodology that can help build a rich picture which represents the views and experiences of professionals involved in crisis response.

2.3.9 Summary: Literature review

This chapter has considered how researchers have interpreted the affect of trauma (brought about through crisis) on both personnel and organisations. It has presented the literature on professional and organisational crisis preparedness and response. In doing so it has outlined existing models, frameworks and guidance that say more about the nature and sequence of crisis events and the available intervention strategies.

There is a paucity of research eliciting the experiences of professionals within organisations in critical incident response, particularly with a suicide cluster. The present study attempts to understand the interplay between professionals and agencies during a critical incident and intends to facilitate the progression of discussion about any feasible and desirable change, which it is anticipated will go some way in improving the current processes and procedures. There are gaps in the literature which form the rationale for the current study from which a series of research questions have been proposed.

2.3.10 Gaps in the literature and the basis for the present study

The current study aims to find out from the experiences of professionals working in the EPS, counselling service and schools how each organisation responded to a critical incident in one LA in 2008 / 2009, independently (within their own establishment) and when joint working. The theoretical focus is based primarily upon systems theory, aiming to understand the inter-relationship

between agencies in critical incidents. A review of the literature suggests that there is a paucity of empirical research and general lack of understanding about school crisis and the impact on professionals and organisations and how different multi-agency teams interact. The response to a suicide cluster by professionals (taken from their perspective) and the impact on the organisations in which they work have not been investigated before.

The present study is original as it explores responses to a critical incident through social constructionism, where participants' perceptions of past experiences within this particular social context (critical incident) are investigated. Having gathered the views of professionals who have experienced a critical incident response, a better understanding may be gained about the processes and procedures followed at that time and how professionals were affected by this unforeseeable traumatic event. This information can add to existing literature about crisis preparedness and intervention and can help inform educational psychology training and practice.

Furthermore, as an outcome it is anticipated that the contributing agencies (i.e. EPS, counselling service and schools) will enter a dialogue (debate) about possible changes to the current system, which will tie into the suicide prevention strategy in one LA and the corporate plan on suicide prevention. The expectation is that the proposed research will go some way to inform a critical incident response plan which aims to reduce future suicide and suicide attempts, which is a Welsh Government policy directive. The study aims to provide a service evaluation whereby information can be used in a positive way to improve existing services. This may have practical application for responding to single and multiple critical incidents should they occur in the future.

2.3.10.1 Aims of the current research

The current research aims to:

- explore responses to a critical incident involving completed suicides and suicide attempts of young people in one LA between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

2.3.10.2 Research questions

In line with the aims of the current research three key research questions are posed.

Question 1: How do different agencies and organisations respond during a critical incident?

There is some evidence to suggest that the level of response during a critical incident is determined by the knowledge, skills, understanding, and expertise and confidence of individuals within their profession / organisation and may be dependant on their perceived roles and responsibilities. Therefore it is anticipated that different agencies respond to a critical incident in qualitatively different ways.

Question 2: What joint protocols and procedures are followed during a critical incident?

Protocols help define procedures, roles and responsibilities to guide action. During a critical incident there is evidence to suggest that there are interactive exchanges between different agencies, such as schools as organisations, the community and outside agencies (e.g. the EPS and the counselling service). Systems are complex and often interlinked and during a crisis events may be unpredictable which produces uncertainty. To clarify the protocols and

procedures followed during a critical incident is important in order to map out appropriate levels of support offered by existing services and identify service gaps.

Question 3: How can existing protocols and procedures informing responses during a critical incident be improved both within organisations and when joint working?

To be effective, protocols and procedures should identify those individuals with lead responsibility and the processes required to be followed during a critical incident. What protocols and procedures are formulated and how they are adhered to, in part, determines the success of multi-agency working, communication and levels of response. It is important that agencies work together using a coordinated approach and share best practice in order to create systems which look to continuously improve.

3 DESIGN OF THE STUDY

3.1 Introduction to the chapter

Part one of this chapter provides a rationale for the research methodologies used in the study. It justifies why qualitative research is used and the data collection methods and analysis of grounded theory (Glaser & Barney, 1992) and of SSM (Checkland & Poulter, 2010). It provides a rationale as to why mixed methods were used to answer the research questions. Part two provides details of participants, ethics and procedures for the collation and analysis of the data.

PART ONE

3.2 The foundation of research

Ontology is a theory of the nature of social entities. Objectivism is an ontological position that maintains that social entities are objective entities which are independent of the social actor. An opposing ontological position known as constructionism asserts that social phenomena and meaning are *derived* from the perceptions of social actors (Bryman, 2008). The researcher's ontological stance informs his/her epistemological position about the goal of research and the discovery of knowledge. However, there appears to be differences of opinion giving rise to a dichotomy to the approach to research. The two opposing sides of the epistemological debate are naïve realism (akin to positivism) and extreme relativism (anti-positivism), which reflect the ontological positions of objectivism and constructionism, respectively.

3.2.1 Positivist approach to research

Willig (2006) referred to a positivist epistemological position as donating a 'correspondence theory of truth' (p. 3), which implies that there is a direct correspondence between events, objects and things and their representation. Researchers taking a positivist approach to research maintain that there is an

objective truth 'out there' about the world. This is a traditional view, where the social scientist is an observer of social reality. Researchers advocating the epistemological position of positivism believe that the goal of research is to produce objective knowledge.

Critics of positivism argue that a positivist approach fails to recognise the influence the researcher has upon the research including their own bias, beliefs and judgement.

Many contemporary researchers also recognise that it is unhelpful to adopt an extreme positivist stance which ignores the social world from the standpoint of the individual (Cohen, Manion & Morrison, 2007). Furthermore, when conducting research within a social world researchers ought to take into account historical, social and cultural factors.

3.2.2 Anti positivist / interpretivist approach to research

When undertaking social research a positivist approach is limited (Cohen et al., 2007). Positivism disregards the complexity of human interaction and behaviour within a social world. Anti-positivist researchers take an interpretive approach where the focus is on action and behaviour with meaning. Interpretivism has been defined as 'an epistemological position that requires the social scientist to grasp the subjective meaning of social action' (Bryman, 2008, p. 694). Within this approach there is a search for insight into people's experiences of an event as opposed to seeking out 'the truth'. As social action is meaningful to actors within in a social world then any enquiry should take on their point of view.

One such viewpoint is that of social constructionism (Burr, 1995) which takes into account historical, cultural and linguistic factors in the 'construction of social reality'. Social constructionists maintain that same event can be interpreted in different ways by different people. There is no right or wrong answer, all can be justified from the perspective of the individual.

3.2.3 Research strategy: quantitative versus qualitative research.

The ontological orientation for quantitative research strategies is objectivism which implies that that social phenomenon presents as external facts that are beyond human influence. Quantitative research employs the norms of positivism and the scientific model and considers social reality as an 'external, objective reality' (Bryman, 2008, p. 22).

Conversely, qualitative research rejects positivism and the laws of natural science. Instead it looks at the ways individuals interpret their social world. Qualitative research usually focuses on words rather than quantification in the collection and analysis of data. The approach acknowledges that language is an important aspect of socially constructed knowledge. Data collection techniques in qualitative research tend to be participant led or 'bottom up' (Willig, 2006) allowing the participant to relay meaning directly through experiences.

Quantitative research is characterised by a deductive approach where emphasis is placed on the testing of theories. Critics argue that theory can be imposed onto the data making it 'fit' the theory. In qualitative designs researchers engage with the data to generate new insight. Hence, an inductive approach is advocated where emphasis is placed on the generation of theories.

Quantitative researchers argue that qualitative research is too subjective and impressionistic and therefore difficult to replicate (Bryman, 2008). Indeed, given the unstructured nature of qualitative research, replication is problematic (Bryman, 2008), particularly when the phenomenon of interest has unique characteristics. However, the benefit of qualitative research is that it is an approach which allows a rich detailed description of an event or experience which is analysed from the perspective of individuals or groups (Cohen, 2007). This approach offers high ecological validity particularly when examining a wide range of complex phenomenon involving human interactions.

Silverman (2010) maintains that quantitative methods when used in isolation may not fully address research questions. Thus, Silverman (2010) advocates

making pragmatic choices between research methodologies pertinent to the research questions. In contemporary research it is generally accepted that regardless of the epistemological position of the researcher, qualitative research methods can be used (Willig, 2006). Furthermore, it has been reported that some researchers view the distinction between quantitative and qualitative research ambiguous and no longer useful (Bryman, 2008). Given the lack of methods for bridging the gap between quantitative and qualitative approaches many researchers advocate combining different methods within their research design depending on the nature of their enquiry. A mixed method approach to research goes against the notion of a qualitative / quantitative dichotomy.

3.2.4 Critical realist approach to research

In contemporary research there is middle ground bridging the epistemological debate, which is the position held by critical realists. This viewpoint incorporates a range of perspectives from realist to interpretivist epistemologies (della Porta and Keating, 2008). Critical realists accept that the material world may be 'real' but propose that knowledge and understanding of the world is socially constructed and therefore open to interpretation and challenge. Hence, it follows that one's beliefs and values can influence what is being observed (Kelly, 2008).

Generally the methods used in research are informed, and arguably constrained, by the epistemological position adopted by the researcher. However, it is recognised that 'particular epistemological issues and research practices do not necessarily go hand in hand in a neat unambiguous manner' (Bryman, 2008, p. 17) and should be considered as tendencies rather than being prescriptive. Critical realists propose that a broader understanding of the social phenomenon can be gained through integrating research methods. Thereby, advocating a mixed methods approach. This allows flexibility of choice by the researcher where consideration can be made of the best methods to answer each of the research questions.

A critical realist viewpoint informed how the research questions in the current study were formulated and how the appropriate methodology was determined to answer the questions.

3.2.4.1 Justification for using a qualitative design

Due to the explorative nature of the study, which focused on discovering new insights, meanings and understandings as well as subjective experiences, a qualitative approach was considered the most relevant. Qualitative research is 'theory generating, inductive, aiming to gain valid knowledge and understanding by representing and illuminating the nature and quality of people's experience' (Tindall, 1994, p.142). A qualitative design was compatible with the researcher's ontological stance of constructionism which holds that social phenomena and their meaning are produced through social interaction and are subject to change. The researcher was interested in the meaning attributed to events by the research participants.

A qualitative design was deemed appropriate as the phenomenon of study can be viewed as a single case in the following ways: firstly, the case was specific to one LA in which the critical incident response took place; secondly, the research was formulated within the parameters set by the definition of a 'critical incident' and a 'suicide cluster' (CDC, 1988); thirdly, the research was confined to the specified time frame of the critical incident, which happened during 2008 and 2009, and fourthly, a research area had been identified which picked out specific features, namely the process and procedures followed during the critical incident response (Silverman, 2010). Within this single case a grounded theory approach and SSM were used.

Qualitative research works with a small number of participants who are representative of the population under study (Willig, 2006). In the current study the small sample size was not thought to be problematic, as small sample sizes are characteristic of qualitative research (Willig, 2006). The main criterion for qualitative research is that 'the sample is representative of the population from which it is drawn' (Cohen et al., 2007, p.105). The aim was not to generalise

research findings, but to report on the authentic and unique views of individuals (Silverman, 2010). The nature of the questions posed in the current study was exploratory and aimed to elicit the experiences and views of the participants about an event. The research questions were not designed to find out some quantifiable fixed truth as this would be contrary to the researcher's epistemological position of critical realism. Given that the investigation sought to capture the perspectives of the research participants and gather rich and meaningful data, a qualitative method of enquiry was best suited to the current study.

3.2.4.2 Ethical considerations informing the design

Information needed to be gathered from various agencies involved in the critical incident response (where young people completed suicide, made a suicide attempt or experienced loss). Firstly, the way organisations responded during the critical incident (independently and jointly) was to be investigated. Secondly, possible improvements to existing processes and procedures needed to be explored. As the research was socially sensitive it was important to select appropriate methods to address ethical issues raised in the enquiry.

When investigating a phenomenon which can elicit emotions it is important to employ a method of data collection which allows the researcher to gather information in a safe and structured way. The questions posed in the current study are intended to capture the experiences and the perspectives of the participants, not to establish a fixed truth. Given the sensitive nature of the study, it was necessary to employ a qualitative approach to information gathering where questions asked during the interviews could be tailored to keep the investigation within the confines of an enquiry about systems, processes and procedures rather than the specific events that occurred during the critical incident. This aims to minimise the likelihood that participants would reflect on the emotional aspects of the critical incident.

Importantly qualitative data collection methods and data analysis should follow the guidelines provided by the British Psychological Society (BPS, 2006), and

those proposed by Bryman (2008) and Maxwell (1992) regarding validity and reliability (see section 3.8).

3.2.4.3 Including a psychological dimension

The aim of the current research is to encourage multiple perspectives to help understand a complex situation in order to take action to improve the situation. The use of a qualitative research approach allows the researcher to represent experiences through participants' 'world views' (Checkland and Poulter, 2010).

The present study investigates a statistically infrequent phenomenon relating to a critical incident involving a suicide cluster. Hence, there is limited psychological theory to draw upon. For this reason it was felt that it would be interesting to analyse the subjective experiences of the participants to try and uncover meaning associated with the event. It was perceived that insight of this nature may help advance current knowledge and understanding in the field as well as inform future research.

To draw upon participants' construction of events discourse analysis (DA) was considered (Willig, 2006). Discursive approaches analyse how individuals convey meaning through language, often unintentionally. DA aims to uncover the socio-psychological characteristics of individuals rather than the text structure. There are a number of methodological alternatives to DA ranging from realist perspectives, (e.g. Foucauldian discourse analysis; where language is considered to be a valid and reliable reflection of what really happened) to interpretivist perspectives (e.g. conversational analysis; where language used in interpersonal interaction is subjective). Foucauldian DA tends to focus on the reproduction of meaning at the macro level with reference to power relations, institutions and political issues, such as prejudice (Willig, 2006). Originating from Foucauldian DA is critical discourse analysis (CDA), which views language as ideological. Discourse analysis (DA) is often employed when the epistemological position is a social constructionist one. Ethnomethodological discourse (e.g. conversational analysis) sees 'language as *constituting* social reality' (Hammersley, 1997, p.237) and a way of studying society. Text is

scrutinised at the micro level for interactions such as turn taking and conversation repair.

Decisions about utilising DA are dependent on the research questions and the level at which the researcher is considering the discourse. The questions in the current study place emphasis on the processes and procedures followed during a critical incident, rather than the characteristics of the person(s) and hidden motives. As the current research does not aim to promote social change; Foucauldian DA and CDA were not considered relevant. DA is usually used within naturally occurring conversations and pays attention to the 'way things are said' as well as 'what is being said' (Willig, 2006, p. 93). As such, non-linguistic features of the transcript are important. These aspects have little relevance to the current study which relates to experiences of an event rather than the intentions, functions and consequences of the participants.

Thematic analysis was considered but also discounted. Whilst thematic analysis can analyse data from a range of qualitative methods, the data are interpreted with reference to consistency with previous research and theories. Thematic analysis does not attempt to generate new theory from the interview data. Additionally, thematic analysis encourages the extraction of participants' verbatim reports as data extracts to support the development of themes. In the current study the extraction of participants' verbatim reports were not considered appropriate, particularly with such a sensitive subject matter. Similarly, Ryan and Bernard's (2003, as cited in Bryman 2008), recommendation to examine linguistic connectors, (which is the examination of words such as 'because' or 'since', to identify causal links made by participants) was not thought to be relevant to the current study.

Thematic analysis seeks to consider whether the data gathered is consistent with previous research; thus, background theory is used to analyse the data (Bryman, 2008). For the current study thematic analysis was thought to be restrictive, given that critical incident response is a research area with limited theoretical underpinning. An analysis that has the potential to generate new theory and insight was thought to be more appropriate to the current study.

After careful consideration of the strengths and weaknesses of thematic analysis, this method of data analysis was discounted.

Interpretative Phenomenological Analysis (IPA) was viewed as an option for the current study. IPA analyses data through themes and categories. The analytic techniques involved in IPA are similar to that of grounded theory. The main difference being that IPA, which is philosophical in nature, is designed to gain insight into an individual's psychological world analysing their thoughts and beliefs about an event (Willig, 2006). Whereas, grounded theory allows researchers to study basic social processes which account for a phenomenon. This makes grounded theory less personal and more relevant to the current research. After considering a number of approaches to qualitative data analysis, grounded theory was thought to be the most appropriate for the current study.

3.3 Introduction to grounded theory

Grounded theory can make sense of a unique phenomenon for the purpose of helping others understand the situation better. It has been argued that grounded theory is aligned with a positivist approach and not fully compatible with qualitative methodologies (Willig, 2006). However, grounded theory *differs* from traditional empiricist approaches to data analysis in that it allows theory to be discovered in the data. Grounded theory originated from Glaser and Strauss (1967) and is founded on the inductive method (i.e. moving from specific instances to general concepts). The premise of grounded theory is that 'conceptual understanding needs to emerge from the researcher's immersion in and interplay with the data, rather than from preconceived theories founded on speculation' (Van Vliet, 2008, p. 235).

Within the literature there appears to be different translations of grounded theory, which stem from a lack of agreement about what grounded theory actually is (Bryman, 2008). A debate which has been fuelled since Glaser and Strauss parted company (denoted by Glaser's publication in 1992). The grounded theory approach taken by researchers appears to reflect the epistemological position that they hold.

In her study Charmaz (1997) used grounded theory as a means of interpreting qualitative data, which goes against a positivist approach. Charmaz (1990) introduced a social constructionist version of grounded theory proposing that the categories and theories do not emerge from the data but are constructed by the researcher through an interaction with the data. A social constructionist approach (Burr, 1995) to grounded theory maintains that perceptions are mediated through past experiences, social context and through language. In this sense grounded theory does not reflect social reality but is a social construction of reality. Despite differences of opinion about its origin, grounded theory has the benefit of being able to generate meaning from the data. The 'theory' derived from grounded theory may go some way toward explaining and understanding the phenomenon under investigation (Willig, 2006). However, critics argue that grounded theory does not explain data but categorises data, thus providing a description of experiences rather than a theory (Willig, 2006).

There are two main types of grounded theory, emergent grounded theory and elaborative grounded theory. The benefit of using emergent grounded theory is that it minimises the likelihood that the researcher will impose meaning on the data, as meaning emerges from the data. The approach is 'bottom up' whereby the data constructs the theory rather than 'top down' whereby the data is evaluated against existing theory. However, critics of emergent grounded theory (Charmaz, 1990) argue that theory is never truly 'emergent' as the researcher always plays a role in the construction of theory, firstly, through having some prior knowledge or interest in the research topic and secondly, through interacting directly with the data. This can be overcome to some extent by the researcher taking a reflexive stance to minimise the influence of any preconceived beliefs and values. Glaser (1978) recommends reading broadly around the subject whilst avoiding the literature most closely associated with the research, which may be restricting.

Elaborative grounded theory differs from emergent grounded theory in that it allows the use of pre-existing theory from which to build upon. Of benefit is that theory can be confirmed, disregarded or modified (Auerbach, Salick and Fine,

2006). In the current study, previous theory was limited, yet thought to be informative. Therefore, it was considered that elaborative grounded theory would be the best fit to bring about further theoretical insight into critical incident responses. Elaborative grounded theory is also compatible with qualitative methods, including group interviews. Additionally, as the research focuses on a narrow area, an abbreviated rather than full version of grounded theory was felt to be more appropriate (Willig, 2006), where the original data set is the only focus.

When using grounded theory a hypothesis is not formulated from pre-existing theory but instead questions are asked of the research situation, which help elicit meaning. Research questions for grounded theory can be about processes, experience and cognitions, which are relevant to the current study.

After considering the strengths and limitations of grounded theory, this method was considered appropriate because it allows the researcher to be responsive to the current research situation as perceived by the stakeholders. The analysis of the raw data was considered better served through grounded theory as a means of interpreting participants' constructions of the event.

Consequently, in the current study grounded theory was employed as a data collection method and analysis to gather information about how participants perceived an event and to elicit meaning from the data about how different agencies and organisations respond to a critical incident (question 1) and about the joint protocols and procedures that were followed at the time (question 2).

3.4 Justification for a mixed method approach

Question 3 seeks to find out how existing protocols and procedures informing responses during a critical incident can be improved both within organisations and when joint working. Silverman (2010) maintains that researchers need to make viable choices between the methodologies that are relevant to the research questions. Investigators should start out by asking themselves 'what am I trying to find out and what kind of focus on my topic do I want to achieve?'

(Silverman, 2010, p.12). With this in mind grounded theory was not considered the best fit to answer question 3 of the current research. An analysis of the interview data using a different technique was considered more appropriate that serves the purpose of finding out information to facilitate organisational change. With this in mind a search for the most appropriate analytic technique was carried out to answer question 3.

Soft Systems methodology (SSM; Frederickson, 1990) was considered as an option as the methodology introduces structure and focus. SSM is a traditional approach which offers an analysis of the interview data using a unique technique to bring about purposeful change. Behaviours can be explored through SSM rather than feelings, thus, adhering to ethical guidelines identified within the study (refer to 3.7). The benefit of SSM is that it provides a parameter to the research, limiting the research focus to an investigation of possible improvements to the processes and procedures followed during a critical incident. The distinctiveness of SSM is that it acts as a change methodology by offering a way to improve complex and problematic situations which involve human interaction and decision making.

Taking a Critical Realist perspective it was considered that a wider understanding of a social phenomenon can be gained through integrating research methods. It was felt that by employing a mixed method approach using an analysis which is compatible with grounded theory would result in a better understanding of the research phenomenon than if grounded theory was used alone. SSM will now be introduced in further detail.

3.5 Introduction to Soft Systems methodology

SSM is an approach to systems analysis (Frederickson, 1990). SSM views systems as the interactions between parts which make up the whole. With its roots in systems theory (Campbell, Draper & Huffington, 1988), SSM is a staged based model which maintains that all professional practice takes place within an interactive social context. Taking an interpretivist perspective SSM is underpinned by social constructionism (Burr, 1995), which suggests that there

are multiple interacting perceptions of subjective reality. SSM holds that problematic situations are usually complex because they stem from different people's perceptions or 'worldviews' (Checkland & Poulter, 2010). Users of the methodology support the view that before action can be taken to improve a problem situation the differing perspectives of those involved need to be examined. SSM advocates use of the term 'problem situation' instead of the word 'problem' which may be misleading if one is to believe that a solution is to be found. The aim of SSM is not to generate a solution to a problem but to find 'accommodation' amongst different people with different worldviews to the proposed changes (Checkland & Poulter, 2010). It can be used to develop actions to improve a problematic situation. A key assumption of SSM is that people always try to act with purpose and intention (Checkland & Poulter, 2010).

In contrast to a 'hard' systems approach which utilises quantitative data, SSM analyses 'soft' systems which consider problems situations in which human perceptions, behaviour and actions are the main focus. One advantage is that it is compatible with a qualitative approach to data collection, which is in line with the current study. SSM is often employed for service evaluations and audits, which is not dissimilar to the present research. A further benefit of SSM is that it lends itself to group activities. For the current study group interviews were considered the most appropriate interviewing technique from which to gain a collective view.

SSM follows a process which initially involves exploring a perceived problematic situation to gain a better understanding, then progresses through a series of stages to develop actions to improve the situation. In the current study SSM was considered an effective way of gathering information to draw on the different perceptions of those involved in the critical incident. As part of the process SSM invites the researcher to compile a rich picture to represent the transcribed interview data, from which conceptual models can be constructed to question the situation. Of benefit to the present study was that SSM introduced a structure to progress discussions with the various organisations about future actions, with the intention of bringing improvements to the current system to

inform future critical incident responses. Another benefit of using SSM is that it allows the various organisations to use a common framework of shared language and concepts which can be enabling. For the present research this was considered important in order to facilitate interagency collaboration and joint working.

SSM activities can be interpreted through social constructionism (Burr, 1995) and systemic points of view (Campbell, Draper & Huffington, 1988). Systems theory and social constructionism underpin SSM and are two relevant theories which can be drawn upon. Systems theory (Campbell et al., 1988) maintains that all professional practice takes place within an interactive social context. The notion that relationships are interactive and reciprocal helps inform systemic practitioners such as EPs about how to engage in work around systems change (Pellegrini, 2009). Through adopting systemic theory and by taking an holistic approach EPs can ask questions and identify key change issues to produce 'deep strategic change' (Gameson, Rhydderch, Ellis & Carroll, 2003, p.102). In respect of the critical incident, it is anticipated that interactive exchanges will have taken place between the school as an organisation, the community and outside agencies during the crisis. The theory proposes that a change in one part of the system can produce a change in another part of the system (Campbell, Draper & Huffington, 1988). For example, the way vulnerable pupils were supported during this time may have an impact on the community itself. The theory provides a framework for understanding multi-agency working and decision making during complex and ill defined problem situations.

Systemic thinking has been influenced by the social constructionist school of thought that maintains 'reality', as observed by the researcher, is subjective and open to many different interpretations (Pellegrini, 2009). Social constructionism (Burr, 1995) maintains that different people hold different constructions of reality, which can influence their interpretation of a problem situation. The theory proposes that these different perspectives can influence decision making at different levels

Critics of SSM argue that the researcher is not independent and that his / her involvement may affect the situation. Bearing this in mind the researcher should always aim to remain impartial and objective taking into consideration those involved in the problem situation. Advocates of SSM recognise that the researcher should not impose a structure or a solution to the problem situation nor be viewed as the 'expert'. The role of the researcher in the present study was to act as a change agent to support a system involved in critical incident responses. Thus, the researcher did not contribute to the debate about desirable and feasible changes (at stage 6); any subsequent decisions about actual changes were made by the stakeholders.

SSM has shortcomings; there are limited guidelines about how a collaborative outcome (accommodation) is achieved (Christis, 2005) and about how stakeholders can take action to improve problematic situations. In addition, there is no guarantee that the identified changes will be put into practice. There may be barriers to implementing the changes and in some cases individuals or organisations may not want change. Checkland and Poulter (2010, p. 240) acknowledge that 'the characteristics and the abilities of the people carrying out the investigation; the characteristics of the situation as perceived by those who care about it; and the methodology itself' are all factors which influence the outcome of SSM.

After considering the strengths and the limitations of SSM, this methodology was considered appropriate for the current study. The benefit of employing SSM was that the method allowed the researcher to determine what joint protocols and procedures were followed during a critical incident, both within and between agencies. Furthermore, SSM is a positive solution orientated approach which was used as an analysis to identify opportunities for organisational improvements. SSM employed a positive approach to identify opportunities for improvement in service delivery. SSM also provided enough flexibility to examine a phenomenon not previously studied before. The aim of SSM is to help the researcher understand a complex situation, to encourage multiple perspectives and to take appropriate action to improve the situation.

To answer question 3 of the current study the raw data are better served with an analysis using SSM. SSM is designed as a change methodology which specifically relates to question three. SSM aims to find out, from the perspective of participants, how to improve current processes and procedures followed during a critical incident.

As far as the researcher is aware utilising grounded theory in conjunction with SSM is both novel and innovative as a mixed method approach. Though grounded theory and SSM provide different approaches to data analysis they can be considered complementary in that grounded theory 'helps researchers explain how people behave, change and interact in the context of specific phenomena and concerns' (Van Vliet, 2008, p. 235), whereas SSM brings about improvements to current organisational structures and processes. For the current research it was felt that grounded theory would enhance the study through finding out how organisations respond during a critical incident and by generating theory as there is limited research within the field of critical incident response. This, in turn, would enrich the research study by adding a psychological dimension.

In summary, to answer the research questions two levels of analysis were used, one was intrinsic to grounded theory and the other to SSM. A grounded theory approach was used to answer question 1 and 2, as the data were better served through grounded theory as a means of interpreting participants' constructions of the event. The raw data were better served with an analysis of SSM to answer question 3. SSM is designed as a change methodology which specifically relates to question 3. As SSM is process driven, emphasis was placed on behaviours rather than meaning attributed to an event.

PART TWO

This section provides information about recruitment of participants, the organisations involved in the study, general ethical considerations and how these were overcome and the procedures. How the data were collected and analysed through grounded theory and SSM are also provided.

3.6 Participants: Selection procedure, exclusion/ inclusion criteria

SSM required the 'rich picture' to portray information gathered from professionals within organisations linked to the multi-agency response to a critical incident involving a suicide cluster, which took place during 2008 and 2009 in one LA in Wales. Purposive sampling was used to gather information from individuals in the settings where the processes being studied occurred (Silverman, 2010). Participants were excluded if they were not involved in the critical incident response as they would not be able to report on relevant past professional experiences.

The period 2008 to 2009 was specified in the study to inform participants of the timing of the critical incident. This time frame was considered relevant as there was recognition at a strategic level during the spring term 2008 that the authority was facing a crisis. As a consequence the LA activated the Bronze Operational Group as part of the emergency response to a spate of suicides in the area. There was no specified 'end' date to the critical incident but there were signs that services were resuming normal day to day activities during 2009.

Due to the small scale nature of the study and due to ethical constraints the organisations involved in the current study were restricted to those directly involved at an operational level supporting pupils within the school setting. Agencies included the EPS, the counselling service and professionals working within three comprehensive schools within the LA. Other organisations involved in the critical incident response, such as CAMHS, were not included as the research focus was the LA and not Health. Each group interview comprised of a small group of professionals working within each organisation. These included EPs, counsellors and members of the teaching profession. Professionals were not excluded on the basis of age, gender or ethnicity.

Due to the nature of the investigation, which was emergent, the exact number of group interviews were dependent on the number of volunteers. There was no

predetermined sample size. Six group interviews were conducted with a total of twenty one participants contributing. Each organisation was represented by at least four volunteers, apart from one interview where only one person attended. The researcher sought views from as many participants as possible from the EPS, counselling service and from schools. All organisations contributed to the critical incident response, though their structure and roles and responsibilities differed, which will be briefly outlined.

3.6.1 Educational psychologists

Participants from the EPS were employed by the LA at the time of the critical incident. The educational psychology team served the whole of the LA and all participants had direct experience in responding to the critical incident. Some participants were not the link EP for the three selected schools in the study, but had either visited one or more of the schools in response to the critical incident or were involved in systemic work associated with the response. A total of 5 EPs were interviewed.

3.6.2 Counsellors

Counsellors were employed by the LA under the umbrella of Youth Service. At the time of the critical incident they worked directly in schools within the LA. All participants had worked within the comprehensive schools at the time of the critical incident. Some counsellors had worked directly in at least one of the three selected schools or had been involved in similar work within neighbouring comprehensive schools. A total of 4 counsellors was interviewed.

3.6.3 School staff

Three comprehensive schools were selected on the basis of the highest number of referrals made to the EPS for involvement at the time of the critical incident relative to other comprehensive schools within the LA. The schools were situated within a mixed urban / rural area in Wales. Participants involved in the group interviews were key personnel including teaching staff and non teaching

staff. Exact details of participant's job titles were not recorded to maintain confidentiality. A total of 12 school staff were interviewed from the three schools.

3.7 General ethical considerations

Full consideration was given to the relevant ethical guidelines of the British Psychological Society (2006) Code of Ethics and Conduct. Following completion of the research proposal an ethics proposal was written and submitted to Cardiff University, School of Psychology Ethics Committee.

Consideration was given to the socially sensitive nature of the research during the planning of the interviews and during data collection. The data were collected confidentially and staff had an opportunity to withdraw their data up until it was anonymised.

To protect the participants the questions focused on the processes and procedures in place at the time of the critical incident, rather than the event itself. As the topic of discussion was sensitive in nature the researcher provided details of LA support groups and counselling services to all participants directly following the interviews in case they wished to make contact.

The researcher worked as an EP within the LA at the time of the critical incident. As such, the researcher was part of the social setting being investigated. A potential ethical issue was that once the investigation was underway feelings and emotions may have been evoked in the researcher. To overcome ethical issues of this nature Lakeman and FitzGerald (2009) recommend within their ethical guidelines that researchers make use of supervision with experienced professionals for the purpose of problem solving and debriefing. Peer supervision should be an activity paramount to the practice of the EPS to safeguard members of the team, which should be accessed on a regular basis. Additionally, the researcher had the same opportunity as the participants to access LA support groups and counselling services.

3.7.1 Authorisation for the research

A clear rationale was given for why and how participants were going to be selected to take part in group interviews. The research proposal was subsequently approved by Cardiff University, School of Psychology Ethics Committee.

Prior to the commencement of the study the proposal had been approved by the LA as it was viewed to tie into the LA corporate plan on suicide prevention and reduction. The LA felt that the research would provide insight into the organisation of the setting, providing a service evaluation whereby information could be used in a positive way to improve existing services.

Initially, as a matter of courtesy the research proposal was discussed with the service manager for the EPS, Counselling Service and Head Teachers of three comprehensive schools in the LA to establish whether they were willing for their staff to participate in the research and whether they wished to participate in the research themselves. This was followed up by a letter containing an outline of the research asking more formally for their permission (Appendix A,B,C).

3.7.2 Gaining informed consent and participants' information arrangements

Undertaking research through informed consent is paramount in social research. Informed consent constitutes a key ethical principle. According to Bryman, (2008, p. 694) 'research participants should be given as much information as might be needed to make an informed decision about whether or not they wish to participate in a study' Given the socially sensitive nature of the research it was important to be clear about the aims of the study and about the participants' involvement.

Having gained permission from the various organisations for staff to participate, the service manager from the EPS, Counselling Service and the Head Teachers were asked to distribute a second letter to staff (who had been involved in the

critical incident during 2008 to 2009) providing them with details of the research asking them if they wished to participate (Appendix D,E,F). Individuals expressing an interest were then contacted by the researcher.

Prior to the interviews, professionals working within the different organisations and school staff were asked to give informed consent to partake in the study by signing a consent form (Appendix G, H).

3.7.3 Debrief

At the end of the group interviews participants were given a debrief sheet (Appendix J). During debriefing all participants were provided with a LA booklet providing details of support groups and counselling organisations for them to make contact at a later stage if they so wished (to maintain anonymity the booklet is not presented in the appendices because the LA and support workers can be identified).

The arrangements for SSM stage 6 took place under the jurisdiction of the LA. Information about SSM stage 6 was sent to the service managers for the three organisations (Appendix K). Participants were informed that the research investigation had ended at that stage as the research objective was to define the action rather than actually carrying it out. At stage 6 SSM before the meeting began participants were asked to give his/her consent to the researcher by signing a consent form (Appendix L). At the end of the meeting participants were given a debrief sheet (Appendix M).

3.7.4 Confidentiality and anonymity

During the interviews the names of the participants were not recorded by the researcher and the responses of the participants were collected as a group, confidentially. All data were stored anonymously it was not possible for information to be traced back to the participant or their organisation, even if there was only one participant. The researcher requested that information remain confidential within the group and that the statements and the details of

what people said during the interview would not be disclosed. However, the participants were also made aware that there was no guarantee that the information would not be discussed outside of the group and that this would be dependent on the integrity of the participants. The interviews were tape recorded, then transcribed. Once the data had been transcribed it became anonymous, where it was impossible to trace back the data to any one individual.

As more than one school contributed to the research, group interviews involving school staff were allocated a random number so that it would not be possible for the information to be traced back to any particular school. The data was then categorised under the general heading of 'schools'. The group interviews for the EPS and the Counselling Service were categorised under their respective organisation names. This ensured that whilst the participants remain anonymous their respective organisations could be identified for the purpose of developing a rich picture to capture the relevant systems and processes that were in place at the time of the critical incident. Once the information had been transcribed, the original tapes holding the recordings of interviews were wiped clean and destroyed. Following this the data were analysed using grounded theory and then SSM.

The rich picture was compiled from the transcribed data. It provided a pictorial representation of the process and procedures taken by the different organisations and the interaction between them. The rich picture contained confidential information and was not shown to participants and kept securely in a safe place.

During SSM stage 6, service managers and Head Teachers were invited to attend a meeting to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible, desirable and relevant changes identified from the rich picture to the current processes and procedures. These were recorded in the form of an action plan and conceptual model. To respect anonymity names of individuals and organisations were not linked with the proposed changes identified by SSM. The information provided at the meeting

by the service managers and the Head Teachers remained confidential and was held in a secure place with only the name of the services recorded rather than the person in attendance.

3.8 Validity and reliability

3.8.1 Validity

Bryman (2008) defines validity as ‘whether an indicator (or set of indicators) that is devised to gauge a concept really measure that concept’ (p. 151). Arguably, it is easier to demonstrate validity within quantitative research as the measurement data are quantifiable and can be judged against a given criterion. Demonstrating validity in qualitative research can be problematic. This is mainly due to the subjective nature of the participants’ responses as well as the constructions and biases held by the researcher when interpreting them. Nevertheless, it is important that qualitative researchers strive to maintain validity within their investigation, which is fundamental to all good quality research.

In qualitative research, validity can be seen as a matter of degree rather than an end state (Cohen et al., 2007). Maxwell (1992) proposed that ‘understanding’ is a more appropriate term than validity in qualitative research. This view appears to reflect that of social constructionism which maintains that understanding, meaning and inferences differ between individuals but are considered equally valid as they are drawn from his or her perspective, or subjective reality. Maxwell (1992) reasoned that gaining an understanding of the perspectives of others about the world is sufficient in qualitative research.

Maxwell (1992) proposed that five indicators can be applied to qualitative research to demonstrate ‘understanding’, which will be further explored:

- ***Descriptive validity:*** The researcher’s account of the situation is as accurate as possible without distortion.

Bryman (2008) agrees that research has high validity if the researcher accurately represents the features of the phenomenon in question. Personal interests and values can influence research findings. As the researcher was employed as an EP within the LA the time of the critical incident there was potential for impartiality and bias. These issues were addressed as much as possible through the researcher taking a reflective stance. To enhance internal validity there was a great deal of role reflection by the researcher during the process and throughout the research in order to reduce the likelihood that meaning was imposed on the data.

- ***Interpretive validity:*** The ability of the researcher to interpret and reflect the perspectives of the research participants.

To improve validity Banister et al. (1994) suggests that an investigation can be considered from a number of different perspectives. Through the use of exploratory questions perceptions were gained from three organisations within the LA (Counselling Service, EPS and schools), all of which had experienced the same event. The questions were open ended and the researcher clarified the experiences of the participants by reflecting back and checking that any implied meaning had been understood. To ensure accuracy in interpretation Willig (2006) proposed that there should be opportunities for any implied meaning held by the researcher to be called into question. This would ensure that whilst the researcher will inevitably bring his / her own theoretical constructions to the research these would be appropriately constrained so as not to discount those of the participants. Consequently, to improve validity additional feedback was obtained from service users during phase 6 of SSM, which provided opportunity for any assumptions or preconception held by the researcher to be challenged. Furthermore, at this stage the participants could confirm whether the interpretations resonated with their own experiences.

- ***Theoretical validity:*** The extent to which the research explains the phenomena from the researchers' and participants' theoretical constructions.

The researcher's theoretical constructions were clarified during the research design and the research was carried out in accordance with the researcher's ontological, epistemological and methodological position. Although the sample size was small, the participant's views were considered typical of the professionals involved in the critical incident response within the LA. Interview questions were open ended and non directive to elicit the unique views of the participants. Responses were considered relevant and valid

- **Generalisability:** The extent to which the theory generated from the research can help develop an understanding of other related events.

In qualitative research the findings generalise to theory rather than to populations. To ensure that theoretical inferences derived from the data are generalisable to other settings grounded theory was utilised, which served to not only validate any existing theory but to provide an opportunity for new theoretical insights to emerge to explain similar phenomenon. After the data had been analysed an independent psychologist was asked to consider whether the categories generated from the data were meaningful. This was to counteract any possible distortion due to preconceptions held by the researcher. It is acknowledged that generalisation of the findings of the current research to other critical incident responses can only be tentative as each critical incident will have its own set of defining features.

- **Evaluative validity:** The extent to which the research is evaluative rather than descriptive.

The researcher thoroughly evaluated all data using appropriate methodology pertinent to the research questions. For question 1 and question 2 grounded theory (Charmaz, 1990) was used to elicit meaning attributed to the event by the research participants. For question 3 SSM (Frederickson, 1990) was utilised which generated change issues through drawing upon the experiences of the participants. Arguably, the investigator may impose her evaluation upon the

research which may compromise validity. However, through gathering rich data and by rigorously following step by step processes during the analysis the findings are more likely to be meaningful and useful.

3.8.2 Reliability

Reliability has been defined as ‘the degree to which the measure of a concept is stable’ (Bryman, 2008, p. 698). External reliability denotes ‘the degree to which a study can be replicated’ (Bryman, 2008, p. 376). In research the concept validity and reliability are closely related because validity presumes reliability. As with validity the issue of reliability appears to be less relevant to qualitative research than quantitative research as it is recognised that the experiences and behaviours of participants differ over time and place. However, the study is reliable in the sense that participants in the current study are considered representative of those involved in the critical incident response within the LA, one may hypothesise that similar themes will emerge should a similar event occur in the future.

3.9. Design of the interview questions

During group interviews open questions rather than closed questions were asked using a number of predetermined questions and prompts (Appendix N). The first question asked about the structure of the organisations during normal day to day operations. The second question focused on how different agencies responded during the critical incident, within their own internal structure and when joint working. Finally, for question 3 participants were asked and how the processes and procedures could be improved, both within their organisation and when joint working.

The interview questions were asked in a very open-ended way. This allowed respondents to feel more relaxed and answer in their own words, which increased the likelihood that the data came from the participant’s experiences. This enabled categories to emerge during the interviews. The prompts were neutral bringing participants back to the processes and procedures followed

during the critical incident in order to steer respondents away from recalling a specific incident or sad event. Participants were informed that there were no right or wrong answers and that the intention was to find out their unique views. A non judgemental, neutral approach was taken by the researcher.

Research question 3 was answered via the SSM framework, which relates to the structure of the organisation, such as physical layout and departmental structure and the processes adhere to. In order to reduce any emotional responses the interview questions placed emphasis on the processes and the procedures followed during the critical incident rather than on any specific incident.

3.10 Procedure

Initially, a courtesy telephone call was made to the Principal Educational Psychologist, the Manager for the Counselling Service and the head teachers from three comprehensive schools within one LA in Wales, to briefly outline the nature of the study. Following this a letter was sent to the respective service managers and the head teachers providing detailed information about the study to request permission for their organisations to be involved. Permission was gained from all organisations, after which a letter detailing the study was distributed amongst professionals within the organisations to find out whether they wished to participate in the interviews. All of the organisations contacted were willing to participate in the study.

Employees expressing an interest were provided with information about the research and the study was explained to them. Participants who wished to become involved gave informed consent and on an agreed date arranged by the service manager or head teacher interviews were undertaken with the professionals. Interviews comprised of no more than 6 participants in a group. One participant was interviewed individually (not being available on the day of the service group interview). The participants were informed that the purpose of the study was to learn about their personal experiences. Special care was taken by the researcher to avoid directing the discussion.

Information was gathered through tape recordings. No handwritten notes were taken. The names of participants were not recorded to respect anonymity. Participants were informed that they could withdraw their information at any time during the interviews without giving a reason, after which they would be unable to withdraw their information. The group interviews took place in a quiet room either at the premises of the respective organisation or if this was not possible in a LA venue within the locality. All interviews were conducted during the summer term 2011.

At the end of the interview process participants were debriefed. Information about the study was provided as well as the contact numbers of the researcher and her supervisor. This was to ensure that participants had the opportunity to ask questions or request further information. All participants were given details of LA support groups and counselling services at the end of the interviews.

The interview data from the EPS and the Counselling Service were categorised under their respective organisation names. Schools were allocated a random number so that neither the participants' name nor the name of the school in which they worked would be recorded.

After the data had been analysed a letter was sent to the service managers and Head Teachers to ask them if they wished to attend a meeting at stage 6 of SSM to discuss the results of the study and to consider desirable and feasible changes to the processes and procedures that were in place at the time of a critical incident. The letter provided details of the purpose and objectives of the meeting. Participants who wished to contribute to the meeting gave informed consent.

At stage 6 of SSM service managers and head teachers were informed that the researcher no longer had an active role in the process and that the research study had ended at that point. At the close of the meeting at stage 6 of SSM participants were debriefed.

3.11 Data collection

3.11.1 Data collection strategy

Data collection was undertaken through group interviews which were tape recorded then transcribed and later analysed using grounded theory and SSM. The data were collated and transcribed in the same way irrespective of whether interviews were organised in groups or when only one participant contributed.

Structured interviews were considered as a way of gathering information from participants. The disadvantage of this method is that questions are usually closed ended and very specific (Bryman, 2008). Consequently, the range of answers offered by a respondent would be restricted. In order to answer the research questions from the viewpoint of the participant it was felt that broad general non-directive questions rather than a number of specific questions would be more suitable to allow elaboration of response.

Focus groups were also considered but discounted. The intention of focus group interviews is to steer participants to comment on and respond to contributions made by other members of the group. Focus group activities are not appropriate when subject matters are sensitive (Willig, 2006). Open ended interviews with prompts, where necessary, was thought to be a better option for the current study.

Group interviews were deemed appropriate for the current study as they are compatible with both grounded theory analysis and SSM. Group interviews offer opportunities for open-ended discussions whereby participants are able to provide their own point of view rather than be directed by the researcher (North et al., 2010). Further benefits are that participants also have the opportunity to interact with each other rather than with the interviewer and experiences can be jointly constructed.

Group interviews allowed for information to be gathered collectively from a number of professionals within each organisation, thus providing a shared

rather than an individual view. The information relating to the recent critical incident where young people completed suicide, made a suicide attempt or experienced loss was obtained from various agencies involved in the response. Interviews were undertaken mainly in groups, apart from one exception where a group could not be formed and only one person attended the interview.

3.12 Analysis of data using Grounded Theory and SSM

3.12.1 Data Analysis

This research used grounded theory and soft systems methodology as a means of analysing the data. For questions 1 and 2 the transcribed interviews were analysed using a modified version of grounded theory derived from Chamez (1990). This constitutes part one of the data analysis. In the second part of the data analysis, for question 3, the transcribed interview data were analysed using SSM.

3.12.2 Analysis part one: Grounded Theory

To answer question 1 and 2 the transcribed interview data were analysed using a grounded theory approach following the steps provided by Van Vliet (2008). An evaluation of grounded theory has been documented earlier (see 3.3). In line with grounded theory the research participants were central and representative to the phenomenon. Theoretical sampling was possible in the coding of data but not in the collection of data. In other words, the original sample was not added to by seeking out additional participants to interview to generate new insights, as saturation had already occurred within the selection process. Due to the small number of participants, theory based data selection was not possible (Rennie, Phillips & Quartaro, 1988).

The research questions have a narrow focus due to ethical constraints, which inevitably restricts what can be found out. Arguably, this may shape the process and the findings bringing about 'discovery' rather than theory (Pidgeon & Henwood, 1997). Due to the socially sensitive nature of the study it was

agreed that the words and statements made by participants during the interview would not be used verbatim in order to maintain anonymity.

Analysis of the data were based on the procedures adopted by Van Vliet (2008). In the first instance the researcher read the transcripts a number of times to become familiar with the content of the interviews. The transcripts were analysed systematically starting in the order of the first interview, followed by the second and so forth. Examples of participant responses were not made available to respect anonymity, as it was agreed that the exact statements and details of what was said would not be disclosed by the researcher because for the purpose of this study information would only need to be grouped into categories. In line with Van Vliet (2008) the following stages of Grounded Theory were followed:

Open coding: descriptive labels were generated from the first interview by taking words, phrases and sentences one at a time and analysing them. The second interview was coded and then all subsequent interviews. Cohen et al. (2007) note that during transcription there is potential for distortion of data, as one set of rules (oral and interpersonal) are translated to another set of rules (written language). Judgement must be made by the researcher about the usefulness of the transcription which can not be viewed as 'accurate' or 'correct', having been removed from the original time and social context, but merely interpreted or socially constructed by the analyst. The paralinguistic features of the interviews were not transcribed as these elements were not viewed as central to the analysis. Examples of the original transcript were not included to maintain confidentiality. This was to ensure that the participants could not be identified from the statements made.

Categories: Categories (emerging theories) were assigned which made sense of the data. Properties of the categories were identified as well as subcategories. Through a constant comparison method of analysis higher level categories were also identified.

Central category: the transcripts were examined for the frequency of categories occurring and their relationships. A central category emerged which had high frequency of mention representing the highest level of abstraction. The central category brought together categories in a coherent way.

Memos: a table was developed from memos compiled during the process. The memos helped group together similar categories and properties. Memo writing helped organise ideas in a coherent and meaningful way when eliciting theory from the data. The memos contained the words and statements made by the participants, which were not disclosed by the researcher, for ethical reasons. For the purpose of the current study the interview data were grouped into categories (see Appendix P).

In order to provide a comprehensive answer to research question 1, about how different agencies and organisations respond during a critical incident, participants from each of the organisations (the EPS, Counselling Service and schools) gave an account of the structure of their organisation, such as communication patterns, hierarchy, internal processes and procedures. Participants were then asked how their organisation responded during the critical incident.

To answer the second research question, regarding joint protocols / procedures followed during a critical incident, perspectives were gained from the participants from three organisations about collaborative working during the critical incident. Through analysing the transcribed interview data it could be determined whether staff from the three schools responded in a similar or different way.

3.12.3 Analysis part two: SSM

SSM (Frederickson, 1990), was used to analyse the interaction between various agencies response to a critical incident and the levels of response. Information was gathered from organisations regarding the systems in place for supporting young people during a critical incident. The researcher developed a pictorial

representation through a rich picture (see Appendix Q) to fully capture the climate within the problem situation. This was considered more advantageous than a linear prose. The researcher chose not to show the rich picture to professionals or service managers. It was felt that the rich picture may detract from the solution focused / action orientated approach taken during the discussion stage where an action plan comprising of feasible and desirable changes are debated. If the rich picture had been shown, emphasis may have been placed on the problem situation, such as perceived weaknesses and service gaps rather than on actions to be taken.

During stage 6 of SSM the service managers and head teachers were invited to contribute to the debate about proposed feasible and desirable changes which had been identified from the research. With SSM 'some studies have been ended after defining the action, other studies after implementing it' (Checkland and Poulter, 2010, p. 207). In the current study it was agreed that the research was complete after the actions had been defined at stage 6. This end point had been identified at the outset of the study as the researcher was aware that the implementation of any actions may lead to further insight, which in turn may lead to further enquiry, and so on. This would make the study unwieldy because the process could repeat itself with different aspects of the same problem situation, or even a different problem situation arising.

3.12.3.1 Stages of SSM

SSM comprises of seven stages to be followed which inform each other and input into the final outcome. Initially the client, the problem solver and the problem owner were identified as follows:

Client: EPS Service (they have instigated the study to happen).

Problem solver: the researcher

Problem owner: EPS, Counselling Service and school staff. (They all hold different perspectives).

After identifying the roles of professionals the stages of SSM were followed as outlined below:

Table 1: Stages of SSM (Frederickson, 1990)

Stage	Description of the process
Stage one The problem situation	Information gathering and transcribing. Considering roles, norms and values.
Stage two The situation analysed	Producing a 'rich picture' containing 'hard' information (for example facts and data) and 'soft' information (judgements) to represent a structure and a process and an interaction between them.
Stage three Relevant Systems and root definitions	Generating ideas from the rich picture to produce a number of relevant systems to bring about improvement to the current processes and procedures. Providing a root definition of 'issue based' or 'primary task' relevant systems by clarifying 'PQR' (<i>what</i> the system does <i>how</i> it does it and <i>why</i>).
Stage four Conceptual model	Building conceptual models representing the activities of the system which need to be monitored and controlled. Within the models describing through the use of verbs what needs to be done rather than specifically how it is to be done. Acknowledging constraints of the system such as resources.
Stage five Comparison	Comparing the conceptual model with reality in stage two to look at the differences and why they exist. Drawing up an agenda of activities in the conceptual model and the real world. Noting any elements of the conceptual model currently operating.
Stage six Debate on feasible and desirable change	Relaying proposed changes and their relevance, desirability and feasibility to professionals who have the decision making capacity to facilitate change. Repeating the process with another identified system of change if the proposed system is not considered relevant or

	desirable.
Stage seven	Agreeing to the changes being implemented. Monitoring
Action to improve	and reviewing the changes agreed in stage six with the
the situation	relevant professionals.

3.12.3.2 Elaboration of SSM

Stage one: the problem situation.

Information was gathered through six group interviews which took place during June, July and August with members of the EPS, Counselling Service and professionals working within three comprehensive schools. The participants attending the groups were the professionals within the organisation who were involved at the time of the critical incident which took place during 2008 / 2009. The questions asked during the group interview elicited information about the processes followed at the time of the critical incident and about current and perceived future issues. Tape recordings were transcribed, after which the tapes were destroyed and the transcribed data stored securely.

Stage two: The situation analysed.

The rich picture portrayed 'worldviews' from school staff, EPs and counsellors in a visual form gathered from the group interview transcripts, which captured the structures, processes and current and perceived future concerns. The interaction between the processes (activities which were in a state of change) and the structure (which was static, such as departmental structure, physical layout) were depicted in the rich picture as the 'climate' within the organisation. Comparisons were made to see whether the process fitted the structure. The rich picture provided factual (hard) and subjective (soft) information, but did not describe social roles and what would be expected from these roles.

The rich picture was not shown to any of the participants; it was kept securely and remained confidential. The participants were unaware of who contributed to the information. The data (transcribed group interviews and the rich picture) were held as a generic data set under the category of LA organisations.

Stage three: Relevant systems and root definitions

A number of relevant systems were extracted from the rich picture to consider improvement to the current processes and procedures followed during a critical incident. Issue based systems focus on specific issues (such as topic of concern to someone in the situation) and seek to address them in some way. Primary task relevant systems are attempts to describe the essential nature of the fundamental task to be carried out by the organisation under study. Issue based systems and primary task systems were selected on the basis that the concerns were visible in the rich picture and also highlighted by at least two different organisations.

Four root definitions were generated in the form of statements, which described the transformation process from the current state to the possible preferred state or outcome. Each root definition contained the following six elements in CATWOE

C: customers (victims or beneficiaries of the system) cause the intervention to happen.

A: actors carry out the intervention using SSM

T: transformation process based on W

W: worldview belief system behind the transformation process

O: problem / issue owner, those who could stop the process

E: environmental constraints

Stage four: Conceptual models.

Four conceptual models were constructed from the root definitions (see Figures 1 - 4). These were presented in a diagram but not shown to the participants. Instead the information contained within each model was later produced in the format of an action plan, which provided structure to the discussion at stage six. Each conceptual model was tested using a 'formal systems model' which provided a check to the validity of the model.

Stage five: Comparison

Activities in the conceptual models were compared with the problem situation in the rich picture to produce an action plan (see Appendices Q, R, S & T).

Stage six: Debate on feasible and desirable changes

At this stage service managers from the EPS and the Counselling services and Head Teachers attended a meeting to debate / discuss proposed changes outlined in the action plan and their desirability and feasibility. The current study ended at this stage as the research was complete.

Stage seven: Action to improve the situation

At this stage the researcher was no longer involved in the investigation, as the research study ended at stage six.

3.13 Summary: Design of the study

This chapter has considered the epistemological positions of positivism, interpretivism and critical realism. Justification has been provided for using a qualitative design with a mixed method approach utilising grounded theory and SSM. Procedural and participant information have been provided. As far as was possible relevant methodological concerns and ethical issues were addressed. Data analyses using the method adopted by Van Vliet (2008) for grounded theory and the method by Fredrickson (1990) for SSM were reported.

4 FINDINGS

4.1 Introduction to the chapter

For question 1 and 2 the transcripts of the group interviews were analysed using grounded theory analysis (Van Vliet, 2008). The exact words and statements made by participants were not made available to respect anonymity. Information showing the emergent categories *only* can be found in Appendix P. SSM was utilised to answer question 3 of the study. The results chapter is divided as follows:

- findings relating to question 1 - How do different agencies and organisations respond during a critical incident? (Section 4.2);
- findings relating to question 2 - What joint protocols / procedures are followed during a critical incident? (Section 4.3);
- summary of findings relating to question 1 and 2 using grounded theory analysis (section 4.4);
- findings relating to question 3 - How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working? (Section 4.5);
- summary of findings relating to question 3 using SSM (Section 4.6),
- Summary results section (Section 4.7).

4.2 Findings relating to question 1

The following findings were derived from the question:

‘How do different agencies and organisations respond during a critical incident’?

4.2.1 Schools

The categories that emerged during interviews with school staff were ‘coping in crisis’ as a central category, with categories, disequilibrium, managing threats to organisational structure and controlling communication. Each category has at least one subcategory.

4.2.1.1 Coping in crisis

The most significant event that a school can experience is a critical incident. A critical incident occurrence is often sudden and unexpected, marked as an event which takes everyone by surprise. As such, the organisation is thrown into chaos. There are significant challenges faced by school staff, particularly when the critical incident involves a suicide cluster.

4.2.1.1.1 Disequilibrium

When responding to a critical incident the school organisational structure is thrown into a state of disequilibrium which places enormous pressure on the capacity of the organisation to cope. Working at a level of high intensity, where there is much uncertainty and where the emotional impact is great can be physically and emotionally exhausting. An organisation experiences disequilibrium when, there is a loss of control and when having to cope with threats to knowledge and skills.

School organisations are thrown into disorder and turmoil when experiencing a critical incident and there is a loss of control. Normal patterns of working are abandoned and the organisation reacts to a state of emergency. Compounding this, a critical incident involving a suicide cluster emotionally impacts on school staff, pupils and the community. The pressure and stress endured by people during periods of chaos can take its toll, both physically and emotionally. Participants reported that children and young people were feeling anxious and

in a state of shock, consequently panic set in around the school. The unfolding events encountered by school staff during the critical incident were intense and relentless. From the perspectives of school staff the situation felt unmanageable at times, which worried them. The critical incident was taken very seriously in terms of the affect it had on pupils and members of staff.

When coping with threats to knowledge and skills during times of uncertainty, professionals may feel disempowered and helpless. When professionals perceive that they lack the relevant knowledge and skills they look to others whom they view as 'experts' as a source of information to guide their actions. Participants described their experience as learning as they went along in the form of trial and error. Given that every crisis is unique, school personnel were presented with a new set of circumstances and experiences. Participants reported that they needed some form of endorsement to ensure that they were make the right decisions and believed that the support from specialist agencies would provide them with this. Participants from one school indicated that their actions were based on prior experiences, as a result they presented with higher levels of confidence and their perceived need for outside agency support was considerably lower.

4.2.1.1.2 Managing threats to the organisational structure

In order to maintain stability during a critical incident, professionals strive to work together to support each other. When faced with an emergency, adjustments are made to normal working practices to respond to real and perceived threats to the organisation. Roles and responsibilities change to meet demands. Participants' conveyed how they were able to manage at a time of crisis, restructure through the reallocation of roles and responsibilities and collaborate with others within the organisation.

Working under intense pressure when managing crisis allows little time for reflection, evaluation or planning. Feeling unprepared and not being able to predict or plan ahead leads to uncertainty, which can heighten anxiety. As a consequence, when managing a crisis, approaches are reactive rather than

proactive. Participants used general terms such as, dealing with, reacting to, managing and coping, to describe how they responded intuitively to the critical incident.

During a critical incident there is a need for service reorganisation, normal patterns of working are not functional. The line management system in schools during periods of normal working practice are organised in hierarchical way, made up of leadership stemming from the headteacher down to senior management, teachers, pastoral staff, support workers and non teaching staff. Each professional has designated roles and responsibilities. Professional boundaries are less clear when responding to an emergency and roles and responsibilities change. Participants reported that during the critical incident, routine duties were often suspended or reallocated to another worker. Timetables were abandoned and priorities were placed on meeting the needs of the pupils. School staff described the organisational response as being spontaneous, based on the unique set of circumstances that were encountered on a day to day basis. Procedures were flexible enough to cope with the daily pressures.

When an organisation is under threat, professionals work together collaboratively to protect and support each other. During the critical incident there was opportunity for collaboration and coordination within the school structure. A procedure identifying how to respond to the critical incident was agreed internally and followed consistently. Participants described how the school as an organisation was unified, caring and supportive. Strategies were put in place in school to support pupils, individually or in groups and systems were put in place to monitor pupils. School staff provided rooms and refreshments to facilitate peer support. This empowered pupils to use each other as a source of support and comfort.

4.2.1.1.3 Controlling communication

Having accurate, reliable and well communicated information helps with decision making across different levels, including individual, organisational and

within wider systems. In the day to day running of the school, important information is normally cascaded down from the headteacher through the management structure within the school. During a critical incident response there are fundamental changes to the way information is exchanged. The differences highlighted by participants appeared to be with regard to the source of information, the mode of communication and the way information was disseminated. When coping with crisis, of key importance described by participants was controlling information exchanges. Three subcategories emerged from participants' accounts of how communication was controlled, minimising, authenticating and disseminating.

In order to minimise the impact of a critical incident and to reduce anxiety, calm and composure is needed. A key finding with regard to communication interchanges was that they were kept as low key as possible to reduce the likelihood of panic and to maintain a sense of control. Information was communicated by senior managers to school staff in a sensitive way; generally the mode of communication was face to face. Professionals working in schools at that time also strived to minimise the influence of the media to prevent the situation from escalating. Participants reported that the initial media response triggered alarm amongst staff about how the pupils would react. A clear statement was communicated to the media to prevent the situation from intensifying. Communication was controlled so that the press could not magnify or sensationalise the events.

Communication needs to be authenticated during a critical incident. Judgements about how to respond during a critical incident are based on information provided through different sources about unfolding events. When acting on information during an emergency, professionals value the accuracy, reliability and the trustworthiness of the source. Participants described how information communicated at school needed to be authenticated, with only accurate information shared. School staff made judgements about what they believed to be either rumour or the 'truth' and made decisions about what information should be disregarded or acted upon. Information given to the media by senior staff at school was also authenticated, yet there was a strong

belief that messages portrayed by the media would be a misrepresentation of the truth.

Information can be disseminated by an organisation through a top down or bottom up approach. During a critical incident, information needs to be circulated to school staff as quickly as possible to help them plan and prepare. The messages conveyed need to be clear and consistent to avoid misinterpretation and confusion.

Top down communication is the normal working practice for schools. It is important for information to be communicated through line management systems, the communication exchange system is hierarchical, operating from top down. During the early stages of the critical incident, information was disseminated within schools in this way, initially at senior management level, cascading down through staff briefings and assemblies for pupils. Information was conveyed via email, through face to face meetings and over the telephone. Letters providing advice and guidance were also sent home to parents and carers.

A key finding with regard to change at the time of the critical incident was that the channel of communication changed direction, originating from bottom up (via the community and pupils) rather than top down (senior management). Pupils were seen as valuable and reliable sources of information, firstly, due to pupils living within in the community in close proximity to others who had been affected by loss. Secondly, due to the advances in information technology, in particular with frequent communication exchanges through social networking sites where children and young people had become aware of what had happened before school staff. Participants described how pupils and members of the community shared information with school staff on a daily basis as it was known to them before they came to school. However, because controlling the communication was problematic, it was difficult to distinguish what was 'truth' and what was rumour.

4.2.2 Counselling service

The categories that emerged during interviews with counsellors were 'responding to crisis' as a central category with categories, extending working practice, maintaining consistency, maintaining professional boundaries and managing hysteria.

4.2.2.1 Responding to crisis

Counsellors played a key role supporting children and young people in school during the suicide cluster. Counsellors were already providing a service to schools and responded to demands made of them through increasing the number of sessions provided to schools. Generally there was little change to the counsellors' roles and responsibilities at the time of the critical incident.

4.2.2.1.1 Extending working practice

At the time of the critical incident the Counselling Service employed a team of counsellors who worked on a peripatetic basis within schools. The counsellors were responsible to the Project Manager and the Counselling Development Worker. The organisational structure was hierarchal and during normal working practice information was communicated to the team through the line management system. When interviewed counsellors indicated that the processes and procedures followed during the critical incident were similar to those normally adhered to. It was recognised that schools were in crisis and that there was a demand for counsellors. Counsellors responded to the critical incident through the allocation of additional time to schools, which meant that their case load increased. This resulted in a capacity issue for the counselling service. Monitoring systems were put in place by the counsellors, but it was reported that little paperwork was completed due to time constraints.

4.2.2.1.2 Maintaining consistency

During a critical incident having continuity of support with familiar people is reassuring for those who have experienced loss. Young people often respond better to someone they know, with whom they have built a relationship. An important principle for the counselling service was (as far as possible) to provide ongoing support to their link schools in order to maintain consistency. The rationale for this was that counsellors were familiar with personnel at their designated school, the management of case loads and the requests for involvement.

4.2.2.1.3 Maintaining professional boundaries

Throughout the interview it was evident that the counsellors upheld the principles and the integrity of their professional practice. Emphasis was placed on keeping client information confidential and working within professional boundaries. It was recognised that the disadvantage of working within these parameters was that certain information could not be shared amongst health professionals, therapists and first responders. Furthermore, information that could be made available to school staff was not always disseminated to other agencies

4.2.2.1.4 Managing hysteria

A critical incident involving a suicide cluster leaves children and young people attending schools in a state of preparedness or hyper-vigilance. As anxiety rises panic can spread. From the perspective of the counselling service the atmosphere in schools was that of hysteria. According to the counsellors, suicide was viewed by pupils as being contagious, analogous to a disease. Counsellors believed that conversations about suicide amongst pupils elevated feelings of vulnerability and perceived threat.

4.2.3 Educational Psychology Service

The categories that emerged during interviews with EPs were 'managing change' as a central category with categories, pivotal role, emergent process and empowering others.

4.2.3.1 Managing change issues

One of the distinctive contributions of EPs is the application of psychological theory to practice in order to facilitate change. EPs play a key role in managing change in complex situations which involve human interactions, such as a critical incident. The EPS was seen from both an authority level and school level as the vehicle for change. The EPS played a central role in the critical incident response, working with individuals, groups and with school staff and external agencies. EPs were perceived as having the necessary psychological skills and knowledge to know what to do at the time of a critical incident.

4.2.3.1.1 Pivotal role

The EPS plays a pivotal role in crisis response involving school age children and young people. At the time of the critical incident the demand for EPS contribution was expected. The structure of the EPS during the time of the critical incident was hierarchical, comprising a principal, senior grades, senior practitioners and main grade posts. From the account of participants, clarity was provided from higher management within the LA about emergency protocols. After gaining approval, ways of working were agreed by senior staff within the EPS and decisions were made about the allocation of resources. This procedure was considered important to ensure that there was authority approval and that a collective approach was taken within the EPS. Managing the response in this way provided consistency across different levels within the authority and a feeling of support and shared responsibility and accountability.

When interviewed, participants indicated that the EPS was the central focus. The demands on the service were significant. The request for involvement

came either from the school staff or the LA; both sources had high expectations and perceived EPs as being the 'experts'. Participants indicated that school personnel requested EP involvement but did not communicate precisely why this was required. From the EPs perspective school staff wanted the support and guidance to help them with the next stage of the crisis. EPs drew upon their professional skills and psychological knowledge to empower pupils and professionals. However, from the account of participants from the EPS, a crisis of this scale was a new experience and there was uncertainty about the best way to proceed.

4.2.3.1.2 Emergent process

In crisis work, day to day routines are disrupted and new patterns of working develop. An emergency situation is complex and ill-defined. Hence, the processes and procedures followed during a critical incident are not always clear from the outset, but emerge over time. This was evident from participants' interviews, that the events were unprecedented and that there was lack of clarity about processes, procedures and plans, which emerged over the course of time. During the interviews EPs indicated that they felt under pressure because of increased demand for their service. At the height of the critical incident new strategies were put in place because of an escalation in behaviours. This led to an around the clock rota being scheduled, which was unprecedented.

4.2.3.1.3 Empowering others

The unique contribution of EPs is to empower others through the application of psychology to practice. Participants when interviewed indicated that they supported school staff to support children and young people attending school. The pastoral staff having difficulties in running the ordinary day to day activities in schools felt deskilled. Senior management in schools often lacked confidence in how to respond to the critical incident. The information provided to school staff from the EPS was targeted at different levels to improve the confidence of personnel to manage the situation. The communication to senior management

and school staff around planning and support was frequent to ensure staff did not feel isolated.

4.3 Findings relating to question 2

What joint protocols / procedures are followed during a critical incident?

4.3.1 Schools

The categories that emerged during interviews with school staff were 'crisis support' as a central category with categories, interagency support, adaptation and shared grief.

4.3.1.1 Crisis support

School staff did not elaborate on, nor provide specific details of joint protocols and procedures followed during the critical incident response. It appears that when procedures were followed they were not formalised, firstly due to the critical incident being a unique phenomenon and secondly, due to time constraints when working under intense pressure. During the interview participants provided a general overview about what they did when responding to the crisis and how they collaborated with outside agencies. Participants also highlighted the level of support they provided to children and young people and the emotional impact the critical incident had on pupils and staff.

4.3.1.1.1 Interagency support

Senior members of the county borough council provided guidance to schools about how to respond. Participants (school staff) reported that they followed a strategy about what action to take for the next steps. Advice and guidance as well as practical support on the ground were provided by outside agencies. Joint protocols and procedures were not always made explicit or formalised. The processes and procedures were described as being 'ad hoc' because the situation was unprecedented. Participants described one day in particular where

the school personnel found it difficult to manage and relied heavily on outside agency help.

At a time of a critical incident a wide range of support may be offered to professionals including, advice, strategies, information and practical assistance. School as an organisation can be considered the centre of the activity or the 'hub' where support and guidance is both incoming and outgoing. Whether an organisation needs support from outside agencies depends upon a number of factors, including the organisation's ability to cope using existing resources, prior experiences, confidence in dealing with the situation and the perceived usefulness of the external support provided. Participants referred to the support from outside agencies as being integral to the way the school responded to the critical incident. Support acted as a protective factor to the challenges faced by the school as an organisation.

Due to the enormity of the event which had affected a number of schools within the borough, resources were limited due to capacity issues both within school and with external agencies. Two of the schools felt supported by outside agencies through having the knowledge of a procedure to follow and having the available interagency assistance. There was a sense of frustration amongst participants from one of the schools who perceived that the support from outside agencies was limited and short-term and that the longer term needs of the school had not been met. Additionally, participants from the same school reported that there was a lack of advice from external sources.

4.3.1.1.2 Adaptation

When faced with a critical incident which presents as a novel experience, day to day responses are based on trial and error rather than prior learning. School staff had to adapt to an evolving situation when the organisation was in crisis. Initially the response was reactive rather than proactive. Participants acknowledged that they needed a support structure. When the situation became widespread representatives from the authority, including senior personnel from school met on a regular basis. Joint procedures and protocols as well as a

strategy evolved, which became established over time, with school staff contributing to the process.

4.3.1.1.3 Shared grief

Help from outside agencies had been requested to support the emotional wellbeing pupils and of staff. A key finding was that the school staff who were the main support for the pupils were also affected by grief. During the critical incident participants described themselves seeking out normality. School staff wanted advice as to how to respond to sensitive questions asked by pupils about bereavement and about their experiences

4.3.2 Counselling Service

The categories that emerged during interviews with counsellors were 'coping with crisis' as a central category with categories, working in isolation and overload.

4.3.2.1 Coping with crisis

Counsellors worked in a peripatetic way travelling to schools to undertake work within a set time frame. During the interview the counsellors reported that they did not work collaboratively with other agencies, but worked very much in isolation within schools. At the time of the critical incident the work became increasingly child focused with little time left for consultation with school staff or external agencies.

4.3.2.1.1 Working in isolation

Counsellors indicated that at the time of the critical incident they did not work within a multi-agency team. This was in part due to limitations regarding information sharing, confidentiality and work ethic, which placed restrictions on what could be disclosed to other agencies. During the interview counsellors explained that they had their own internal procedures and policies and these did

not incorporate joint working practices. Counsellors generally worked in isolation in schools on a case by case basis. There was limited liaison and lack of reciprocal interchanges between the counselling service and other organisations including schools. Participants also expressed concerns about duplication of work with other agencies. They gave the example of another professional from a different discipline unknowingly working with the same young person in a conflicting way.

4.3.2.1.2 Overload

During an emergency where the demand for support exceeds supply there may be tension surrounding the distribution of work and the allocation of roles and responsibilities. Boundaries may not be clearly defined between organisations. Some professionals may feel disempowered or experience feelings of helplessness, yet other professionals can feel overwhelmed by the volume of work. Counsellors indicated that children and young people with lower levels of need could have been supported by school personnel, which would have reduced the pressure on the counselling service and cut down the waiting list. From the account of counsellors during the interview there were pupils waiting for them when they arrived at schools, which was uncommon.

4.3.3 Educational Psychology Service

The categories that emerged during interviews with EPs were 'collaboration' as a central category with categories a) multi-agency coordination and b) adaptation.

4.3.3.1 Collaboration

The EPS is considered to be a core service which the LA calls upon in an emergency involving children and young people. EPs strive to work collaboratively with other agencies during a critical incident. Fundamentally, the approach taken by the EPS was to adapt to the demands of the situation as it unfolded.

4.3.3.1.1 Multi–agency coordination

The EPS is well placed to work within a multi-agency crisis team when responding to an emergency. Participants from the EPS believed that communication was vital to the EPS team approach during the critical incident, which clarified what action was to be taken. At the time of the event EPs played a central role and were responsible for liaising, coordinating and sharing information with partner agencies. EPs interactions with other agencies were highlighted as being positive, both in terms of existing relationships and when forging new relationships. When working with other agencies a flexible approach was taken.

With respect to joint protocols there was a structure to higher tier planning at an authority level, information was cascaded down through gold and silver and bronze groups. The bronze group, which was the operational group, met on a regular basis to share information and to develop protocols. School staff were given general advice around the processes in place and made aware of the presenting situation. EPs indicated that information was gathered at an authority level about pupils at risk, or thought to be at risk. This helped with the allocation of resources.

4.3.3.1.2 Adaptation

The critical incident was unprecedented which brought a lack of clarity about how to respond. In order to deal with uncertainty EPs needed to be adaptive, using their current skills and knowledge to equip them. A key finding was that the psychology underpinning EP practice was applied to facilitate change. EPs indicated that their involvement in the critical incident was a learning experience, which highlighted that processes and procedures needed to be considered at different levels, including ethical, self preservation and when joint working. During the interview EPs reflected on lessons learnt from the critical incident and what was helpful or unhelpful. The EPs worked intuitively drawing on their professional training to make sense of the situation. According to the

participants a structured approach was taken, though flexibility was needed to respond in a proactive way if a something unexpected happened.

4.4 Summary of findings relating to question 1 and 2 using grounded theory

4.4.1 Summary of findings for Question 1

How do different agencies and organisations respond during a critical incident?

School staff

The following categories emerged from interviews with school staff:

Central category: **coping in crisis**

Categories:

- a) **disequilibrium** generated from subcategories: i) loss of control, ii) coping with threats to knowledge and skills;
- b) **managing threats to organisational structure** generated from subcategories: i) managing crisis, ii) reorganisation, iii) collaboration;
- c) **controlling communication** generated from subcategories: i) minimising, ii) authenticating, iii) disseminating (top down or bottom up).

Counsellors

The following categories emerged from interviews with counsellors:

Central category: **responding to crisis**

Categories:

- a) **extending working practice;**
- b) **maintaining consistency;**
- c) **maintaining professional boundaries;**
- d) **hysteria.**

Educational psychologists

The following categories emerged from interviews with educational psychologists:

Central category: **managing change**

Categories:

- a) **pivotal role;**
- b) **emergent process;**
- c) **empowering others.**

4.4.2 Summary of findings for Question 2

What joint protocols / procedures are followed during a critical incident?

School staff

The following categories emerged from interviews with school staff:

Central category: **crisis support**

Categories:

- a) **interagency support;**
- b) **adaptation;**
- c) **shared grief.**

Counsellors

The following categories emerged from interviews with counsellors:

Central category: **coping with crisis**

Categories:

- a) **working in isolation;**
- b) **overload;**

Educational psychologists

The following categories emerged from interviews with educational psychologists:

Central category: **collaboration**

Categories:

- a) **multi-agency coordination;**
- b) **adaptation.**

4.5 Findings of SSM relating to question 3

Question 3: How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?

SSM analysis stage 3 was undertaken which generated data from the rich picture (Appendix Q) to produce a number of relevant systems. Root definitions were then formulated for three issue based systems and one primary task relevant system.

SSM analysis stage 4 produced conceptual models for the three issue based systems and the one primary task relevant system. Finally, for each system an agenda was drawn up for later discussion which constituted stage 5 of SSM (see Appendices R, S, T & U).

4.5.1 Issue based system 1

A system that provides professionals / organisations with a protocol about how to respond during a critical incident

C: professionals / organisations

A: protocol makers

T: not having available a protocol about how to respond >>>>>>transformation >>>>>met through having a clear protocol providing guidelines on how to respond during a critical incident.

W: the belief that having a protocol with clear guidelines will reassure and help professionals within organisations to know how to respond during a critical incident, which in turn will improve confidence and provide consistency thus avoiding duplication of work.

O: EPS, school staff, Counselling Service.

E: resources such as time, availability, commitment and expertise.

Root definition: A LA owned system (EPS, school staff and Counselling Service), formulated by protocol makers, which given the constraints of resources such as time, availability, commitment and expertise, provides relevant professionals/ organisations with a protocol which is deemed necessary to provide reassurance to professionals and organisations that they will have the knowledge to know how to respond during a critical incident.

The conceptual model shown in figure 1 was developed from the root definition which describes a system that provides professionals / organisations with a protocol about how to respond during a critical incident.

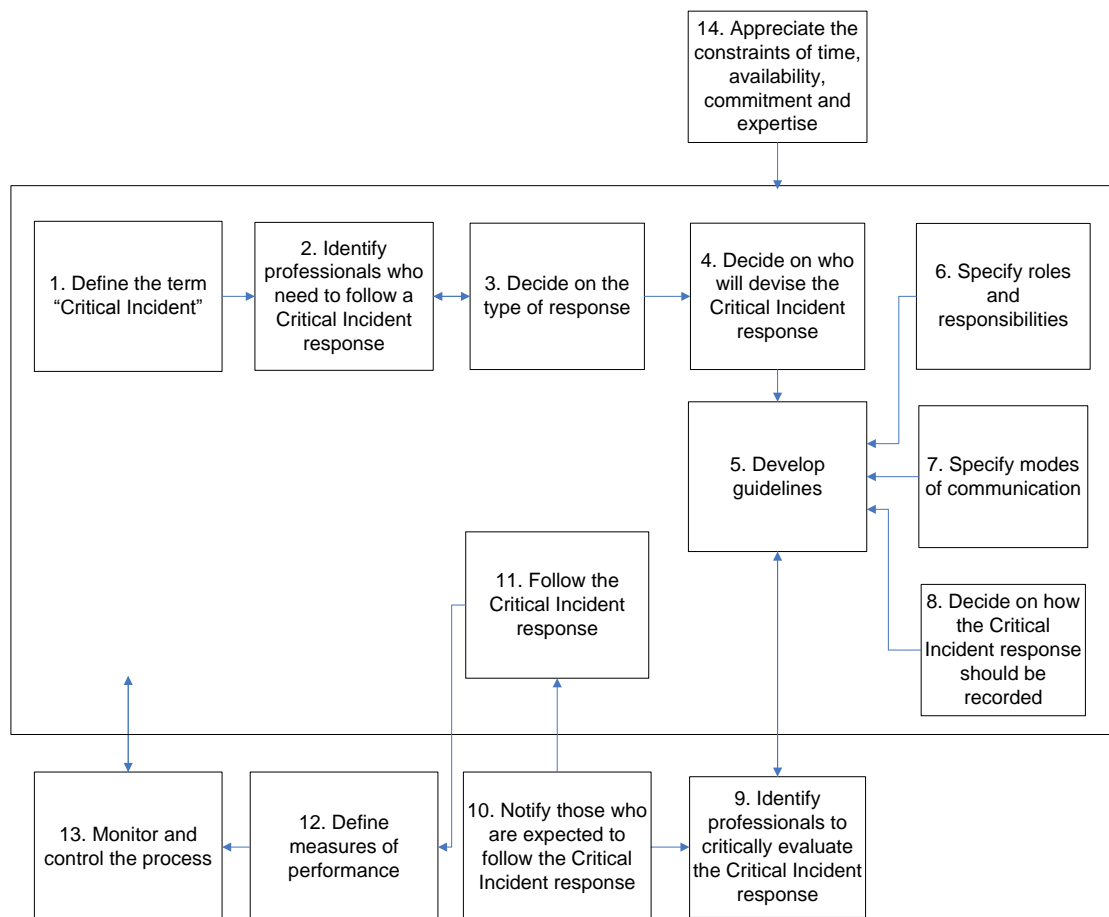


Figure 1. Conceptual model: Issue based system 1.

The operational activities represented by activities 1-8 and 11 are displayed in the centre of the model. The monitoring and control activities represented by activities 9, 10 and 12-14 are displayed on the periphery of the model.

SSM analysis stage 5 was then completed which compared the conceptual model in figure 1 with the rich picture (Appendix Q). An agenda of activities were drawn up noting any elements of the conceptual model currently operating (Appendix R, Table 2). Discussion items for the agenda to be presented at stage 6 of SSM were included in the table.

4.5.2 Issue based system 2

Information verifying communication system for professionals / organisations at the time of a critical incident

C: professionals, organisations, young people

A: people who can verify and communicate information promptly

T: there is a need to have information verified and communicated promptly about what is happening during a critical incident >>>>>>transformation >>>>>met through having information verified and communicated promptly about what is happening during a critical incident.

W: the belief that having information verified and communicated promptly about what is happening will provide clarity for professionals, organisations and young people, which will help dispel rumours. In turn, this will help increase a sense of 'feeling in control' and reduce anxiety.

O: EPS, school staff, Counselling Service.

E: resources such as time, availability, technology and expertise.

Root definition: A LA owned system (including EPS, school staff and Counselling Service) formulated by people who can verify information about what is happening and communicate to others promptly during a critical incident, which given the constraints of resources such as time, availability, technology and expertise provides relevant professionals/ organisations as well as young people with accurate information about what is happening which is

communicated promptly, which is deemed necessary to enable them to feel better informed, more in control and less anxious during a critical incident.

The conceptual model shown in figure 2 was developed from the root definition for an information verifying communication system for professionals / organisations at the time of a critical incident.

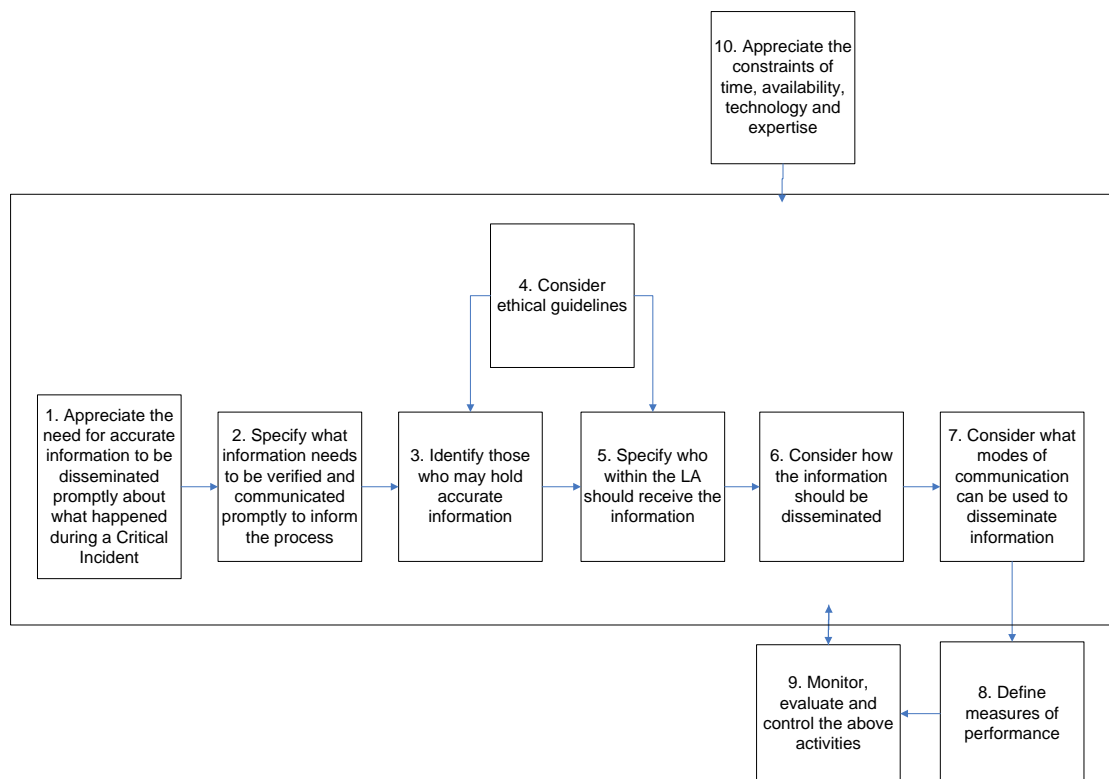


Figure 2. Conceptual model: Issue based system 2.

The operational activities represented by activities 1-7 are displayed in the centre of the model. The monitoring and control activities represented by activities 8-10 are displayed on the periphery of the model.

SSM analysis stage 5 was then completed which compared the conceptual model in figure 2 with the rich picture (Appendix Q). An agenda of activities were drawn up noting any elements of the conceptual model currently operating (Appendix S, Table 3). Discussion items for the agenda to be presented at stage 6 of SSM were included in the table.

4.5.3 Issue based system 3

A professionals / staff support system

C: professionals, organisations, children and young people

A: people who can support staff / professionals

T: there is a need to offer support to staff / professionals within organisations during a critical incident >>>>>transformation >>>>>met through having staff / professionals supported during a critical incident.

W: the belief that offering support to staff / professionals within organisations during a critical incident will help the staff / professionals feel supported, help them manage normal day to day activities better, reduce stress levels and improve emotional wellbeing.

O: EPS, school staff, Counselling Service.

E: resources such as time, availability and expertise.

Root definition: A LA owned system (i.e. EPS, school staff and Counselling Service) formulated by people who can support staff / professionals, which given the constraints of resources such as time, availability and expertise provides the relevant staff / professionals with support which is deemed necessary to help staff / professionals feel more supported and less stressed during a critical incident, thus improving the general wellbeing of staff / professionals helping them feel better equipped to manage day to day activities both in the short term and during the longer term.

The conceptual model shown in figure 3 was developed from the root definition of a professionals / staff support system.

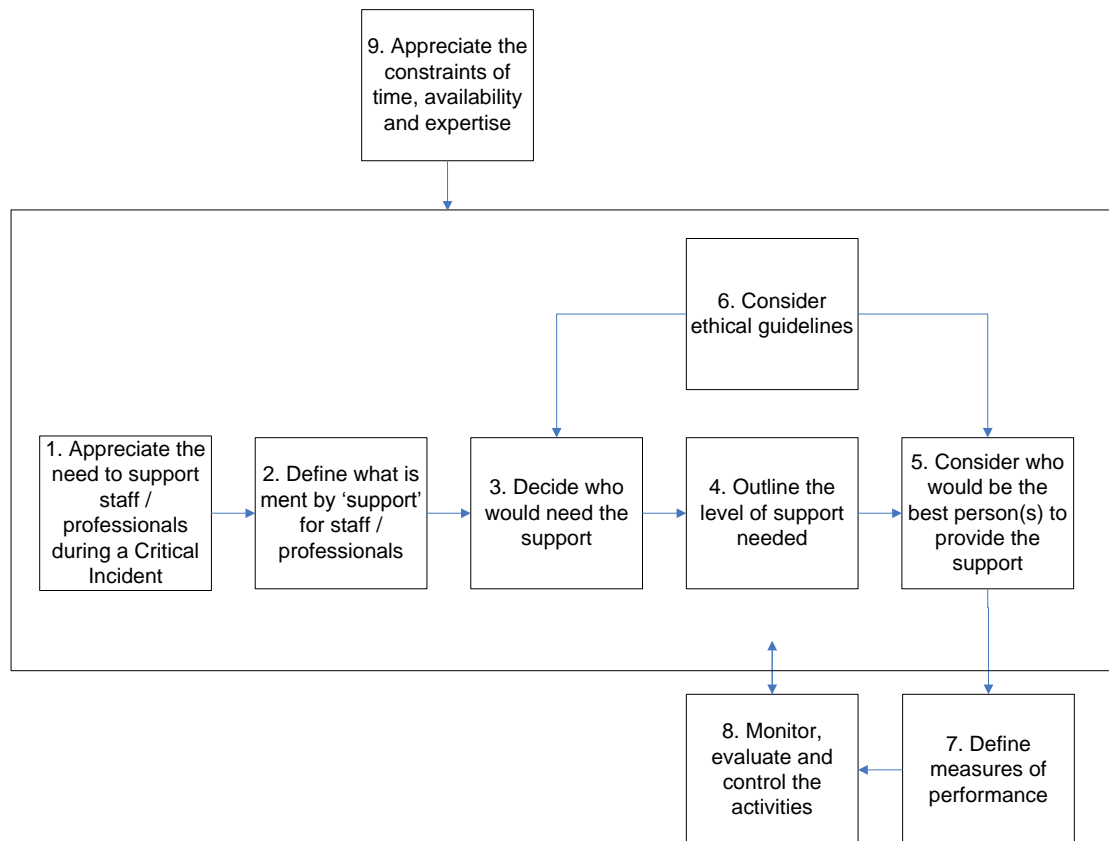


Figure 3. Conceptual model: Issue based system 3.

The operational activities represented by activities 1-6 are displayed in the centre of the model. The monitoring and control activities represented by activities 7-9 are displayed on the periphery of the model.

SSM analysis stage 5 was then completed which compared the conceptual model in figure 3 with the rich picture (Appendix Q). An agenda of activities was drawn up noting any elements of the conceptual model currently operating (Appendix T, Table 4). Discussion items for the agenda to be presented at stage 6 of SSM were included in the table.

4.5.4 Primary task 1

A system which provides professionals / organisations with continuity of training on how to respond during a critical incident

C: professionals / organisations, vulnerable young people

A: training providers / facilitators

T: there is a need for continuity of training on how to respond during a critical incident >>>>>>transformation >>>>>met through having continuity of training on how to respond during a critical incident.

W: the belief that having continuity of training will help professionals within organisations gain the knowledge and skills about how to respond during a critical incident, which in turn will improve confidence, provide consistency and help with early identification and intervention.

O: EPS, school staff, Counselling Service.

E: resources such as cost, time, availability and expertise.

Root definition: A LA owned system (EPS, school staff and Counselling Service) formulated by training providers / facilitators, which given the constraints of resources such as cost, time, availability and expertise, provides relevant professionals/ organisations with continuity of training which is deemed necessary to enable them to have continued skills and knowledge of what to do during a critical incident in order to support vulnerable young people.

The conceptual model shown in figure 4 was developed from the root definition of a system which provides professionals / organisations with continuity of training on how to respond during a critical incident.

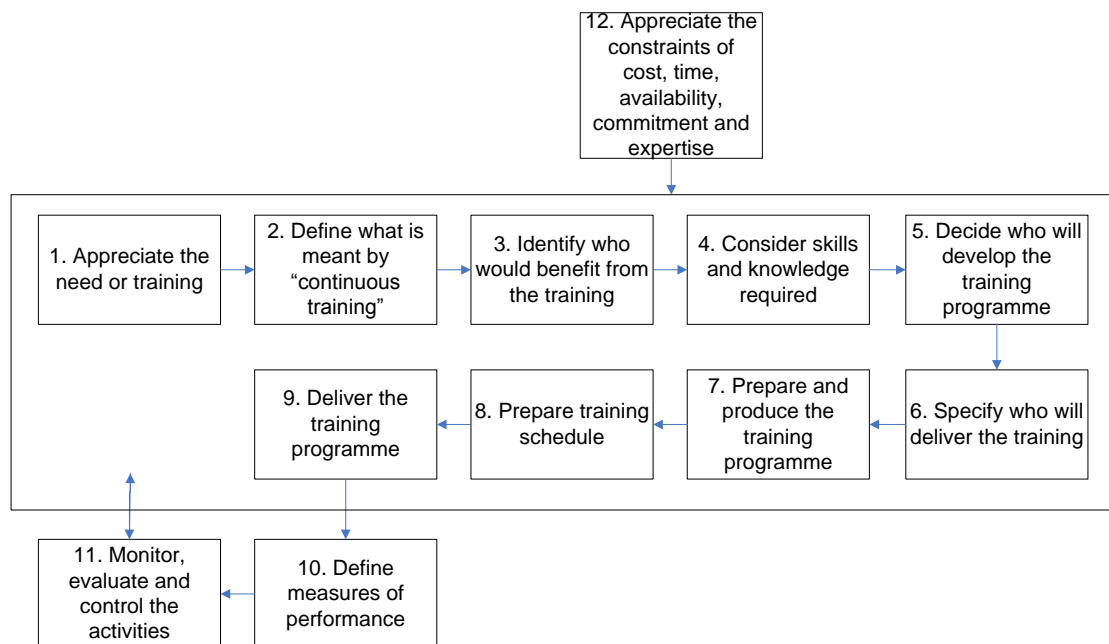


Figure 4. Conceptual model: Primary task 1.

The operational activities represented by activities 1-9 are displayed in the centre of the model. The monitoring and control activities represented by activities 10-12 are displayed on the periphery of the model.

SSM analysis stage 5 was then completed which compared the conceptual model in figure 4 with the rich picture (Appendix Q). An agenda of activities was drawn up noting any elements of the conceptual model currently operating (Appendix U, Table 5). Discussion items for the agenda to be presented at stage 6 of SSM were included in the table.

4.6 Summary of findings relating to question 3 using SSM

Question 3: How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?

SSM produced three issue based systems and one primary task relevant system, generated from interviews with school staff, counsellors and EPs.

Issue based Systems

- A system that provides professionals / organisations with a protocol about how to respond during a critical incident
- Information verifying communication system for professionals / organisations at the time of a critical incident
- A professionals / staff support system

Primary task

- A system which provides professionals / organisations with continuity of training on how to respond during a critical incident

4.7 Summary: Results Chapter

This chapter has reported the findings of a study designed to find out how three organisations (schools, the Counselling service and the EPS) responded to a critical incident involving a suicide cluster. The study also aimed to convey possible ways to improve current systems.

Question 1 and 2 were explored utilising a grounded theory approach. Through grounded theory analysis the processes and procedures followed by each organisation during the critical incident response were explored. A number of categories emerged from the interview data which have been reported. Grounded theory analysis was also used to explore what joint protocols and procedures were followed by the three organisations during the critical incident response. Again, categories emerged from the interview data, which have been reported. Extract from the transcripts were not used to illustrate points, instead a general interpretation was provided of the original statements.

Analysis through SSM produced three issue based systems and one primary task relevant system. Conceptual models were then built to represent the activities of the systems. Four agendas were produced with the intention of informing ways to improve existing protocols and procedures during a critical incident response, both within organisations and when joint working.

5.1 Introduction to chapter

The aim of the current study was to find out how three key organisations, namely the EPS, counselling service and schools, responded to a critical incident occurring in one LA between 2008 and 2009. It is recognised that organisations are made up of employees who work to serve their organisation and its stakeholders. Hence, organisational response to a critical incident is inseparable from and affected by the thoughts, feelings and behaviours of personnel working within the establishment, which in turn is impacted by organisational change. The participants' experiences of how their organisation responded during the critical incident will be discussed by eliciting their perspectives, which may incorporate multiple factors that interact at a personal, professional and / or organisational level.

The study also sought to establish whether the organisations collaborated and the extent of joint working in terms of shared knowledge of protocols and procedures at the time of the critical incident. Finally, the study identified ways in which to improve organisational response to future critical incidents. A qualitative design was used and interview data were collated and analysed, firstly through a grounded theory approach, which elicited the perspectives of EPs, counsellors and school staff, and secondly, through SSM analysis where feasible and desirable change issues were identified to improve the current processes and procedures adhered to during a critical incident response.

The chapter is sectioned into two parts. Part one discusses the results obtained, focusing on the categories and the theory that emerged from the interview data after using a grounded theory approach, to answer question 1 and 2. The values, beliefs and conceptions of the participants derived from the data form the emergent categories, which are considered with respect to existing theory and research (Auerbach et al., 2006). Any new theory is also considered. Following this, the proposed feasible and desirable changes to the processes and

procedures informing a critical incident response identified through SSM are explored to answer question 3.

Part two of the chapter outlines the methodological limitations of the research and how the study may have been improved, which has relevance to future investigations in this field. The role of the EP and implications for future research is discussed. Finally, a summary of the chapter is provided.

PART ONE

5.2 Findings of the current research

5.2.1 Espoused theory

Espoused theory has been described as the words that we use to convey what we do (or have done) or what we would like others think we do (or have done) (Argyris & Schon, 1974). It is recognised that there may be a discrepancy between the reported thoughts, feelings and behaviour of the participants (their espoused theory) and the theory that actually governed their behaviour (their theory-in-use) at the time of the critical incident (Argyris & Schon, 1974). Hence, the information provided by the participants during the interviews can only be considered as their interpretation of past events which they have communicated to the researcher. The findings of the current research are also subjective in the sense that they were socially constructed by the author. It is acknowledged that the interview data are open to interpretation, another person may have generated a different set of results when analysing the same research data. No two researchers will produce the same theory. However, within qualitative research this is not considered to be a shortcoming as all views are equally valid.

The approach to grounded theory in this study was influenced by Chamaz, (1990) and Van Vliet (2008), where emerging categories from the interview data were initially considered against the theoretical perspectives presented in the literature review, which were subsequently accepted, rejected or modified. In

addition, to make sense of the emerging categories, a range of theoretical perspectives that were *not* considered relevant at the time of writing the literature review, but following data analysis have shown to have interpretative value were also explored. Glaser (1992) warned against the temptation to fit data into preconceived frameworks, thus it is recognised that the researcher may be criticised for this approach in terms of imposing her psychological interpretation on the data. Nevertheless, it was thought informative within this small scale study to situate the data within established theory, particularly if there was insufficient justification for the emergent categories to be regarded as 'new' theory.

It is likely that some repetition of categories will be found across the three organisations, having been impacted by the same critical incident event. Grounded theory is unique in that it contributes to the discovery of new theory from categories which have emerged from the data; as categories are considered to be conceptual elements in a theory (Charmaz, 2006). From a social constructionist viewpoint, the decision about whether categories generated new theory, were based on the researcher's construction, which may be criticised for being partial. If no useful theory emerged from the data, this may be due to the narrow focus imposed on the participants by the interview questions, which surrounded the processes and procedures followed during the critical incident response. A lack of emergent theory could also be due the quality of the data, or simply because no useful theory emerged from this particular data set.

5.3 Research question 1: How do different agencies and organisations respond during a critical incident?

The current study considered the perspectives of school staff, EPs and counsellors working in one LA who were employed at the time of a critical incident. The experiences of participants were elicited through a grounded theory approach. The categories that emerged from the data may go some way in explaining how different organisations responded to a crisis which impacted schools. The response of schools, the EPS and the counselling service to the critical incident will now be discussed.

5.3.1 Schools

5.3.1.1 Coping in crisis

Coping in crisis was the central category which emerged from the data. The participants disclosed a range of thoughts, feelings and behaviours about how they coped in crisis during the critical incident. The subcategories elicited from the data conveyed participants' experiences when the organisation was in a state of disequilibrium, participants' ability to cope with threats to the organisational structure and how they controlled communication. These three subcategories underpin the coping in crisis central category and will be considered in light of relevant theory.

5.3.1.1.1 Disequilibrium

From the central category 'coping in crisis', grounded theory analysis elicited the category 'disequilibrium' and its subcategories, 'loss of control' and 'coping with threats to knowledge and skills', both of which emerged at a lower level of abstraction.

The category 'disequilibrium' and its subcategories will be considered with respect to relevant theory and the question posed to participants about the response of school organisations to the critical incident.

The participants representing the three schools shared the view that they were coping with a crisis which threatened the stability of their organisation. The psychological and physical strain experienced by school personnel was intensive; the situation was described as overwhelming. The participants described in their own words (which are not reiterated due to the socially sensitive nature of the current study) the impact of the critical incident on pupils, school staff and the wider community.

An emergency throws an organisation into disequilibrium, when the need for human and physical resources is beyond the scope of normal day to day operations. The traumatic event experienced by pupils at school was the same traumatic event experienced by school staff, many of whom lived in the same community. The theory of shared traumatic reality described by Baum (2010) is relevant to the current study, where school staff were exposed to the same communal disaster as their pupils. Some participants may have experienced double exposure, both as an individual living in a community affected by trauma and as a professional helping children and young people attending school manage trauma.

Given the scale of the crisis, school staff perceived that they lacked the relevant knowledge and skills to effectively respond to the critical incident. With emphasis on loss of control and disempowerment, these concepts are closely related to constructivist self-development theory (Trippany, White Kress & Wilcoxon, 2004). According to the theory, trauma affects aspects of the self, including one's ability to cope emotionally with trauma; one's belief and expectations about self and others; and one's ability to manage intrusive trauma memories (McCann & Pearlman, 1992).

Constructivist self-development theory (Trippany et al., 2004) has been used to explain the affect of trauma on the helper, rather than the victim. The theory has been considered analogous to the concept of vicarious traumatization (McCann & Pearlman, 1990), which describes the cumulative, negative effects of trauma on the helper when working with trauma victims. More recently, constructivist self-development theory (Trippany et al., 2004) has been conceptualised as an alternative theory to post traumatic growth (Saakvitne, Tennen, & Affleck, 1998), which views adverse experiences as fostering personal growth (Auerbach et al., 2006). The discrepancy may reflect a move away from a deficit model in psychology to a positive approach, which emphasises the strengths and virtues in individuals and communities.

From the account of school personnel, the emotional impact of the critical incident was all encompassing. The critical incident may have challenged

participants' cognitive schemas about self and others. School staff held the view that professionals from external agencies responding to the crisis were more capable of helping traumatised pupils than them. This belief may be based on the participants' views that trained professionals or 'experts', such as EPs and school counsellors are best placed to support young people experiencing trauma. These accounts appear to fit with the constructivist self-development theory about the belief and expectations about self and others (Trippany et al., 2004). However, no intrusive trauma memories of the event were reported by participants, which suggests that this aspect of self was not effected (or not reported), which goes against the constructivist self-development theory (Trippany et al., 2004). Hence, this theory can not fully explain participants' response to the critical incident.

The perceived lack of control over the outcome of the situation demonstrated by school staff may have manifested itself in feelings of learned helplessness (Seligman, 1975), a theory not considered in the literature review. However, many participants did not demonstrate behaviour consistent with the concept of learned helplessness, who adapted to the situation by adjusting and prioritising work loads to support the children and young people affected by the critical incident. Seligman's (1975) original theory failed to account for the variation in reaction to situations that could cause learned helplessness (Peterson & Park, 1998). An individual's unique history shapes his or her experiences of traumatic events and defines adaptation to trauma. Weiner's (1979) attribution theory describes the way a person attributes a cause or explanation to a negative event, which can explain why certain people respond differently to a crisis. In terms of individual differences, those with a pessimistic explanatory style are most likely to acquire learned helplessness (Abramson, Seligman & Teasdale, 1978). Given that in the current study interviews were mainly conducted in groups, it is not possible to validate this theory with respect to individual differences in response to the critical incident.

Generally, participants felt de-skilled and lacked the confidence to know what to do without expert advice. The critical incident challenged participants' existing knowledge and skills. As a consequence, the school staff felt the need to seek

out available 'experts' to help guide their actions, with the aim of establishing control of the situation. Informational social influence occurs when there is uncertainty and a need to be right (Latane, 1981). When these features are present, people look to the behaviour of others who are in a similar situation to guide their own behaviour. School staff responded to the critical incident by requesting the involvement of EPs and counsellors who they perceived as 'credible' professionals, due to their knowledge and experience in the field of psychological trauma. As far as the researcher is aware the power of informational social influence has not been referenced in the field of disaster psychology before, though its relevance is plausible.

It has been recognised that when faced with uncertainty and when coping with threats to knowledge and skills, people do not use prediction, but instead rely on a limited number of strategies which may lead to a bias in judgement (Tversky & Kahneman, 1973). When information to guide decision making is limited, people resort to using a 'rule of thumb' or heuristics to guide them. Heuristics are 'strategies using readily accessible though loosely applicable, information to control problem solving in human beings' (Pearl, 1983, p.8). There was little reference made by school staff to about a protocol which informed them of the processes and procedures (what to do) during a critical incident. The dilemmas faced when using heuristics have been described by Kahneman and Tversky (1973):

In making predictions and judgments under uncertainty, people do not appear to follow the calculus of chance or the statistical theory of prediction. Instead, they rely on a limited number of heuristics which sometimes yield reasonable judgments and sometimes lead to severe and systematic errors. (p 237).

This theory may go some way in explaining the desire for participants 'to be right' and the informational social influence that ensued as they looked towards others as being the 'experts'.

5.3.1.1.2 Managing threats to the organisational structure

From the central category 'coping in crisis', grounded theory analysis elicited the category 'managing threats to the organisational structure' and its subcategories, 'managing crisis', 'reorganisation' and 'collaboration', which emerged at a lower level of abstraction.

The category 'managing threats to the organisational structure' and its subcategories will be considered with respect to relevant theory and the question posed to participants about response of the school organisation to the critical incident.

Rees and Seaton (2011) define a critical incident as 'any incident that has a dramatic and potentially traumatising impact on school aged children or school personnel' (p. 76). A critical incident is a sudden and unexpected event. The critical incident which impacted schools in the LA was that of a suicide cluster, which is a rare phenomenon. It was evident that school staff reacted to what they perceived to be a threatening situation, with little time for psychological and physiological preparedness. The critical incident may have evoked cognitions that 'the world is a dangerous place' and when a strong emotion is evoked, like fear, the flight or fight response may have been triggered (Cannon, 1914). This theory is closely associated with the concept of traumatic stress and hyperarousal, which is well documented in the field of disaster psychology as affecting individuals exposed to a traumatic event (e.g. Aten et al., 2011). In light of the imminent threat to pupils, personnel and the school as an organisation, participants responded to the critical incident by taking immediate action to support children and young people and their families in the community.

However in the longer term, managing threats to the organisational structure can take its toll. There is abundant literature to suggest that a prolonged high state of arousal can lead to traumatic stress reactions, including fatigue and burnout (e.g. van der Ploeg et al., 2003), this in turn can impact the organisation in which people work. Drawing conclusions about whether, in longer term, participants'

experience of trauma had a negative influence or resulted in personal growth (Auerbach et al., 2006) is beyond the scope of the current research.

Reorganisation is essential at the time of a critical incident to make best use of resources. The subcategory 'reorganisation', which emerged from the data, has practical relevance in terms of how the school as an organisation adapted to the changing demands and pressures in the midst of crisis. Adaptability when in crisis has the hallmark of resilience (Newman, 2005). Resilience has been attributed to individuals (Newman, 2005) as well as to organisations (Simola, 2005), where it seems that personality characteristics are ascribed based on the people who work within them. Allowing flexibility whilst maintaining stability within the school leadership provided a way for the school to adjust its day to day operations to respond to the critical incident based on need.

During times of crisis, collaboration is considered important for effective working practice (Rees & Seaton, 2011). Furthermore, *The Children Act* of 2004 stipulates that multi-agency collaboration should happen to safeguard children. Elicited from grounded theory analysis was the subcategory 'collaboration', which provides insight into how school staff responded to the critical incident. Collaboration was evident at two levels, firstly within the school organisation and secondly with external agencies. The former describes the social support and practical assistance provided to each other by colleagues. Social support is well documented as providing a buffer against adverse events (Brewin et al., 2000). All three schools indicated that internally there was cooperation and a joined up approach to respond to the critical incident. The extent of collaboration with external agencies varied between schools, two of the schools felt supported and empowered by outside agencies, one of the schools felt unsupported, mainly due to the widespread demand on resources across the authority.

5.3.1.1.3 Controlling communication

From the central category 'coping in crisis', grounded theory analysis elicited the category 'controlling communication' and its subcategories, 'minimising',

'authenticating' and 'disseminating (top down or bottom up)', which emerged at a lower level of abstraction.

The category 'controlling communication' and its subcategories will be considered with respect to relevant theory and the question posed to participants about how the school organisation responded to the critical incident.

With regard to communication patterns at the time of the critical incident 'controlling communication' emerged as a category from the data. 'Control' can be conceptualised as a way of exercising influence over something to prevent negative consequences (Seligman, 1975). For example, social control is a mechanism or process that regulates individual and group behaviour. Participants initially controlled communication by being sensitive to and minimising the concerns about the unfolding events, thus keeping things 'low key' to prevent behaviours from escalating. The belief was that superfluous information given by school staff may raise further anxieties in already hyper-vigilant pupils, which may result in a loss of control. The emergent category 'controlling communication' is closely linked to the theory of informational social influence which occurs when information is accepted from another as evidence about reality (Latane, 1981). Informational social influence may have some explanatory power given that school staff were perceived by pupils as being reliable sources of information.

School staff responded to the critical incident by authenticating information communicated by pupils and staff by checking its reliability and trustworthiness. Any information disseminated amongst staff and pupils was validated. Leadership and a structured hierarchy were considered important for effective communication and during normal day to day operations information was disseminated through a chain of command. However, during the critical incident the communication pattern changed direction from a top down approach (senior management to pupils) to a bottom up approach (pupils to senior management). Informational social influence can explain this phenomenon, as pupils were perceived to be a reliable source of information. However, a change in direction of communication exchange may have resulted in some loss of control in

communication as there were no longer protective mechanisms in place to keep the communication minimal, sensitive and low key.

5.3.2. Counselling Service

5.3.2.1 Responding to crisis

Counsellors responded to the critical incident by attending various school premises to offer a peripatetic service, providing therapeutic support for children and young people. The central category 'responding to crisis' that emerged from the data did not offer any new theory. Counsellors described their experience as being no different from their usual practice, apart from the intensity and the quantity of work which placed a demand on their resources. Counsellors ascribed importance to maintaining professional boundaries and consistency. Of interest was that counsellors worked very much in isolation, having no opportunity to engage in joint working and collaboration. There was little interagency collaboration involving other organisations, apart from schools. This would suggest that limited social support was available for the counsellors, which might have otherwise acted as a protective factor (Brewin et al., 2000).

From the central category 'responding to crisis', grounded theory analysis elicited the categories 'extending working practice', 'maintaining consistency', 'maintaining professional boundaries' and 'hysteria', which emerged at a lower level of abstraction. These will now be discussed with respect to relevant theory and the question posed to participants regarding the response of the counselling service to the critical incident.

5.3.2.1.1 Extending working practice,

The counselling service experienced no change to their normal working day apart from increased workloads and pressure. Not having experienced significant changes to their organisational structure, there was minimal threat to the stability of the counselling service during the critical incident.

5.3.2.1.2 Maintaining consistency

As much as possible counsellors attended their link schools, where they were familiar with staff and pupils and where they had built relationships. These connections were important in a number of ways. Firstly, to maintain consistency, secondly to provide social support to school staff and thirdly to be validated by school staff, which would enhance the counsellors self esteem.

5.3.2.1.3 Maintaining professional boundaries

Systems theory (Campbell, Draper & Huffington, 1988) and social constructionism (Burr, 1995) emerged from the category 'maintaining professional boundaries'. The counsellors were principled in that they adhered to their professional guidelines regarding confidentiality and ethical codes of practice. However, these principles may have created barriers with regard to information sharing and effective joint working.

5.3.2.1.3 Hysteria

Hysteria is a term that best describes unmanageable emotional distress. Counsellors were faced with scenes of hysteria in pupil groups when they attended schools. With its emphasis on lack of self-control brought about by overwhelming fear and anxiety, hysteria can be explained by trauma theory (Williams et al., 2008). Having reliable and consistent support systems provided by counsellors would have enhanced children and young peoples' sense of safety and security (Williams et al., 2008). The counselling service responded to the critical incident through providing continuity and consistent support.

5.3.3 Educational Psychology Service

5.3.3.1 Managing change

The EPS responded to the critical incident by managing the process of change. The key change issues surrounded the working practice of the EPS and the change issues for the pupils, school staff and school systems who were

impacted by the crisis. The EPS approach to managing change can be understood through systems theory (Campbell, Draper & Huffington, 1988) and social constructionism (Burr, 1995), which views knowledge as being constructed in a social context (through language), rather than being created. EPs applied relevant psychological theory and principles to make sense of events from the view of multiple stakeholders. The change process was facilitated through a consultation approach to empower others, although EPs often worked with pupils directly on an individual basis or within groups.

From the central category 'managing change', grounded theory analysis elicited the categories 'pivotal role', 'emergent process' and 'empowering others', which emerged at a lower level of abstraction. These categories will be considered with respect to relevant theory and the question posed to participants about the response of the EPS to the critical incident.

5.3.3.1.1 Pivotal role

It has been recognised that EPs play a pivotal role in critical incident response (Woods et al., 2011). The involvement of the EPS in the critical incident was expected, given that this aspect of work constitutes a core LA responsibility in accordance with the Directorate Emergency Plan. The request for involvement came from senior management in the LA and directly from schools. Through taking a key role in critical incident response and crisis intervention there were perceptions held by others that EPs were the 'experts', particularly when EPs are regarded as well placed to work directly with vulnerable young people who have experienced loss (Rees & Seaton, 2011). Tensions may arise if there is a mismatch between the type of engagement expected in crisis work of the EPS by its stakeholders and the range of work actually undertaken by EPs.

5.3.3.1.2 Emergent process

There is a plethora of literature in the field of disaster psychology describing the affect of disasters on communities (e.g. Kano & Bourgue, 2007; Saari et al., 2011). The majority of crises are characterised by a speedy onset, an identifiable

peak and a period of immediate threat, which is time restricted (Yutrzenka & Naifeh, 2008). Valent's (2000) model of crisis identifies three transitional phases, the pre-crisis, during crisis and post-crisis stages, which allow professionals to predict, plan and intervene in emergencies (Rizzuto & Maloney, 2008). However, a critical incident involving a suicide cluster is unpredictable; the time frame for the in-crisis stage can not be speculated (unlike a natural disaster such as a tsunami). Emergent process is a category which reflects the level of unpredictability and the degree of uncertainty about how to respond to the critical incident, which was unique, multi-faceted and wide ranging.

5.3.3.1.3 Empowering others

The EPS operates a consultation approach to service delivery, which informs all areas of work including work with schools and other agencies. The aim of consultation is to facilitate reflection upon potential ways forward in problem solving and to empower others. When empowering others, EPs draw on a number of psychological theories and principles which are embedded in EP practice (Farrell et al., 2006). Those theories identified in the literature review include systems theory (Campbell, Draper & Huffington, 1988) and social constructionism (Burr 1995). Others relevant theories include solution-orientated thinking (Rhodes & Ajmal, 1995), personal construct psychology (Ravenette, 1999) and narrative therapy (White, 2007). The category 'empowering others' also draws upon resilience theory (Newman, 2005) which describes the ability of EPs to adapt and empower others when faced with trauma and adversity. A full explanation of the applicability of these theories in crisis work is beyond the scope of the current study.

5.4 **Summary: Findings relating to research question 1: How do different agencies and organisations respond during a critical incident?**

The experiences of the participants can be explained by existing theory, either already considered in the literature review or brought to light through the

emerging categories. Although grounded theory analysis did not generate new theory, there are some interesting findings, which may provide further insight into how organisations respond to a critical incident.

Using a grounded theory approach, common psychological theories emerged across organisations, varying from psychological trauma theories, theories of social influence, social cognition, and cognitive theories, including schema theories and information processing approaches.

Trauma psychology can explain the impact of trauma on professionals working within the three organisations. The short term effects were both psychological and physiological. Trauma exposure can also have longer lasting affects which may be interpreted as positive or negative.

There were similarities and differences in how organisations responded to the critical incident. There was a difference in the perceived knowledge and skills held by schools and other services. School staff felt unequipped and disempowered, whereas members of the EPS used psychology to empower others. Informational social influence emerged as a key theory, which explained why school staff looked towards EPs and counsellors, whom they perceived to be the 'experts', to either guide them in what to do, or work directly with children and young people. EPs lacked specific knowledge about the nature of the critical incident, but adapted and used their psychological knowledge, experiences and skills to help facilitate change. Informational social influence did not emerge as a theory for the counselling service.

In order to solve problems one needs to understand the nature of the problem and be able to represent it appropriately, which may depend on the characteristics of the individual, the organisation and the situation. The critical incident was multi faceted, involving pupils, professionals, organisations and the community. Given that the critical incident was sudden, unexpected, unique and overwhelming, the response by organisations was often spontaneous and reactive. There was no opportunity to prepare, plan or predict next steps and the organisational response was to prioritise work and respond to the critical incident

on a day-to-day basis. Common to all organisations was limited time and resources. Two of the schools felt supported by outside agencies but one school felt unsupported.

Control was a feature which acted to protect and stabilise the school organisation. Communication was controlled by schools to reduce anxiety and to prevent an escalation in behaviours. However, during the critical incident the communication exchanges at schools changed from a top down process to a bottom up approach, which acted to destabilise the organisation.

5.5 Research question 2: What joint protocols and procedures are followed during a critical incident?

When answering research question two, participants gave little information that was different from their response to question one. Participants were able to describe whether they worked alone or collaboratively during the critical incident, but there was little reference to following joint protocols and procedures either formally or informally. This may have been because their organisation did not have any joint protocols or procedures in place, or possibly because they were not aware of any joint protocols or procedures that were in place. With the aim of being concise, only new information which may provide further insight into collaborative working during a critical incident response will be discussed.

5.5.1 School staff

5.5.1.1 Crisis support

From the central category 'crisis support', grounded theory analysis elicited the categories 'interagency support', 'adaptation' and 'shared grief', which emerged at a lower level of abstraction. These categories will be considered with respect to relevant theory and the question posed to participants concerning the joint protocols and procedures followed during a critical incident.

5.5.1.1.1 Interagency support

The joint protocols and procedures followed by school staff during a critical incident were not made explicit during the interviews. School staff perceived that support from outside agencies was paramount when responding to a critical incident. Given that all organisations were working to full capacity and under pressure, the demand for resources exceeded capacity. Interagency support for schools was not formalised, but based on need. Interagency support provided practical support as well as social support, which acted as a protective factor against the adverse affects of trauma (Brewin et al., 2000). Some participants felt that the level of support provided by external agencies was insufficient during the crisis and not available post-crisis.

Whether schools feel supported by other agencies may depend on their construction of 'support', which could be viewed as indirect in the form of advice and guidance or direct support for pupils. Organisations may lack confidence in knowing how to help traumatised pupils and thus not wish to take responsibility. The theory of 'diffusion of responsibility' first coined by Latane and Darley (1970) may go some way to explain the interactions between agencies during the critical incident. The theory proposes that the onus of responsibility becomes diffused when many people are present and responsibility is divided. The effects are greater if the situation is ambiguous and if there are 'experts' available who are perceived to have the necessary skills and knowledge and who are considered better able to offer help.

5.5.1.1.2 Adaptation

Adaptation is associated with the theory of 'resilience' (Newman, 2005). School staff learned through trial and error initially, while more formal protocols evolved within their own establishment and between external agencies.

5.5.1.1.3 Shared grief

A critical incident response does not entail following processes and procedures in a mechanistic way. When faced with a critical incident involving a suicide cluster a range of emotions are evoked. Grief is shared amongst pupils, school staff and members of the community. Furthermore, professionals from external agencies, who are likely to be members of the local community, can be personally affected by the trauma. Shared grief relates to the theory of 'shared traumatic reality' as defined by Baum (2010), which describes the effect of the exposure of the helper (school staff) and helpee (pupils) to the same communal disaster. The county borough was a close knit community where many people had lost someone close to them or knew someone who had been bereaved. It has been proposed that shared experiences of grief can affect the way people respond to crisis as well as their ability to function at work (North et al., 2010).

5.5.2 Counsellors

5.5.2.1 Coping with crisis

From the central category 'coping with crisis', grounded theory analysis elicited the categories 'working in isolation' and 'overload', which emerged at a lower level of abstraction. These categories will be considered with respect to relevant theory and the question posed to participants concerning the joint protocols and procedures followed during a critical incident.

There will inevitably be similarity or duplication of categories across organisations as all responded to the same critical incident. Coping in crisis emerged as the central category from the interviews with school staff in response to question one (see 4.2.1.1). Coping with crisis emerged as the central category for counsellors in response to this question (question two). However, the emphasis differs from the perspective of the counselling service as an external support agency, counsellors were coping *with* the crisis during the critical incident rather than coping *in* crisis. This would suggest that they

were further removed from the day to day impact of the trauma in comparison to the school staff.

5.5.2.1.1 Working in isolation

Collaborative working practice is encouraged in critical incident response and can enhance the level of social support provided to colleagues within related disciplines (Brewin et al., 2000). Counsellors worked in isolation in schools, delivering their services on a peripatetic basis. Counsellors described feelings of isolation and disconnectedness arising as a result of not having an holistic view of the critical incident. This led to perceptions of being devalued, which may have impacted on self worth. Counsellors engaged therapeutically with children and young people and worked in isolation due to the high demand for individual case work, which left little time to share good practice.

5.5.2.1.2 Overload

The cumulative effect of counsellors engaging therapeutically with trauma victims during the critical incident may have negative consequences in the longer term. During the crisis, counsellors had not only witnessed scenes of hysteria, but listened to the intrusive thoughts of children and young people, which increased their vulnerability. The category 'overload' is closely linked to traumatic stress and the risk of burnout (van der Ploeg et al., 2003), which for therapists has been described as 'vicarious traumatization' (McCann & Pearlman, 1990).

In addition, overload can be explained in terms of counsellors engaging with many pupils with lower levels of need, who from the perception of the counselling service did not require their involvement. Due to the nature of the crisis, counsellors were not afforded sufficient time or the opportunity to discuss pupils' needs nor negotiate roles. Hence, counsellors perceived a lack of clarity in their roles and responsibilities and that their work had become directed by other professionals. The counsellors' professional status and identity may have been threatened, making them feel disempowered.

5.5.3 Educational psychologists

5.5.3.1 Collaboration

Collaborative working practice is a key aspect in the role of the EP (Rees & Seaton, 2011) and is crucial when working with groups of professional within a multi agency context. Collaboration with agencies from related disciplines, such as CAMHS, counsellors and with school staff during a critical incident response is essential for early identification, assessment and intervention. The central category 'collaboration' can be understood through theories associated with solution focused principles, which underpin collaborative working practice. The use of solution focused approaches by EPs when working with multi-agency partners is considered helpful, as they offer positive solutions which are informed by social constructionsism (Burr, 1995) and systems perspectives (Campbell, Draper & Huffington, 1988). The EPs used psychological theory and principles to inform their work with other agencies, but these were not overtly expressed or shared in joint protocols and procedures. However, some EPs were aware of LA emergency plans.

From the central category 'collaboration', grounded theory analysis elicited the categories 'multi- agency coordination' and 'adaptation', which emerged at a lower level of abstraction. These categories will be considered with respect to relevant theory and the question posed to participants concerning the joint protocols and procedures followed during a critical incident.

5.5.3.1.1 Multi-agency coordination

Multi agency coordination is most effective when there are clear protocols, aims, rules and agreed responsibilities (Alexander & Sked, 2010). Given the number of agencies involved in a critical incident response, multi- agency collaboration and coordination is required to clarify roles and responsibilities, this helps determine effective use of resources. The benefits of multi-agency collaboration have been recognised under the *Children Act* of 2004.

Furthermore, the disaster literature focuses on coordinating crisis response plans to enable joint working (e.g. the National Child and Traumatic Stress Network, 2008). The psychology underpinning multi-agency coordination is wide ranging and to mention all is beyond the scope of the current research. However, paramount is the understanding of psychological group processes (Zander, 1979) and the factors that increase cooperation and fuel competition.

5.5.3.1.2 Adaptation

Adaptation is associated with being able to adjust to situations in the face of adversity, which is linked to the theory of resilience (Newman, 2005). A critical incident is a complex situation which involves multiple perspectives. EPs were adapting intuitively to the ever changing demands of the situation.

5.6 Summary: Findings relating to research question 2: What joint protocols and procedures are followed during a critical incident?

As with question one, the experiences of the participants can be explained by theory, either mentioned in the literature review, or considered relevant after the grounded theory analysis. No new theory was generated from the emergent categories.

There were a number of apparent inconsistencies between the accounts of the participants at different schools. Although there was no mention of shared protocols and procedures, two of the schools were positive about the support received from outside agencies, such as the counselling service and the EPS. However, staff from one school were less positive and felt unsupported by outside agencies. This discrepancy may be due to a number of factors including, differences in the allocation of resources, perceived roles and responsibilities, low levels of resiliency (Newman, 2005), or possibly due to the quality of the data collated from group interviews (whether it was representative of the group collectively, or influenced by one or two dominant members).

Generally, school staff felt ill-equipped to support pupils exposed to trauma, perceiving that they lack the necessary skills and understanding (Alisic, 2012), adding to this was the experience of shared trauma and grief. For some school staff, responsibility was diffused due to the belief that expert intervention was required from trained professionals. However, many of the participants were resilient, adapting to the demands of the situation on a day-to-day basis.

Members of the counselling service worked in isolation; they did not mention the use of joint protocols and procedures. Although counsellors worked alongside school staff and other agencies they did not engage collaboratively. Counsellors felt disempowered due to work overload and role confusion, which affected their feelings of self-worth.

National guidance and legislation (e.g. *The Children Act* of 2004) requires agencies to work together effectively to safeguard children and young people. The *National Emergency Preparedness* guidance (Cabinet Office, 2012) published since the critical incident (of 2008 / 2009) expects statutory and voluntary agencies to cooperate in emergency response. The integration of counsellors into emergency response team is a relatively new concept and continues to evolve (Uhernik, 2009).

EPs have a good understanding of the dynamics of inter-agency co-operation in critical incidents. The EPS engaged in multi-agency collaboration and coordination. EPs were made aware of some of the joint protocols and procedures outlined in the Directorate Emergency Plan for emergency response. However, these were not always shared with other professionals who were instrumental in the crisis response at an operational level.

The unique contribution of the EPS is the application of psychological theory to practice and the knowledge of schools and systems (Farrell et al., 2006). The emergent categories reflected the psychological theories that underpin trauma and critical incident response, such as group processes, solution oriented thinking, social constructionism and systems perspectives. Psychologists applied their knowledge of bereavement and grief theory in an eclectic way

rather than endorsing any particular psychological models of intervention (e.g. NOVA; Young, 2002; PFA; Everly & Flynn, 2005).

5.7 Research question 3: How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?

SSM was employed to investigate a critical incident response that occurred in one LA between 2008 and 2009 and to introduce proposed changes to the processes and procedures that were adhered to at the time of the event. During the interviews EPs, counsellors and school staff were initially asked about the structure of their organisation, including departmental structure, patterns of communication and decision making processes. These formulated the basis for understanding the normal day to day operations of the organisation. Secondly, participants were asked how their organisation responded to the critical incident, as well as what joint procedures and protocols they followed at the time. The responses to those questions enabled the researcher to develop a rich picture. The interaction between the structure (normal day to day activities) and the processes (what actually happened during the critical incident), were represented as the climate in the rich picture.

It has been acknowledged that the rich picture has been constructed from the perspective of the researcher; from her own 'worldview'. In SSM the researcher becomes the analyst and it has been recognised that another analyst may have made sense of the data in a different way. However, this is not a shortcoming as social constructionist theorists argue that all views are equally valid (e.g. Burr, 1995), thus worthy of consideration to inform future research. From the rich picture three issue based systems and one primary task relevant system were generated to inform ways to improve the current processes and procedures. The issue based systems focused on specific issues (such as matters of concern) and the primary task relevant system described a particular task to be carried out by the organisation. Issues based systems are often more contentious due to the concerns being around the allocation of resources.

Agendas presenting the activities of the relevant systems (issue based and primary task) were compiled with the intention of bringing these to the meeting at stage 6 of SSM, to be debated with the service managers from the EPS, Counselling Service and Head Teachers from the three schools. At this stage of SSM the research had ended and the role of the researcher was transferred to officials within the LA.

The three issue based systems and the relevant primary task will now be discussed.

5.7.1 Issue based system 1: A system that provides professionals / organisations with a protocol about how to respond during a critical incident

The critical incident transformed the normal day to day organisational structures, routines and activities within the counselling service, the EPS and schools. Delegated roles and responsibilities changed and pressure at work increased. School staff and the EPS had difficulty carrying out their usual routine activities and engaged in different aspects of work over a longer working day. The counselling service also experienced work overload. The protocol for joint working was unclear, but emerged over time and was flexible, informal and reviewed daily. There was role confusion and a lack of consistency in support from staff from external agencies providing for pupils in school. The critical incident created instability in systems and anxieties in school staff, with staff not knowing what to do or say to support children and young people and their families.

Participants perceived that a protocol with clear guidelines would help inform future critical incident response for each of the organisations separately and when joint working. This would also improve the confidence of school staff and other agencies and encourage a joined up approach to ensure appropriate allocation of resources, thus preventing duplication of work.

Since the critical incident in 2008 / 2009 there has been increased emphasis placed on multi-agency collaboration during emergencies. This has been communicated through policy and legislation (e.g. *The Children Act* of 2004), national emergency guidance (e.g. Cabinet Office, 2012), specific guidance for schools in developing plans (e.g. DfE, 2013) and through recognition of the contribution of the EPS (e.g. Rees & Seaton 2011) and the counselling services (e.g. Uhernik, 2009) in multi-agency emergency response. These documentations should be synthesised to provide a framework to inform an LA strategy or protocol conveying how to respond to a critical incident. Importantly, flexibility is needed within emergency protocols to help organisations adapt to the ever changing dynamics of crises.

5.7.2 Issue based system 2: Information verifying communication system for professionals / organisations at the time of a critical incident.

During the critical incident, a range of phenomena could account for a change in communication systems within agencies and between agencies. In schools, information about the critical incident event was scrutinised for accuracy before being filtered down to school staff and then (if necessary) to pupils. These measures were put in place to protect school organisations and vulnerable pupils from any additional trauma that could be brought about by rumours. However, the reality was that due to pupils living in a close knit community, combined with the use of technology in communication exchanges, they were often aware of any new situation before professionals. Furthermore, although the flow of information through schools was restricted due to press activity, school staff gained information via other sources, including neighbouring schools and the community. This dynamic changed the schools' communication systems from a 'top down' (staff to pupils) to 'bottom up' (pupils to staff) process.

A further issues was the mismatch between media accounts and actual events taking place in school, which exacerbated the situation. In addition pupil

information was not shared between some support agencies due to ethical considerations and time constraints.

Communication patterns increased complexity at the in-crisis stage of the critical incident; these issues were portrayed in the rich picture. SSM analysis proposed the need for an information verifying communication system for professionals and organisations to put in place during a critical incident. This type of system may help validate information and improve the speed of information dissemination to the relevant individuals. The possible benefits for such a system include, minimising the potential for miscommunication and reducing anxiety. The information verifying system is likely to differ for EPs, counsellors and school staff because of the different systems in place within the diverse organisations.

5.7.3 Issue based system 3: A professionals / staff support system

The need for a professional / staff support system was underpinned by the belief that having support for EPs, counsellors and school staff would result in a reduction in working hours and stress levels and would allow professionals to manage their normal day to day activities. The construction of 'support' may vary for different individuals. From the perspective of some school staff, the term 'support' meant having more professionals available to work with traumatised pupils. Rizzuto and Maloney (2008) suggested that support from external agencies during crises may not necessarily help stabilise organisations. During the critical incident greater cohesiveness was needed to prevent organisations working in isolation and to promote collaborative working practices.

Support can come in many forms, including psychological support, advice and guidance, physical and / or human resources, training and social support. The latter has been well documented in trauma research as a protective factor against PTSD (e.g. Brewin, et al., 2000). It is possible that participants from different professions require a wide range of support in critical incident response. Further clarification is needed to ascertain the type and level of support required by participants from the different organisations. Hence, 'defining support' is an

item on the agenda for discussion with the heads of the services at stage 6 of SSM. Given that there are cost implications regarding the allocation of resources, caution needs to be taken when these issues are debated.

5.7.4 Primary task 1: A system which provides professionals /
 organisations with continuity of training on how to respond during
 a critical incident

It was the opinion of participants that ongoing training in critical incident response will provide them with necessary skills and knowledge to enable them cope with future crises. Based on evidence from the growing field of disaster psychology the probability of experiencing a traumatic event or crisis in schools is increasing (Jimerson et al., 2005; Kano & Bourge, 2007; Rees & Seaton, 2011). Critical incident training should aim to enhance the understanding of early identification, assessment and intervention, to ensure a framework of support is available for pupils affected by trauma. Training should also facilitate the development of a shared understanding of emergency response to improve interagency collaboration.

Whether training should be tailored towards the needs of specific services or organised jointly across multi-agency teams is open to debate and will take place at stage 6 of SSM. Given that educational psychologists and counsellors have a good knowledge base surrounding the impact of trauma and loss on individuals and communities it is likely that the training needs of organisations will differ. For such an important area, which has raised national concern, training ought to be continuous in order to reinforce prior learning and understanding and maintain confidence. However, professionals need to be aware of ongoing discussions amongst psychologists to identify whether training for suicide clusters should be different from generic training in critical incident response (Goldney et al., 2013).

5.8 Summary of findings relating to research question 3: How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?

According to SSM, problem situations are complex and confusing because of different worldviews (Checkland & Poulter, 2010). SSM is based on the premise that all professional practice occurs within a dynamic social context. With respect to the critical incident response, SSM interpreted the event from the participants' 'worldviews'. The benefit of SSM is that it is based on social constructionism which encourages multiple perspectives.

Three issues based systems and one relevant primary task were identified through SSM in response to question three. The systems were flexible enough to consider change issues that may apply to organisations separately or jointly. These four systems identified improvements to processes and procedures in the following ways; firstly, the need for protocols to inform critical incident response, these will help organisations know what to do during a critical incident, both independently and collectively. Secondly, better communication verifying systems, as good communication is considered important to the success of interagency crisis response (Waller & Uitdewilligen, 2008). Thirdly, a relevant support system, which may go some way in helping organisations become 'crisis prepared' (Simola, 2005) and resilient (Newman, 2005). Finally, appropriate training needs should be met, which should improve professional understanding of critical incidents and the impact trauma has on organisations and the people working within them.

SSM does not seek out solutions to problem situations, 'which are a mirage when faced with real life complexity' (Checkland & Poulter, 2010, p. 235), but defines key actions to change situations for the better. The agendas drawn up in preparation for the meeting at stage 6 of SSM reflect the feasible and desirable changes identified from the issues based systems and the relevant primary task. SSM is designed to encourage debate at stage 6 about possible ways to improve a critical incident response. It gives the opportunity for service managers

representing the EPS, counselling service and schools to arrive at a position which reflects accommodation of views and collaboration, rather than striving for consensus (Checkland & Poulter, 2010).

PART TWO

5.9 Limitations of the current study

The current study employed group interviews to gather data and utilised a mixed methods approach for data analysis using grounded theory and SSM. Grounded theory analysis was used to understand findings through emergent theory. SSM analysis was used to identify feasible and desirable changes to the current processes and procedures followed during a critical incident. The justification for using these approaches has been outlined in the design section (chapter 3).

The limitations to the current study reflect aspects of the study design and methodology, which brings the reliability and validity of the findings into question. Hence the conclusions drawn from the study should be tentative and treated with caution. The ways in which the researcher attempted to overcome these limitations considering the socially sensitive nature of the research are outlined below.

5.9.1 Sample population and generalisability of findings

A total of five EPs, four counsellors and twelve school staff participated in the study. The representation of school staff, who worked in large school establishments alongside many colleagues, was disproportionate to the representation of EPs and counsellors, who were members of a small professional group. The possible reasons for the relatively low numbers of school staff may be that school staff did not wish to participate, or that information was not disseminated to them through the school structure, or because they could not be released from their responsibilities. However, it is likely that the school staff who volunteered to participate were identified by the headteacher (who was

aware of the research) to represent the school organisation on the basis of their roles and responsibilities at the time of the critical incident. Hence, the results may not accurately represent the constructions and the views of the staff population in schools.

The relatively small sample size, which comprised 21 participants in total, was not considered to be problematic. Small samples are typical of qualitative research and it can be argued that the intimacy with the phenomenon rather than trying to satisfy a large sample size is more important (Rennie, et al., 1988). The unique views of the participants were elicited in line with the research paradigm reflecting a social constructionist standpoint (Burr, 1995).

A further limitation of the research is that the participants from the EPS, counselling service and schools were volunteers and their views may not have been representative of the views of other professionals in their workplace. In addition, the interviews were primarily conducted in groups, apart from one interview where only one participant attended. Whilst group interviews have the advantage of providing support for members of the group in socially sensitive research, a disadvantage is that group responses may not reflect the views of individual members within the group. However, it should be recognised that participants were under no obligation to respond to the questions during the interviews and those who did so exercised freewill. It could be argued that participants chose to share their own unique worldviews about information that was important to them and as a consequence these views were open to question by other members of the group.

The very nature of the research may have deterred some individuals from participating, given that the subject was surrounding a critical incident involving a suicide cluster. To minimise this, the letter to services and individuals (see appendices A, B, C, D, E and F) stressed the importance of keeping the information shared within the group confidential, including the statements and the details of what people say. However, participants were also made aware that confidentiality relied on the integrity and the good-will of those attending the group interviews. The researcher closely adhered to the ethical guidelines and

principles of the BPS (2006) throughout the research process and took necessary steps to ensure that participants felt at ease during the interviews and that participants were aware that once the data had been transcribed it became anonymous

The generalisability of the findings from grounded theory and SSM is questionable because of the unique phenomenon of the study. In this sense the findings may not generalise to a different critical incident occurring in a different place at a different period in time. Nevertheless, the study was not undertaken with the intention of generalising the findings, but rather to understand the phenomenon from the unique views of the participants. However, the researcher sought the view of an independent psychologist who confirmed that the findings were meaningful enough to provide some understanding of related critical incident events.

5.9.2 Reliability and validity

The concept of reliability and validity are closely related but less applicable in qualitative research than in quantitative research. Validity reflects the degree to which the researcher accurately represents the features of the phenomenon under study. Research is thought to be reliable if it can be repeated with the same data producing similar findings (Bryman, 2008).

In order to increase validity and reliability the critical realist epistemological position and its research assumptions have been made clear throughout the current study. These have been reinforced by following the guidelines of Maxwell (1992) who proposed that demonstration of 'understanding' is sufficient to determine reliability and validity in qualitative research.

Triangulation also increased the reliability and validity of the research in a number of ways. Firstly, the use of a mixed methods approach, where findings from SSM could also be validated in light of the grounded theory findings and vice versa. Secondly, feedback from stage 6 of SSM offered a validity check

where service managers attending the meeting could compare the SSM findings with their own construction of the event.

The role of the researcher in gathering and analysing the data has been acknowledged. To demonstrate inter-rater reliability an independent psychologist checked the emergent categories and the SSM conceptual models for 'understanding'. In future research, methodological issues could be overcome by checking the validity of the emergent categories from grounded theory and the SSM rich picture with the original interview groups.

5.9.3 Limitations of group interviews

Social desirability effects may have limited the research. Participants may have perceived that they were being judged by the group in their response to the critical incident and may have given socially desirable answers. To overcome these concerns reassurance was offered to the participants before and during the interviews to make it clear that there were no right or wrong answers to the questions. Furthermore, the researcher's understanding of espoused theory and theory-in use has been acknowledged. In the future, these issues can be overcome by employing different methods such as surveys or questionnaires. However, these methods may not provide such rich qualitative data.

The interview questions were based on the processes and procedures followed during a critical incident response (involving a suicide cluster), a process led enquiry narrowed the focus of the research to minimise any emotional impact. However, this may have precluded participants from mentioning other factors that they felt important and therefore limited their responses. This was not considered to be a shortcoming of the current study because the interview process aimed to generate answers to the research questions and it was thought insensitive to gather superfluous information which may have caused distress.

Given the socially sensitive nature of the research it was important to reflect on whether the participants were protected from harm during the interview process. Great care was taken by the researcher throughout the study to deal with any

foreseeable ethical issues. The potential for bias, the influence of group and the nature of the questions asked of participants during the interview process were carefully considered by the researcher to ensure that participants' psychological wellbeing was unaffected.

5.9.4 Psychological debriefing

Essentially, of benefit to the participants during the interview was the group process itself. Taking part in group interviews after experiencing a critical incident may have acted as a debriefing for the participants, a phenomenon reported in the crisis literature (e.g. Dyregrov, 1997; McCaffrey, 2004). It has been thought that critical incident stress debriefing (CISD), referred to by Dyregrov (1997) as 'a planned structured activity, organised to review in detail the facts, thoughts, impressions and reactions following a critical incident as well as providing information on typical reactions to critical events' (p.589), may help recovery from trauma. Although the group interviews in the current study were not specifically designed to offer psychological first aid in the form of CISD, arguably the group process provided the participants with an opportunity to share their thoughts, feelings and reactions to the critical incident event. In this respect, the group may have provided therapeutic support for some participants and arguably a means of closure for others.

5.9.5 Support for participants

During the group interviews participants' described their experiences of a critical incident response involving a suicide cluster; this may have evoked strong emotions. When seeking approval for the research from Cardiff University School of Psychology Ethics Committee the researcher was advised not to discuss any concerns with the participants at the end of the interviews. If the group made them want to discuss further then the researcher could refer participants to the appropriate professional support organisations (see appendix J). Contact details of support organisations and LA counselling services were given to *all* participants at the end of the study, giving them the opportunity to make contact at a later date if they wished. All individuals were treated in the

same way; none were put in a position where they had to *request* additional support, which would have singled them out. EPs were also made aware of the availability of supervision from the LA Principal Educational Psychologist if required. Additionally, EPs understood that if they had any concerns around professional issues they could obtain advice from professional bodies, such as the BPS and HCPC.

5.9.6 Limitations of using grounded theory

The emergence of no new theory from grounded theory may be explained by a number of factors, including: the small scale exploratory nature of the research, the narrow focus of the research questions, or the quality of the data (influenced by factors such as social desirability and espoused theory), as well as the techniques of data collection and data analysis. In addition, critics of grounded theory argue that categories or concepts emerge from the data rather than 'new theory' (Willig, 2006). This may have been the case for the current research as no new theory was found.

5.9.6.1 Data collection

Given the small scale, exploratory nature of the current study, an abbreviated version rather than full version of grounded theory was regarded appropriate. The rationale for the use of an abbreviated version in the design (see 3.3) was due to the research focusing on a narrow area where the original interview data was the only focus (Willig, 2006). A decision was made in the early stages of the research design that the full version of grounded theory would not be utilised because the researcher could not return to the field to collect further data. Arguably, the use of an abbreviated version of grounded theory may have modified the approach and consequently limited the richness and quality of the data. Cyclical data collection and data analysis, if this had been possible, would have allowed for theoretical saturation to be achieved through the process of refining the categories in the grounded theory analysis.

It can be argued that in the current study the group interviews allowed for rich and meaningful data to be elicited even though only 6 group interviews took place comprising of 3 professional groups (EPs, counsellors and school staff). The participants were considered to be representative of the study population and therefore the data was thought to be meaningful. However, on reflection it was optimistic to anticipate that any 'new' theory would emerge from the data given the small sample size and the use of an abbreviated version of grounded theory. Nevertheless, in the current research the emergent categories may have had explanatory power in that they could be interpreted through existing theory and research and may have provided insight into the critical incident response based on the constructions of the participants. However, recognising the limitations of using an abbreviated version of grounded theory, it may be beneficial to utilise the full version of grounded theory in future research, if the research situation permits. Alternatively, thematic analysis could be used to explore the research situation. Thematic analysis seeks to consider whether the data collected is consistent with previous research and consequently background theory can be used to analyse new data (Braun & Clarke, 2006).

5.9.6.2 Data analysis

The researcher was aware that in sensitive research there is a potential for the participants to be placed at risk of harm, particularly if they are able to identify themselves from the study. The probability of being recognised is greater when the sample size is small (Cohen, et al., 2007). Unless the data is completely untraceable, participants may be identifiable to their friends and colleagues, which may cause them upset. Of relevance is the term *deductive disclosure*, which means that 'it is possible to identify individuals (people, schools, departments etc.) in question by reconstructing and combining data' (Cohen, et al., 2007, p. 126). To deal with this anticipated ethical issue, at the outset of the study an undertaking was made by the researcher to the participants that the exact statements and details of what they say during the interview would not be disclosed (see appendix, D, E and F). The participants were told that for the purpose of the study the information would be grouped into categories.

In the current study the researcher's decision not to include verbatim quotations and interview transcripts to illustrate what was discovered meant that the transparency of the data analysis was compromised. The researcher was unable to demonstrate precisely how the data were analysed and how the emerging categories were elicited from the transcripts, making it difficult for others to interpret the data in a meaningful way. However, presented in the findings were all of the subcategories, categories and central categories or core categories that had emerged through the grounded theory analysis, these were introduced and defined. While not including verbatim material may have been considered a limitation of the current study, maintaining ethical principles in an effort to preserve the anonymity of the participants was considered paramount. The local circumstances and the research situation were such that the research needed to be ethically sound; hence, the participants remain untraceable in the current study.

5.9.7 Limitations of using SSM

The main limitation of SSM surrounds stage 6 and whether feasible and desirable changes are put into practice, particularly if organisations do not sign up to the agenda (Christis, 2005). The implementations of the recommendations and the impact they have upon current resources is contingent on the end users of the research understanding, accepting and applying the findings. The researcher's involvement in the investigation had finished at stage 6, after which the process of change was the ownership of the LA. Consequently, the full impact of SSM could not be evaluated.

The outcome of SSM may depend on a number of factors including, the biases of the investigator, the characteristics of the situation as perceived by participants, and the methodology itself. The benefit of using SSM in the current study outweighs its limitations, in that the participants 'worldview' captured by the rich picture may provide insight into the 'real world' at the time of a critical incident response (Checkland & Poulter, 2010). In positive terms, the proposed changes to systems may have provided a way forward in the future management of critical incident response by one LA and may inform future research.

5.9.8 Limitations of using a mixed method approach

One possible criticism is that the same research data were analysed twice, firstly through grounded theory and then through SSM. A mixed method approach has already been justified in the current research as both methodologies satisfy the assumptions of critical realism. Further, a wider understanding of critical incident response can be gained by using grounded theory and SSM in combination. Additionally, appropriate methods have been selected to answer the research questions (Silverman, 2010) in a novel way with the same interview data being used for different purposes.

5.9.9 The role of the researcher

When conducting qualitative research on sensitive subject matters, the role of the researcher is fundamental to the process. During interviews, irrespective of the purpose or how sensitively it is undertaken, the relationship between the interviewer and the interviewee is in essence a controlling one, as there is the need to skilfully manage the information elicited so that it remains relevant to the research question (Gillham, 2000). At the same time the interviewer should make every effort to provide the participants with an opportunity to elaborate on their answers; thus, adding sufficient depth and quality to the research. The prompts used by the researcher during the interviews were designed to guide the group interview process as well as encourage rich and detailed answers.

However, as the researcher played an active role in gathering the data there was potential for bias, particularly as the researcher was employed as an EP by the LA at the time of the critical incident and was in post when the research was undertaken. One possible source of bias, limiting the research, is when the participants' knowledge about the researcher's status / identity (even though some participants may not have met the researcher) may have led them to respond in a socially desirable way (Banister, 1994). (Social influences were referred to in 5.9.3 with respect to the group membership). The researcher had an understanding of how beliefs, values, motivation and power relationships can

impact on others and of her own assumptions and how this could impact on the participants and the research findings. To encourage the participants to speak openly and freely, before the interviews were conducted the researcher reassured participants that the researcher was only concerned about finding out about their unique views (see appendix N, interview schedule). Additionally, all participants were reassured that the research would follow appropriate ethical procedures in line with BPS guidelines and that their anonymity would be protected; thus, allowing them to be more open when responding to questions.

Arguably, the researcher having knowledge of the local context and school environment may have provided the participants working within the counselling service, school and EPS with reassurance and made them feel at ease. This may not have been the case if the researcher was a stranger and unfamiliar to the participants. Group interviews are dependent on the rapport established between interviewee and interviewer. Additionally, participants appeared confident that much wanted changes were more likely to happen if the researcher was able to disseminate the findings to the LA who had committed to the study.

The researcher acknowledged that prejudgements may have been made about the outcome of the study. To overcome this potential source of bias, the researcher has taken an objective stance as much as possible during data collection and analysis, as well as seeking the view of an independent psychologist to demonstrate inter-rater reliability in data analysis to eliminate the possibility of there being any contradictions within the findings. This ensured that the researcher allowed the categories and theories to emerge from the data as much as possible, rather than imposing her own meaning on the data. Furthermore, to maintain objectivity at stage 6 of SSM the proposed changes to critical incident response were fed back to the service managers from the EPS, counselling service and schools to allow a debate about the feasibility and desirability of the proposed changes to ensuring multiple perspectives in decision making.

Qualitative research is, by its very nature, an interpretive process whereby the researcher is central to making sense of the data. In SSM the researcher is the 'analyst', thus he/she is not considered to be independent and can affect the research situation (Checkland & Poulter, 2010). Social constructionists theorists (e.g. Burr, 1995) argue that all views are equally valid. Different researcher may interpret the same findings differently but both are worthy of consideration. People hold different constructions of reality which add to the subjective qualities and richness of qualitative research.

In essence the researcher can never be fully removed or separated from the data because the researcher has interacted with the data. This view is in line with the researcher's critical realist epistemological assumptions, which have been made explicit during the study. The researcher is aware that in qualitative research it is important that the role of the researcher and his / her contribution to the construction of the phenomenon under study is recognised. Banister (1994) highlights the important of reflexivity in qualitative research methods, at a personal level (about oneself) and functional level (about one's research), which reduces as much as possible the likelihood of research bias.

5.10 Summary of the chapter

This chapter has presented a discussion of the research findings from grounded theory and SSM. A number of emergent categories were elicited from grounded theory analysis which evoked a range of relevant theory. These were discussed with respect to question one, which asked how organisations responded to the critical incident, and question two which enquired about the joint protocols and procedures followed during the critical incident. Some categories were explained by the theories mentioned in the literature review and other categories were made sense of by considering other theories which had interpretative value. No new theory emerged from the data using grounded theory analysis.

SSM analysis generated three issue based systems and one relevant primary task which were discussed with respect to question three (how processes and

procedures could be improved during a critical incident). These four systems identified the need for feasible and desirable changes to, protocols informing critical incident response, communication verifying systems, relevant support systems, and the delivery of training programmes to inform a critical incident response.

Part two of the chapter considered the limitations of the current study and the extent to which the findings were valid and reliable. The ways in which the researcher, to some degree, overcame these limitations of the study were also discussed, with suggestions made where possible to improve future research.

6 CONCLUSION

6.1 Introduction to chapter

This final chapter provides an overview of the current research findings and the issues that these have raised. The implications for organisational response to a critical incident will be considered as well as the implications for the role of the EP. Finally, from the current study a number of interesting areas for future research have arisen.

6.2 Overview of current research findings

The current research aimed to inform and develop local area response to support the current national strategic direction in Wales (WAG, 2009) to reduce suicide and self harm and to improve multi-disciplinary response to critical incidents. The study investigated the response of the EPS, Counselling Service and schools to a critical incident that occurred in the LA between 2008 and 2009. Further, the study identified possible improvements to organisational systems in place at the time of the critical incident response. As far as the researcher is aware no previous studies have investigated responses to a critical incident involving a suicide cluster, from the viewpoint of first responders working within organisations who support children and young people in schools.

Using grounded theory analysis it was found that emergent categories could be explained by various psychological theories. Many of the emergent categories were consistent with well documented theory in the field of trauma and disaster psychology, which were reviewed earlier in the study. Other emergent categories could be interpreted by wide ranging psychology including, social constructionism, social influence, cognitive psychology, systems theory, solution oriented thinking and social influence. These theories go some way in explaining a complex multi-faceted phenomenon which impacted individuals, groups, organisations and systems.

Organisational coping mechanisms during the crisis were of particular interest. The current study highlighted that there is often a blurring of roles and responsibilities when organisations are in crisis, leading to 'diffusion of responsibility' (Latane & Darley, 1970). Furthermore, when other professionals are perceived to have expert knowledge, the power of 'informational social influence' may bring about changes to organisational communication systems (Latane, 1981). Both of these social influences may present as barriers to effective working, where the outcome may be a loss of focus and perceived control.

The current study identified that experiences of the critical incident were not the same for the EPS, counselling service and schools, even between schools there were differing perspectives. These disparities were around the level of knowledge and skills held by professionals, the amount of support the organisation received and whether organisations worked independently or collaboratively.

From the rich picture SSM generated three issue based systems and one relevant primary task. The issue based systems addressed underlying matters of concern to the organisations. These included the need for a protocol informing critical incident response, having an information verifying system in place at the time of a critical incident, as well as needing a professional support system. The relevant primary task proposed a programme of training to prepare organisations for a critical incident response.

SSM aimed to take action to improve a complex situation and encouraged multiple perspectives (Checkland and Poulter, 2010). SSM did not impose change on the organisations, instead 'feasible and desirable changes' generated from SSM were placed on an agenda to be debated by service managers at a meeting representing stage 6 of SSM (Checkland and Poulter, 2010). At this point the current study had ended and the organisations took joint ownership of the problem situation to negotiate the process of change. One benefit of the current study is that SSM provided a structure and framework for organisations to adopt in order to generate their own 'solutions' to problems to inform future

critical incident response. Not knowing whether the changes were implemented is not necessarily a limitation of the current study as SSM identified change issues which can feed into local emergency response plans as well as inform future research.

Finally, the study has highlighted a number of important implications for first responders dealing with crisis and encourages a shared understanding and joined up approach at national, regional and local levels. It is hoped that the current research will help improve EPs, school staff and counsellors understanding of critical incident response by raising awareness, improving planning, enhancing services contribution and through supervision and ongoing training.

6.3 Implications for organisational response to a critical incident

The current study emphasises that trauma exposure not only affects professionals, but impacts organisations where professionals work. As organisations are made up of individuals it can be argued that organisational response to crisis reflects the sum of its parts (coping styles of individuals) that ultimately produce 'crisis prone or crisis prepared' organisations (Simola, 2005). By way of example, resilience is a factor of personality and is also associated with organisational adaptability, which would suggest resilient organisations are made up of individuals who can adapt to 'significant life stressors' (Newman, 2005). The complex interaction between the helpee, the helper, who may also be affected by trauma, the organisation and its management system are multi-faceted and difficult to unravel.

The findings of the research highlight professional and organisational vulnerability after trauma exposure during a critical incident response. With a change in attitude in psychology, trauma exposure previously described in terms of pathology, which has negative connotations for individuals, has more recently been viewed as having positive outcomes (e.g. adversarial growth; Linley & Joseph, 2005). The current study has shown that during crisis many professionals were resilient, demonstrating an ability to adapt positively to

change when faced with adversity. This finding reinforces the view that many professionals are not likely to suffer from adverse affects of trauma in the longer-term.

The current study highlighted the concern that disasters often result in miscommunication. This has significant implications for how organisational communication systems are managed through senior management structures and how information is controlled during a critical incident. The findings show that during the critical incident information needed to be validated to prevent rumours spreading. The issue was that inaccurate information could increase anxiety and escalate behaviours. The effect of information exchanges on organisations during a critical incident is an understudied area in crisis psychology, which may be an area for future research and more relevant to suicide clusters than other crises.

In the current study professionals reported feelings of physical and mental fatigue after experiencing work overload and emotional stress. North et al. (2010) reported tensions in the workplace when personnel are expected to resume their normal day-to-day functioning in the post crisis stage of a critical incident, particularly when their duties had been suspended for some time. This study draws attention to issues relating to work ethics and the unrealistic expectations that may be placed on professionals through return to work policies.

This study supports other research which has recommended ongoing supervision for psychologists and self care advice in stress management (Hayes and Frederickson, 2008). These opportunities should be made available to all professionals who are first responders in critical incidents.

6.4 Implications for multi agency collaboration.

The *National Emergency Preparedness* guidance (Cabinet Office, 2012) expects cooperation from schools, the EPS, counselling services and other psychological support services, including voluntary agencies during an emergency response. Collaboration relates to the way organisations communicate, understand each

others roles and responsibilities and avoid duplication of work, thus engage in a meaningful way to provide better outcomes for children and young people. However, research showing the extent to which agencies *collaborate* and work together in response to emergencies in schools is practically non-existent (Alisic, 2012). In the current study, collaboration with partner agencies was variable and highlighted as area of concern. It was found, that in the main, counsellors worked in isolation during the critical incident making them feel unsupported, devalued and disempowered. This study recommends closer links with professionals employed in helping professions, including the Counselling Service.

Currently, engagement with schools at the time of a critical incident is often founded on good-will, confidence and trust and is a negotiated process based on a unique set of circumstances. Role definitions, communication and joint planning are required to provide clarity and to avoid turf battles. However, the variability of needs and situations makes it difficult for organisations to work together to operationalise disaster planning for children and young people (Woolsey and Bracy, 2010). An integrated approach to prevention and intervention in emergencies is currently being promoted through the ISPA to increase international cooperation and solidarity amongst school psychologists (Rees and Seaton, 2011). However, other agencies ought to mirror this approach. Furthermore, as well as parallel planning within diverse professions, an holistic approach that involves collaboration and integration of multi-agency services is recommended in line with recent policy and legislation (e.g. The *National Emergency Preparedness* guidance; Cabinet Office, 2012).

6.5 Implications for the development of frameworks and guidance to inform a critical incident response

Critical incidents are unique events and difficult to prepare for. In the current study many professionals acted intuitively in response to the critical incident. The level of confidence, in what to do, differed between organisations and between schools. The amount of prior experience, level of understanding and the extent of relevant training may account for some of the variability. Research participants adapted their work to meet the demands of the critical incident. Interestingly, the

current research found that few participants (EPs, counsellors or school staff) elaborated on the use of protocols and procedures to guide their actions.

In the present study SSM identified the need for a clear protocol guiding professional response to a critical incident. The benefits of having guidelines and procedures informing a critical incident response are undisputed and have been well documented. For example, to identify individuals with lead responsibilities (WAG, 2009); to inform professionals how to carry out their duties (Cabinet Office, 2004) and to encourage a joined up delivery of services (Stevenson, 2009).

National frameworks for multi-agency emergency preparedness and response are currently in place in LAs (Cabinet Office, 2012), managed at strategic (Gold), tactical (Silver) and operational (Bronze) levels. Yet, from the 'worldview' (Checkland & Poulter, 2010) of research participants there was a lack of clarity about how to respond to the critical incident. This raises the possibility that guidance may not have been translated to some of the first responders working at the operational level, or that the guidance was not well understood. Even so, it is likely that that national guidance, which is overarching, is too general and not relevant to suicide clusters, which are classified as unique, difficult to prepare for and ambiguous events. Furthermore, given that organisational crisis is 'a low probability, high- impact event' (Pearson & Clair, 1998, as cited in Simola, 2005) one would anticipate that professionals would be unprepared for such a traumatic event, where is no time to organise and plan.

As professionals working at the operational level are often first to respond to a crisis they would be responsible for alerting senior management at the tactical level (Silver group). This suggests that first responders may need emergency guidelines that are service specific to inform them of their professional responsibilities. Specific protocols and procedures can be developed for professionals and applied at a local level taking into account the needs of the locality as well as local governance and best practice. Importantly, these guidelines should dovetail into national frameworks and structures. However, it

requires noting that although research participants in the current study did not convey knowledge of specific protocols, this does not mean they do not exist.

Greater collaboration is required in crisis management to promote a shared vision in the development of protocols and guidelines, which may be specific in certain situations, for example, acts of suicide. Research suggests that a critical incident involving acts of suicide may need a different set of guidelines because they are higher in frequency and involve the behaviour of individuals in exceptional circumstances (Rees and Seaton, 2011).

When considering emergency planning, organisations require frameworks and protocols that provide structure yet allow enough flexibility to respond to a unique set of circumstances. There is evidence to suggest that resilient organisations maintain stability and consistency, but at the same time are adaptable to change when facing crisis (Simola, 2005). This would suggest that crisis support needs to be well coordinated and formalised, preferably through an emergency plan which is accessible and flexible. Furthermore, emergency plans should be informed by research which identifies different phases in emergency response for organisations to familiarise themselves with the pre-crisis, during crisis and post-crisis stages of crisis (Rizzuto & Maloney, 2008).

According to Rizzuto and Maloney (2008) having too many agencies involved and a lack of coordination can contribute to increased complexity during the operational crisis stage. In order to promote a joined up approach, the Cabinet Office (2012) aims to develop a common frame of reference incorporating concepts and language for emergency responders, which can be adopted in emergency plans. Importantly, children and young people, families and members of the community should also have the opportunity to contribute to critical incident plans as they are often the victims of trauma.

6.6 Implications for the role of the EP

EPs have a general understanding of critical incident guidelines and procedures through their role in supporting schools with sad events. EPs also apply

psychological theories, such as bereavement and loss to their practice. In the current study EPs worked at individual, group and systems levels to support school staff and pupils during the critical incident. EPs perceived that they held a pivotal role, liaising with various support organisations and senior managers in the LA. The complexities of working in crisis within systems and subsystems have implications for the role of EPs in critical incident response.

The continuity of support from external agencies was one issue raised by school staff in the current research. School staff felt that they did not have the expertise neither the capacity to provide ongoing support to pupils. Nevertheless, school staff are appropriately placed to support pupils in school as they know pupils best and being situated in schools provide consistency in care for children and young people. Therefore, it makes sense that EPs only engage in direct work with pupils if school staff have ongoing worries about their welfare. This approach is supported by research which suggest that an over reliance on external support systems is associated with reduced confidence and an increased sense of vulnerability (Vigil & Geary, 2008). The perception that school staff are over reliant on external support can send a message that pupils are vulnerable and that the school is unable to cope. There is also a danger that if EP time is consumed by case work, this leaves little capacity for consultation, collaboration and systemic work. To build resilience in schools EPs can empower school staff to support pupils. This can be achieved through consultation and through the application of psychological theories and principles to practice and the use of solution focused approaches.

It would be informative and helpful for EPSs to provide published critical incident guidance documentation for schools conveying the role of the EPS in critical incident response and the psychology underpinning best practice. Schools should also adhere to their own policies and plans which can be informed by the Department for Education (DfE, 2013). Organisations should be accountable for their own emergency plans.

Response to a critical incident is not just about following procedures, as work is hampered by a range of emotions during a crisis. EPs need to be aware of the

psychological impact of a critical incident on those responding, particularly the concept of 'shared traumatic reality' where the helper and helpee are both affected by the same trauma (Baum, 2010). In the current study school staff reported that they shared the pupils' grief. EPs need to understand how shared traumatic reality can impact professionals and subsequently influence the way their organisations operate (Baum, 2010). School personnel who are often first responders may need support for their own emotional well being. This has implications for the role of the EP in supporting school staff during a critical incident. Psychological support could be offered to school staff on an individual basis, or through group work and by providing practical advice and guidance. Training needs can be met post-crisis rather than when organisations are in the midst of crisis.

EPs should also engage in professional training in the field of disaster psychology (Yutrzenka & Naifeh, 2008). This should be both general and specific, on doctorate programmes and with ongoing opportunities offered to practicing EPs. EPs engage in collaborative practice, working in multi-agency teams, therefore any training should be offered independently to suit the requirements of professionals who specialise, as well as jointly with partner agencies. Over recent years EPs have been working more closely with related disciplines in psychology, such as organisational, clinical, forensic and occupational psychologists. The role of the EP is becoming more diverse, branching into community psychology. Hence, understanding disaster psychology from the perspective of psychologists working in related fields may be informative.

EPs work reflectively and reflexively, having the knowledge, skills and understanding of one's own emotional well being builds resilience. However, given the psychological and physiological demands of working in crisis EPs should attend to their own physical and mental health needs. To avoid lone working and to have a framework of support is important, social support and peer support with EP colleagues has been suggested (Rees and Seaton, 2011). Hayes and Frederickson (2008) advocate the use of supervision to manage stress reactions and self care needs. Structured frameworks that facilitate the

management of complex change issues are recommended for EP supervision (e.g. COMOIRA; Gameson, Rhydderch, Ellis, & Carroll, 2003; 2005).

In the current study EPs applied psychology to manage change. It would be interesting to consider what psychological interventions are used by EPs in neighbouring LAs. EPSs should communicate to schools and other agencies the psychological frameworks used in critical incident response (e.g. NOVA, Young, 2002; PFA, Everly & Flynn, 2005) and whether these are best targeted at individual, group or systems levels (Rees & Seaton, 2011). EPs can play a role in the development of school plans and contribute at systemic and strategy level, thus influencing decision making and policy, which should be informed by best practice

6.7 Future directions

The research was limited to organisational response to a critical incident from the perspectives of the EPS, counselling service and schools. Further research should be undertaken to gather the views of health professionals, such as CAMHS, about response to crisis. This could be through focus group activities, questionnaires or surveys. It is likely that CAMHS involvement would be at the post-crisis stage of a critical incident or offered directly to pupils through CAMHS referrals. Obtaining a broader picture about critical incident response to include health professionals would provide triangulation of views and a more holistic representation.

Given that organisational response to critical incidents is an understudied area (Kano & Bourque, 2007), it would be interesting to further explore the 'coping in crisis' central category that emerged from grounded theory for schools, along with its subcategories, 'disequilibrium', 'managing threats to the organisational structure' and 'controlling communication'. In the current study, it can be concluded that crisis prepared organisation manage to cope in crisis, firstly through maintaining stability to prevent a state of disequilibrium, secondly by managing and alleviating the psychological and physiological impact of the event through preserving existing structures, whilst at the same time allowing for

flexibility and contingency planning, and thirdly by preventing crisis escalation by controlling communication. Further research is needed to investigate how these factors interact and combine to create organisations that are resilient and crisis prepared.

Organisational communication exchanges and media activity appear to have a significant influence on the management of crisis and if not well controlled can create a ripple effect that cascades across systems. The impact of media-related phenomenon on acts of suicide has been well documented (Cox et al., 2012). Future research could look at the effect of non-media related communication exchanges within schools, from pupils to school staff and vice versa, to find out whether this compromises the organisational management of crisis.

In addition, it may be useful to consider personality factors and individual differences in coping styles. That is, whether individuals are resilient or vulnerable to the affects of trauma and how this impacts on organisations. Standardised questionnaires with a representative sample of professionals from each organisation may provide insight into the significance of personality variables in organisational crisis management. The data could be analysed using quantitative research analysis to find out whether there is an association between personality styles and the organisations ability to cope in crisis and maintain stability. However, there are ethical dilemmas that need addressing before undertaking such socially sensitive research. Further, quantitative measures are problematic in critical incident research, given that each crisis is unique and the findings are difficult to generalise.

Importantly, further empirical evidence should be sought to inform professionals' understanding of critical incident response. To establish good practice in emergency response and recovery, further insight should be gained from lessons learnt, as well as from the narratives and personal stories of those affected by crisis (Stevenson, 2009). Additionally, the perceptions of pupils, parents and carers and members of the community can be surveyed to incorporate a wider audience. However, researchers may be faced with ethical issues that present

as barriers to this investigation, particularly when the crisis involves acts of suicide.

6.8 Final conclusions

There are increasing worldwide concerns about the rise in crises in communities (Saari et al., 2011). The current study aimed to draw on the perspective of professionals involved in a critical incident response. There is ample literature on crisis response, usually based on large scale disasters (e.g. Saari et al., 2011; Vigil & Geary, 2008), but little research on the actual working practices of school psychologists (Rees & Seaton, 2011), school staff (Alisic, 2012) and school counsellors (as indicated by a search of the literature). Given the paucity of research in this field, the current study provides a unique contribution to an understudied research area, which considers the operational working practice and experiences of organisations responding to a school crisis. It provides an original contribution to the literature in the field of disaster psychology. The EPS, counselling service and schools offered insight into a critical incident response occurring in one LA and the impact trauma had on professionals and organisations. The current study provides a way forward for planning critical incident response by looking at change issues from the perspectives of those who had experienced the event.

EPs are well placed to respond to critical incidents in schools. The current study has implications for the role of the EP in crisis work in schools. To be effective EPs need an understanding of trauma and the impact it has on professionals and organisations. This knowledge should be acquired through doctorate training and continue as part of the ongoing professional development of an EP. Furthermore, appropriate supervision and support networks should be provided for EPs involved in crisis work.

Multi-agency collaboration is paramount in crisis work. Progress continues on the development of an integrated model of crisis response for school psychologists (Rees & Seaton, 2011). This should tie into the National *Emergency Response*

and Recovery guidance (Cabinet Office, 2013) to ensure a coordinated approach.

An extensive review of the literature has not revealed any other study which has explored the construction of EPs, counsellors and schools regarding their response to a critical incident. It is anticipated that the study will inform policy and practice so that the complexities of crisis can be better understood, which should help organisations predict, plan and prepare. The implications for information dissemination to a wider audience are obvious. The current study may go some way in informing policy and practice through information dissemination that can feed in at both local and national level.

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APPENDIX A



Dear (name of Principal Educational Psychologist)

I am a postgraduate student (part-time) in the School of Psychology, Cardiff University. As part of my doctorate research I am carrying out a study into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident. This form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

It has been agreed with *****(name) Local Authority that this research can take place within the authority. I am therefore writing to you to request permission for me to conduct focus group interviews with staff members who were working in the service at the time of the critical incident, which occurred between 2008 and 2009, and which involved a spate of suicides in the local area. As you are the Principal Educational Psychologist you are also invited to participate in the group activity if you were working in the service at the time of the critical incident. Other agencies, including Youth Service (counsellors) and the Head Teachers of three comprehensive schools within (name of authority), who were involved in the critical incident response will also be invited to contribute, separately.

The research is entitled 'An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident'.

The research aims to:

- explore responses to a critical incident involving suicides of young people in one Local Authority between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

It is anticipated that interview groups will take place during May / June 2011. The benefits of group interviews are that staff can interact with each other and experiences can be shared. The questions will focus on the process and the procedures followed during the critical incident rather than any specific event. Each group will comprise of no more than eight people and is estimated that the group activity will last no longer than one hour. Questions will be open ended and explore the following themes:

- *How do different agencies and organisations respond during a critical incident?*
- *What joint protocols / procedures are followed during a critical incident?*
- *How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?*

Group interviews will be collected via a tape recorder. The participants will be informed that there are no right or wrong answers, as the intention is just to find out their unique views. The data will be collected confidentially and staff will have an opportunity to withdraw their data whilst the researcher is still at the premises if they so wish, after which the data will be anonymised and tapes destroyed. The name of the participants will not be recorded by the researcher. Therefore, it will not be possible for information to be traced back to the participant or their organisation (even if there is only one participant). A request will be made for information to remain confidential within the group and for the statements and the details of what people say during the group interview not to be discussed after. However, I wish to make you aware that as this is a group interview I cannot guarantee that the information will not be disclosed outside of the group. As the topic of discussion is sensitive in nature the researcher will provide details of support groups / counselling services to all participants directly following the group interviews should they wish to make contact at a later stage.

If you agree for the Educational Psychology Service to be included in the research, I would be grateful if you could distribute the enclosed letter to members of staff who were involved in the critical incident response to ask them if they wish to participate. Exact dates for the researcher to conduct the group interviews at your service can be arranged so that they are convenient.

After the information from the interviews are analysed you will be invited to attend a meeting, along with Head Teachers and service managers from the Youth (counselling) Service to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible and desirable changes to the current processes and procedures (these will have been generated from the data analysis). The intention is to help inform a critical incident response plan and develop a proposal for a preventative approach, which considers early intervention during critical incidents. It is anticipated that this meeting will take place during (date). I will contact you by letter nearer the time to inform you of the arrangements and to provide you with more information about the purpose of the meeting.

I will contact you within the next few weeks to confirm that you are happy for your service to be involved and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff

University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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Tel: 029 2087 4007



Dear (name of Counselling Manager)

I am a postgraduate student (part-time) in the School of Psychology, Cardiff University. As part of my doctorate research I am carrying out a study into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident. This form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

It has been agreed with ****(name) Local Authority that this research can take place within the authority. I am therefore writing to you to request permission for me to conduct group interviews with counsellors who were working within comprehensive schools at the time of the critical incident, which occurred between 2008 and 2009, and which involved a spate of suicides in the local area. The three schools were selected because of the high numbers of referrals to the Educational Psychology Service at the time of the critical incident. As you are the Counselling Manager you are also invited to participate in the group activity if you were working in the service at the time of the critical incident. Other agencies, including the Educational Psychology Service and the Head Teachers of three comprehensive schools within (name of authority), who were involved in the critical incident response will also be invited to contribute, separately.

The research is entitled 'An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident'.

The research aims to:

- explore responses to a critical incident involving suicides of young people in one Local Authority between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

It is anticipated that group interviews will take place during May/ June 2011. The benefits of group interviews are that staff can interact with each other and experiences can be shared. The questions will focus on the process and the procedures followed during the critical incident rather than any specific event. Each group will comprise of no more than eight people and is estimated that the group interview will last no longer than one hour. Questions will be open ended and explore the following themes:

- *How do different agencies and organisations respond during a critical incident?*
- *What joint protocols / procedures are followed during a critical incident?*
- *How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?*

Group interviews will be collected via a tape recorder. The participants will be informed that there are no right or wrong answers, as the intention is just to find out their unique views. The data will be collected confidentially and staff will have an opportunity to withdraw their data whilst the researcher is still at the premises if they so wish, after which the data will be anonymised and tapes destroyed. The name of the participants will not be recorded by the researcher. Therefore, it will not be possible for information to be traced back to the participant or their organisation (even if there is only one participant). A request will be made for information to remain confidential within the group and for the statements and the details of what people say during the focus group interview not to be discussed after. However, I wish to make you aware that as this is a group interview I cannot guarantee that the information will not be disclosed outside of the group. As the topic of discussion is sensitive in nature the researcher will provide details of support groups / counselling services to all participants directly following the focus groups should they wish to make contact at a later stage.

If you agree for school counsellors to be included in the research, I would be grateful if you could distribute the enclosed letter to members of staff who were involved in the critical incident response at the three named schools to ask them if they wish to participate. Exact dates for the researcher to conduct the focus groups at your service can be arranged so that they are convenient.

After the information from the focus groups is analysed you will be invited to attend a meeting, along with Head Teachers and service managers from the Educational Psychology Service to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible and desirable changes to the current processes and procedures (these will have been generated from the data analysis). The intention is to help inform a critical incident response plan and develop a proposal for a preventative approach, which considers early intervention during critical incidents. It is anticipated that this meeting will take place during (date). I will contact you by letter nearer the time to inform you of the arrangements and to provide you with more information about the purpose of the meeting.

I will contact you within the next few weeks to confirm that you are happy for your service to be involved and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff

University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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Dear (name of Head Teacher)

I am a postgraduate student (part-time) in the School of Psychology, Cardiff University. As part of my doctorate research I am carrying out a study into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident. This form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

It has been agreed with **** (name) Local Authority that this research can take place within the authority. I am therefore writing to the Head Teachers of three comprehensive schools within Bridgend, who were involved in a critical incident response to request permission for me to conduct group interviews with members staff who were working in the school at the time of the critical incident, which occurred between 2008 and 2009, and involved a spate of suicides in the local area. Your school is one of the three comprehensive schools invited to participate in the research. As you are the Head Teacher of **** (name) Comprehensive school you are also invited to participate in the group activity if you were working in the school at the time of the critical incident. Other agencies, including the Youth Service (counsellors) and the Educational Psychology Service, who were involved in the critical incident response, will also be invited to contribute, separately.

The research is entitled 'An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident'.

The research aims to:

- explore responses to a critical incident involving suicides of young people in one Local Authority between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

It is anticipated that group interviews will take place during the summer term 2011. The benefits of group interviews are that staff can interact with each other and experiences can be shared. The questions will focus on the process and the

procedures followed during the critical incident rather than any specific event. Each group interview will comprise of no more than eight people and is estimated that the group activity will last no longer than one hour. Questions will be open ended and explore the following themes:

- *How do different agencies and organisations respond during a critical incident?*
- *What joint protocols / procedures are followed during a critical incident?*
- *How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?*

Group interviews will be collected via a tape recorder. The participants will be informed that there are no right or wrong answers, as the intention is just to find out their unique views. The data will be collected confidentially and staff will have an opportunity to withdraw their data whilst the researcher is still at the premises if they so wish, after which the data will be anonymised and tapes destroyed. The name of the participants will not be recorded by the researcher. Therefore, it will not be possible for information to be traced back to the participant or their organisation (even if there is only one participant). A request will be made for information to remain confidential within the group and for the statements and the details of what people say during the group interview not to be discussed after. However, I wish to make you aware that as this is a group interview I cannot guarantee that the information will not be disclosed outside of the group. As the topic of discussion is sensitive in nature the researcher will provide details of support groups / counselling services to all participants directly following the group interview should they wish to make contact at a later stage.

If you agree for your school to be included in the research, I would be grateful if you could distribute the enclosed letter to members of staff who were involved in the critical incident response to ask them if they wish to participate. Exact dates for the researcher to visit your school can be arranged so that they are convenient.

After the information from the group interviews are analysed you will be invited to attend a meeting, along with the Head Teachers from other schools and service managers from the Counselling Service and the Educational Psychology Service to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible and desirable changes to the current processes and procedures (these will have been generated from the data analysis). The intention is to help inform a critical incident response plan and develop a proposal for a preventative approach, which considers early intervention during critical incidents. It is anticipated that this meeting will take place during (date). I will contact you by letter nearer the time to inform you of the arrangements and to provide you with more information about the purpose of the meeting.

I will contact you within the next few weeks to confirm that you are happy for your school to be involved and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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Date

Dear Educational Psychologist

I am a postgraduate student (part-time) in the School of Psychology, Cardiff University. As part of my doctorate research I am carrying out a study into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident. This form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

It has been agreed with **** (name) Local Authority that this research can take place within the authority. Your Principal Educational Psychologist has also kindly given permission for your service to be involved in the research. I am therefore writing to you to provide you with an outline of the study and to ask if you would be prepared to participate in the research.

The research involves undertaking group interviews with members of staff who were working in the service at the time of a critical incident, which occurred between 2008 and 2009, and which involved a spate of suicides in the local area. Mr xxxxx, Principal Educational Psychologist has also been invited to attend the focus groups activities if he was working in the service at the time of the critical incident.

The research is entitled ‘An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident’.

The research aims to:

- explore responses to a critical incident involving suicides of young people in one Local Authority between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

It is anticipated that group interviews will take place during May / June 2011. The benefits of group interviews are that staff can interact with each other and experiences can be shared. You will be asked a few questions which will focus on the process and the procedures followed during the critical incident rather than any specific event. Each group interview will comprise of no more than eight people and it is estimated that the group activity will last no longer than one hour. Questions will be open ended and explore the following themes:

- *How do different agencies and organisations respond during a critical incident?*
- *What joint protocols / procedures are followed during a critical incident?*
- *How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?*

Group interviews will be collected via a tape recorder. There are no right or wrong answers to questions, as the intention is just to find out your unique views. The data will be collected confidentially and you will have an opportunity to withdraw your data whilst the researcher is still at the premises if you so wish, after which the data will be anonymised and tapes destroyed. The exact statements and details of what you say will not be disclosed by the researcher because for the purpose of this study information will only need to be grouped into categories. Your name will not be recorded by the researcher. Therefore, it will not be possible for information to be traced back to you or your organisation (even if you are the only participant). You will be asked that information remain confidential within the group and for the statements and the details of what people say during the group interview not to be discussed after. However, I wish to make you aware that as this is a group interview I cannot guarantee that the information will not be disclosed outside of the group. As the topic of discussion is sensitive in nature the researcher will provide details of support groups / Human Resources counselling services to all participants directly following the focus groups should they wish to make contact at a later stage.

After the information from the group interviews are analysed the Principal educational Psychologist will be invited to a meeting with other Local Authority services / organisations to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible and desirable changes to the current processes and procedures (which have been generated as an outcome of the data analysis). The intention is to help inform a critical incident response plan and develop a proposal for a preventative approach, which considers early intervention during critical incidents. It is anticipated that this meeting will take place during (date).

I will contact you within the next few weeks to confirm that you are happy to be involved group interviews and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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Date

Dear School Counsellors

I am a postgraduate student (part-time) in the School of Psychology, Cardiff University. As part of my doctorate research I am carrying out a study into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident. This form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

It has been agreed with **** (name) Local Authority that this research can take place within the authority. **** (name) Counselling Manager, Youth Services has also kindly given permission for counsellors to be involved in the research. I am therefore writing to you to provide you with an outline of the study and to ask if you would be prepared to participate in the research.

The research involves undertaking group interviews with members of staff who were working in the service at the time of a critical incident, which occurred between 2008 and 2009, and which involved a spate of suicides in the local area. The Counselling Manager has also been invited to attend the group interviews if she was working in the service at the time of the critical incident.

The research is entitled 'An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident'.

The research aims to:

- explore responses to a critical incident involving suicides of young people in one Local Authority between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

It is anticipated that group interviews will take place during May / June 2011. The benefits of group interviews are that staff can interact with each other and experiences can be shared. You will be asked a few questions which will focus on the process and the procedures followed during the critical incident rather than any specific event. Each group will comprise of no more than eight people and it is estimated that the group interviews will last no longer than one hour. Questions will be open ended and explore the following themes:

- *How do different agencies and organisations respond during a critical incident?*
- *What joint protocols / procedures are followed during a critical incident?*
- *How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?*

Group interviews will be collected via a tape recorder. There are no right or wrong answers to questions, as the intention is just to find out your unique views. The data will be collected confidentially and you will have an opportunity to withdraw your data whilst the researcher is still at the premises if you so wish, after which the data will be anonymised and tapes destroyed. The exact statements and details of what you say will not be disclosed by the researcher because for the purpose of this study information will only need to be grouped into categories. Your name will not be recorded by the researcher. Therefore, it will not be possible for information to be traced back to you or your organisation (even if you are the only participant). You will be asked that information remain confidential within the group and for the statements and the details of what people say during the group interview not to be discussed after. However, I wish to make you aware that as this is a group interview I cannot guarantee that the information will not be disclosed outside of the group. As the topic of discussion is sensitive in nature the researcher will provide details of support groups / counselling services to all participants directly following the focus groups should they wish to make contact at a later stage.

After the information from the group interviews are analysed the Principal Youth Officer, Youth Services will be invited to a meeting with other Local Authority services / organisations to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible and desirable changes to the current processes and procedures (which have been generated as an outcome of the data analysis). The intention is to help inform a critical incident response plan and develop a proposal for a preventative approach, which considers early intervention during critical incidents. It is anticipated that this meeting will take place during (date).

I will contact you within the next few weeks to confirm that you are happy to be involved group interviews and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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Tel: 029 2087 4007



Date

Dear Class Teacher/ Support Worker (name of Comprehensive School)

I am a postgraduate student (part-time) in the School of Psychology, Cardiff University. As part of my doctorate research I am carrying out a study into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident. This form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

It has been agreed with **** (name) Local Authority that this research can take place within the authority. Your Head Teacher has also kindly given permission for your school to be involved in the research. I am therefore writing to you to provide you with an outline of the study and to ask if you would be prepared to participate in the research.

The research involves undertaking group interviews with members of staff who were working in the service at the time of a critical incident, which occurred between 2008 and 2009, and which involved a spate of suicides in the local area. **** (name), Head Teacher has also been invited to attend the focus groups activities if he was working in the school at the time of the critical incident.

The research is entitled 'An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident'.

The research aims to:

- explore responses to a critical incident involving suicides of young people in one Local Authority between 2008 and 2009.
- identify interactive exchanges between the school organisation and outside agencies.
- improve multi-disciplinary response to critical incidents and provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident.

It is anticipated that group interviews will take place during June / July 2011. The benefits of focus group interviews are that staff can interact with each other and

experiences can be shared. You will be asked a few questions which will focus on the process and the procedures followed during the critical incident rather than any specific event. Each interview group will comprise of no more than eight people and it is estimated that the group activity will last no longer than one hour. Questions will be open ended and explore the following themes:

- *How do different agencies and organisations respond during a critical incident?*
- *What joint protocols / procedures are followed during a critical incident?*
- *How can existing protocols / procedures informing responses during a critical incident be improved both within organisations and when joint working?*

Group interviews will be collected via a tape recorder. There are no right or wrong answers to questions, as the intention is just to find out your unique views. The data will be collected confidentially and you will have an opportunity to withdraw your data whilst the researcher is still at the school if you so wish, after which the data will be anonymised and tapes destroyed. Your name and the name of your school will not be recorded by the researcher. Instead the groups will be given a random number and information will be recorded against a number and not a name. Therefore, it will not be possible for information to be traced back to either you or your school (even if you are the only participant). The exact statements and details of what you say will not be disclosed by the researcher because for the purpose of this study information will only need to be grouped into categories. You will be asked that information remain confidential within the group and for the statements and the details of what people say during the group interview not to be discussed after. However, I wish to make you aware that as this is a group interview I cannot guarantee that the information will not be disclosed outside of the group. As the topic of discussion is sensitive in nature the researcher will provide details of support groups / Human Resources counselling services to all participants directly following the group interview should they wish to make contact at a later stage.

After the information from the group interview is analysed the Head Teacher of your school along with Head Teachers from other schools will be invited to a meeting with other Local Authority services to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible and desirable changes to the current processes and procedures (which have been generated as an outcome of the data analysis). The intention is to help inform a critical incident response plan and develop a proposal for a preventative approach, which considers early intervention during critical incidents. It is anticipated that this meeting will take place during (date).

I will contact you within the next few weeks to confirm that you are happy to be involved group interviews and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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Cardiff University
Tower Building
Park Place
Cardiff
Wales
CF10 3AT
Email: psychethics@cf.ac.uk
Tel: 029 2087 4007



School of Psychology, Cardiff University

Consent form - services

I understand that my participation in this research will involve being asked questions during a group interviews about my views on the response to a critical incident, which occurred between 2008 and 2009 in the Local Authority, which involved a spate of suicides. The questions will focus on the processes and procedures in place at the time, rather than the event itself.

I understand that the group interviews will be tape recorded and will last approximately one hour.

I understand that the information provided by me as a member of the group will be confidential. I will be asked not to discuss statements and the details of what people say after the group interview has finished. I understand that the tape recordings will be transcribed and that this anonymous data may be retained indefinitely for research purposes. I understand once the data is held anonymously it will be impossible to trace the information back to me.

I understand that participation in this research is entirely voluntary and that I can withdraw from the study at any time without giving a reason. However, once the researcher leaves the site the information given by me will be transcribed and coded and held anonymously.

I understand that I am free to ask any questions at any time. I am free to discuss any concerns with Dr. Simon Griffey (supervisor). The contact details are provided below.

I also understand that at the end of the research I will be provided with additional information and feedback about the purpose of the study. The research is about a sensitive topic and, as such, I will be given a booklet produced by the Local Authority which provides details of support organisations / HR counselling services should I feel the need to contact them in the future.

I,(NAME) consent to participate in the study conducted by Lorraine Silver, School of Psychology, Cardiff University, under the supervision of Dr. Simon Griffey.

Signed:

Date:

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School of Psychology, Cardiff University

Consent form - school staff

I understand that my participation in this research will involve being asked questions during a group interview about my views on the response to a critical incident, which occurred between 2008 and 2009 in the Local Authority, which involved a spate of suicides. The questions will focus on the processes and procedures in place at the time, rather than the event itself.

I understand that the group interviews will be recorded and will last approximately one hour.

I understand that the information provided by me as a member of the interview group will be confidential. The information given by the group will be allocated a random number and neither my name nor the name of the school in which I work will be recorded. I will be asked not to discuss statements and the details of what people say after the group interview has finished. I understand that the tape recordings will be transcribed and that this anonymous data may be retained indefinitely for research purposes. I understand once the data is held anonymously it will be impossible to trace the information back to me.

I understand that participation in this research is entirely voluntary and that I can withdraw from the study at any time without giving a reason. However, once the researcher leaves the site the information given by me will be transcribed and coded and held anonymously.

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An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident.

Debrief for participants

Thank you for participating in this research. The purpose of the research is to find out how different organisations responded during a critical incident which took place between 2008 and 2009 which involved a spate of suicides. The aim of the research is to investigate how procedures could be improved.

There are no right or wrong answers to the group interview questions. Your opinion is valued and your views respected. Your responses will be kept only for the purpose of this research. The information that you have given will be held anonymously, which means that it will be impossible to trace it back to you or your organisation. You have the opportunity to withdraw your information without explanation whilst the researcher is still visiting your school / organisation.

As the topic is sensitive and to reduce any emotions you may feel, the group interview questions related to the processes and procedures in place at the time of the critical incident rather than any specific event. If the group makes you want to discuss further then I can refer you to the appropriate professional organisations. I will provide you with contact details of support organisations and Local Authority counselling services if you should wish to contact them at a future date.

Please contact either the university supervisor (Dr Simon Griffey) or myself (Lorraine Silver) if you wish to know more about the research or have any further questions.

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Date

Dear (*****name of Service manager / Head Teacher*****)

An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident.

Thank you once again for agreeing for (*****name of service / school***) to participate in the focus group interviews, which took place in April 2011, which explored various agencies responses to a critical incident involving suicides of young people in the Local Authority between 2008 and 2009. As mentioned in my previous letter, this form of research is valuable as the proposed project is intended to help inform a critical incident response plan to reduce suicide and suicide attempts. The aim is to encourage multi-agency working to improve structures of referral, support and interagency collaboration.

The information provided by the interview groups has now been transcribed and analysed using a procedure known as Soft Systems Methodology, which comprises of a number of stages. As the (*****name of position in service *****/ Head Teacher of ***** name of School) you are invited to attend a meeting, along with (put in the word **other** if relevant) Head Teachers and service managers from (*****name the services) to discuss how to improve multi-disciplinary responses to critical incidents by considering whether any proposed changes to the current processes and procedures (identified through the current research) are feasible and desirable. This represents stage 6 of Soft Systems Methodology. There will also be an opportunity to discuss how any agreed changes to improve the situation can be implemented, monitored and reviewed. The researcher will also attend the meeting but will not contribute to the debate nor make decisions.

It is anticipated that the agreed changes made by the contributing agencies / organisations which, for the purpose of the current research are the Educational Psychology Service, Youth Service and schools, will tie into the suicide prevention strategy in one Local Authority and the corporate plan on suicide prevention. This will support a Welsh Government policy directive for a reduction in suicide and suicide attempts.

It is anticipated that the meeting will take place on (*****date) and will last approximately one hour. You will be provided with an agenda for the meeting when you arrive. The information provided by you at the meeting will be treated as confidential.

The responses of other participants and contributors should be kept confidential and should not be discussed after the meeting. The information provided at the meeting will be held in a secure place by the researcher and only the name of the services will be recorded rather than the person in attendance.

I will contact you within the next few weeks to confirm that you are happy to attend the meeting and to answer any questions you may have about the research. In the meantime please do not hesitate to contact me by telephone or by email at Cardiff University, as detailed below. The name of my supervisor is Dr. Simon Griffey, Director Post-Qualification DEdPsy, Cardiff University. His details are provided below if you have any questions concerning the research.

Many thanks in advance for your consideration of this project. Please let me know if you require further information.

Regards,

Lorraine Silver, (Postgraduate students DEdPsy Professional Training Programme).

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School of Psychology, Cardiff University

Consent form – service managers and Head Teachers

I understand that my participation in this research will involve contributing to a meeting to discuss how to improve multi-disciplinary responses to critical incidents by considering feasible, desirable and relevant changes to the current processes and procedures to a critical incident response. This meeting represents stage 6 of Soft Systems Methodology, which has been explained to me. The discussions at the meeting will focus on processes and procedural changes to inform multi agency responses.

I understand that the meeting will last approximately one hour.

I understand that participation in this research is entirely voluntary and that I can withdraw from the meeting at any time without giving a reason.

I understand that the information provided by at the meeting will be confidential. I will be asked not to discuss statements and the details of what people say after the focus group interview has finished. The information will be held in a secure place by the researcher and only the name of the services will be recorded rather than the person in attendance.

I understand that I am free to ask any questions at any time. I am free to discuss any concerns with myself or Dr. Simon Griffey (supervisor). The contact details are provided below.

I also understand that at the end of the research I will be provided with additional information and feedback about the purpose of the study. The research is about a sensitive topic and as such I will be given a booklet produced by the Local Authority which provides details of support organisations / Local Authority counselling services should I feel the need to contact them in the future.

I,(NAME) consent to participate in the study conducted by Lorraine Silver, School of Psychology, Cardiff University, under the supervision of Dr. Simon Griffey.

Signed:

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An investigation into the interaction between various Local Authority agencies involved in crisis intervention work during a critical incident.

Debrief for participants

Thank you for participating in this research. The purpose of the research is to find out how different organisations responded during a critical incident which took place between 2008 and 2009, which involved a spate of suicides. The aim of the research is to investigate how procedures could be improved.

Your opinion is valued and your views are respected and will be recorded by the researcher and remain confidential. Your responses will be kept only for the purpose of this research. The information will be held in a secure place by the researcher and only the name of the services will be recorded not your name. You have the opportunity to withdraw your information without explanation before the close of the meeting.

As the topic is sensitive, to reduce any emotions you may feel, the group interview questions relate to the processes and procedures in place at the time of the critical incident rather than any specific events. However, I am happy to discuss any concerns you have about the research after the meeting, I will also provide you with contact details of support organisations and Local Authority counselling services if you should wish to contact them at a future date.

Please contact either the university supervisor (Dr Simon Griffey) or myself (Lorraine Silver) if you wish to know more about the research or have any further questions.

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Interview schedule

This is what I will say to participants at the beginning of the focus group activity:

‘Thank you for offering to take part in the research. As you are already aware, the study is about how Local Authority services and organisations responded during the time of a critical incident, which occurred between 2008 and 2009, and which involved a spate of suicides in the local area. The aim of the research is to improve multi-disciplinary response to critical incidents and to provide opportunities to develop a proposal for a preventative approach, which considers early intervention at the time of a critical incident. Other services will also be involved in focus group activities.

‘There are no right or wrong answers to questions. I am only concerned about finding out about your unique views. I am collecting your responses confidentially and I ask that information remain confidential within the group and that the statements and the details of what people say during the focus group interview are not discussed after.

‘You can request for your data to be withdrawn from the study whilst I am visiting your premises. After which, the data will be anonymised and the tapes holding the interview information will be wiped and destroyed. This means that it will be impossible for your responses to be traced back to you personally.

‘For the focus group questions I will ask you will be about the processes and procedures followed during the critical incident, not about the events themselves’.

The questions and prompts I will ask the participants during the focus group are as follows:

1. Firstly, can you tell me briefly about the structure of your organisations?
2. How did your organisations respond during the critical incident?

Examples of prompts:

- (general) ‘can you tell me more about that?’
- (in order to bring them back to the structure of their organisation) ‘can you tell me more about the structure of your organisation?’ e.g. physical layout, departmental structure, staff hierarchy, patterns of communication.
- (to bring them back to processes) ‘can you tell me more about the process that took place?’ e.g. planning, patterns of communication, decision making, monitoring.
- (to bring them back to processes) ‘Can you clarify what was important about that process?’

3. What joint protocols and procedures were followed during the critical incident?

Example of prompts:

- (general) ‘can you tell me more about that?’

- (to bring them back to processes) ‘can you tell me more about the processes and how you worked with other agencies?’ e.g. planning, patterns of communication, decision making, monitoring.
- (to bring them back to processes) ‘Can you clarify what was important about that process?’

4. How can the processes and procedures be improved?

- a) within your own organisation?
- b) when joint working?

Example of prompts:

- (general) ‘can you tell me more about that?’
- (to bring them back to processes) ‘can you tell me more about how the process can be improved?’ e.g. planning, patterns of communication, decision making, monitoring.

At the end of the interview I will thank them for their participation, remind them of their right to withdraw and debrief the participants.

Findings from grounded theory analysis

Analysis of the data were based on the procedures adopted by Van Vliet (2008). Summarised below is the procedure that followed. Through the process of coding the data was categorised for meaning. Sorting was organised through coding categories to elicit central categories. Subsequently core categories were identified and a central category defined.

Question 1. How do different agencies and organisations respond during a critical incident?

1. Schools

Coping in crisis (central category)

a) Disequilibrium (category)

Loss of control (subcategory)

Intense
Impacting
Relentless
Enduring
Pressure
Chaos
Crazy
Exhausting
Shock
Worry
Stress
Panic

Coping with threats to knowledge and skills (subcategory)

Procedure
Knowledge
Experience
Expertise
Specialists
Learning
Unique
Awareness

b) Managing threats to the organisational structure (category)

Managing crisis (subcategory)

Coping
Managing
Controlling
Dealing
Reacting

Reorganisation (subcategory)

Hierarchy
Leadership
Flexibility
Consistency

Collaboration (subcategory)

Supporting
Enabling
Empowering
Facilitating
Monitoring
Coordinating
Isolation
Unsupported
Alone

c) Controlling Communication (category)

Minimising (subcategory)

Low key
Sensitivity

Authenticating (subcategory)

Transparent
Accuracy
Reliability
Trustworthiness
Rumour

Disseminating (subcategory)

Top down and bottom up
Collaborating
Communicating
Disseminating
Advising

2. Counselling Service

Responding to Crisis (central category)

a) Extending working practices (category)

Hierarchy
Communication from school to counselling manager
Peripatetic
Coordination
Capacity issue
Crisis
Monitoring

b) Maintaining consistency (category)

Link schools – relationships
Continuity

Familiarity

c) Maintaining professional boundaries (category)

Counselling for pupils

Confidentiality

Boundaries

d) Hysteria (category)

High alert

Contagion

Panic

Wildfire

Virus

Spreading

Crisis

**3. Educational Psychology Service
Managing change (central category)**

a) Pivotal role (category)

Hierarchical structure

Top down

Communication through management

Approved

Allocated

Responsibility

Expectation

Work distribution

Consistent

Collective

Shared responsibility

Levels of response

b) Emergent process (category)

Emergent

Not experienced

Unprecedented

Undefined

Emergent

Spontaneity

Reactive

Pressure

Demands

Overwhelming

Change issues – routines

c) Empowering others (category)

Expertise

Skilling up others

Empowering

Providing confidence
Support

Question 2. What joint protocols / procedures are followed during a critical incident?

1. Schools

Crisis support (central category)

a) Interagency support (category)

Strategy
Instructions
Guidance
Informing
Advising
Liaising Process Ad hoc
Information giving
Decisions
Manage
Support
Confidence
Isolation
Unsupported
No advice
Resource capacity
Short lived support
Longer term needs
Alone

b) Adaptation (category)

Adaptation
Trial and error
Evolving
Reactive
Learning
New experience

c) Shared grief (category)

Confusion
Aftermath of emotion
Staff and pupils emotional identifying with grief
Ramifications longer term.
Genuine vs curious
Disturbing
Craving normality
Sharing grief

2. Counselling Service

Coping with crisis (central category)

a) Working in isolation (category)

Isolation
Lack of communication
Duplication
Lack of feedback
Conjunction
Multi agency
Working discreetly
Expert
Onward referral
Piecemeal

b) Overload (category)

Handing over / disempowered
Imposed
Waiting room

3. EPS

Collaboration (central category)

a) Multi-agency coordination (category)

Relationships
Parallel working
Protocols working progress
Protocol developing
Script
Cohesion
Coordinate and liaise
Communication
Information sharing
Levels of response
Liaising multi agency

b) Adaptation (category)

Random / inconsistent
No process
Clarity – lack of
Unprecedented
Intuitively
Reflection – lessons learnt
Using skills to equip
Knowledge base
Self preservation

Rich picture (SSM)

