

CRISIS PROCEDURES MANUAL

Saimaa University of Applied Sciences

Approved by the Management Group of the University of Applied Sciences 22.05.2008

Approved by the Board of the University of Applied Sciences 11.06.2008

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1 INTRODUCTION

1.1 A crisis at the university

A crisis usually means when somebody gets into a situation in which his/her previous experience and means are insufficient for comprehending the new situation and for coping with it psychologically.

Crises can be divided into *life crises (development crises) and traumatic crises*. Normal crises that are part of development and growing up can lead to such events as leaving home, getting married, having children and divorce. Most people cope with these events on their own, even though sometimes coping may require great effort. ***Traumatic crises are caused by a sudden, unexpected and unusually powerful event, which may induce considerable suffering in anyone.***

Such events may include the death of a loved one, suicide or attempted suicide, serious illness, an accident, being the victim of violence or being involved in a near miss. Traumatic events are unpredictable and uncontrollable. They threaten key values in life and cause a major change in the life of the person concerned. Such an event cannot be controlled, and normal psychological means of processing are inadequate to help the person get over it. Traumatic events (e.g. catastrophes) often affect large group of people too.

This crisis procedures manual has been prepared as an aid to dealing with traumatic crises or their preceding problem situations in an academic community. A crisis situation may entail the need for immediate extra help and the administering of first aid. Because of this, the manual contains instructions for making an emergency call and for administering first aid.

1.2 Why a crisis procedure manual is needed

A shocking event in a person's life may cause traumatic reactions, which significantly affect not only the individual concerned but also his/her surrounding community. Correctly executed action can support both the individual and the community in their return to everyday life.

A plan drawn up in advance ***helps people to act in a controlled manner in a crisis***. When an accident occurs, there is not much time to think. Staff are subject to the same reactions as students, and, without a plan, control of the situation can be lost at a critical stage.

Uncontrolled crisis situations are left to smoulder and may manifest themselves in the longer term in the form of a weakening of the community's ability to act. In its crisis procedures, an institute may provide ***a model of how difficult situations can be dealt through co-operative efforts and how they can be coped with.***

This crisis procedures manual will help the community to act in a stressful situation when it is known that something must be done. In the best case, such action will ***significantly alleviate the adverse effects of the crisis, and support the recovery of both the students and staff.***

2 FACULTY CRISIS TEAM AND ITS FUNCTIONS

2.1 Crisis team

CRISIS TEAMS FOR EACH FACULTY ARE IN AN APPENDIX

**CHANGES TO CONTACT PERSONS MUST BE NOTIFIED TO THE RECTOR OF THE
OFFICE OF THE UNIVERSITY RECTOR / EEVA HYVÖNEN**

Please note:

- A crisis team will convene at the request of the team leader whose student the matters concerns
- The team leader will call the team together once he/she has received information concerning the event.

2.2 Crisis team functions

The basic function of a university crisis team is to decide on support functions and communication procedures following a traumatic event:

1) Investigation of the situation

- what has happened, what information has been received about it, has the information been verified
- have some support functions already been initiated

2) Operational levels

- the whole university
- the staff
- a group of students
- individual students

3) Communication about the incident

- who is to be informed
- how should this be done to avoid causing a sensation or unnecessary rumours
- what kind of reactions can be expected, from whom
- are the police aware of the incident, should they be informed
- should families be notified

4) Evaluation of the need for support functions

- who does the incident closely concern, who less so
- what is the need for staff support
- what support functions will be used
- is external assistance required
- who will provide help, where and when
- for how long are support functions required

5) Remembrance of a death

- should a remembrance occasion be organised at the university
 - for the individual's own circle or for the whole faculty
 - is the occasion also open to the student's family
 - time and place of the remembrance ceremony, information officer and organiser
- who will take part in the funeral

6) Communication

- who will act as information officer – usually the Dean of Faculty / Rector
- might the event arouse national interest
- how much information should be given to the media
 - protection of those concerned!
- should a written press release be prepared
- should a time and place be booked for a press conference
- is communication assistance required

7) Evaluation of the legal liability of the university

- will there be court hearings or legal proceedings
- what consequences might be expected
- from where is legal help available

The crisis team should also agree on the following issues:

Internal allocation of tasks

- Dean of Faculty to be team leader (to be agreed when different units are operating in the same faculty)
- rough allocation of tasks should be agreed in advance, then more specific allocation can be done by the team leader

Threshold for convening

- the team specifies situations in which it should convene (there is no harm in a low threshold for convening, as long as the team evaluates a situation bearing in the mind the need for its own actions)

The team is called to convene by its leader. If some other member of the crisis team wants to call the team together, he/she should contact the leader

Allocation of tasks relating to student health and the crisis team

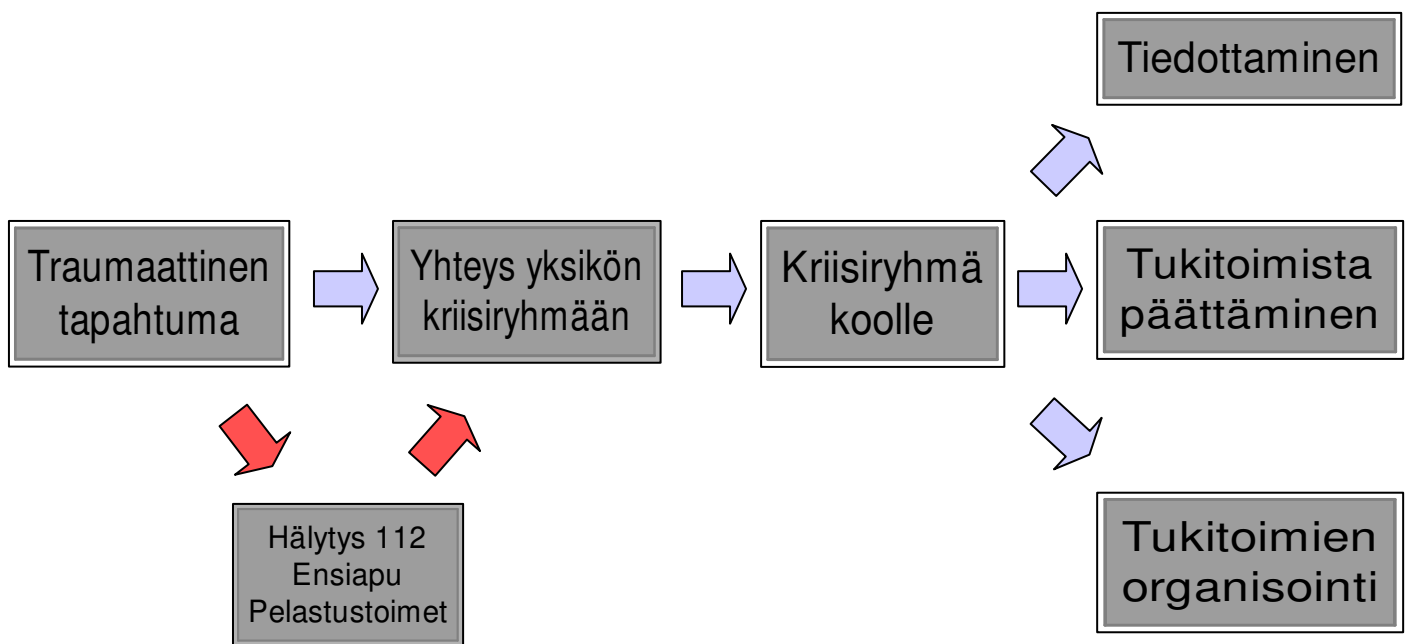
- the remit of the crisis team only includes handling traumatic crises. Other kinds of crises, such as personal crises and their care are the responsibility of student, occupational healthcare or line organisations

Contacting team members as quickly as possible

- contact details must be kept up-to-date, and team members are obliged to keep their e-calendar up-to-date, so that they can always be contacted if required

2.3 Faculty procedures in the event of a crisis

If a situation results in injuries, and / or the rescue services or police are required, make an emergency call before alerting the faculty crisis team!



Communication

Traumatic event

Contact faculty crisis team

Crisis team convene

Decisions on support functions

Emergency call 112
First aid
Rescue services

Organisation of support functions

3 GENERAL ACTION IN A CRISIS SITUATION

3.1 Clarify information about the event

When you have received information about an accident / emergency concerning a student or member of staff, *check the following information:*

- The identity and telephone number of the caller / information provider?
- What has happened?
- When and where?
- The number of victims?
- What is the current situation?
- Has anyone else initiated action?

3.2 Call the emergency services number 112

Procedures for making an emergency call:

- Tell briefly what has happened
- Give an exact address
- Do not hang up before you are told to do so
- If necessary give directions and ensure that access is clear
- Keep the telephone free so that further information can be requested.

3.3 Rescue those in danger

After making an assessment of the situation and an emergency call, rescue those in danger:

- Approach with caution – do not endanger your own life or those of others!
- Move the victim to the nearest safe place

3.4 Administer the necessary first aid

When performing first aid, check the following:

- Is the victim is conscious or unconscious?
- Are his/her air passages open?
- Is he/she breathing normally?
- Is blood circulation normal; conscious, colour normal, hands warm?
- If the victim is unconscious but breathing, turn him/her on his/her side
- If the victim is not breathing and is unconscious, begin resuscitation
- Stop bleeding and prevent shock

3.5 Contact the faculty crisis team

Once you have made the emergency call, helped those in immediate danger and administered the necessary first aid, contact the crisis team.

- Tell what you know about the incident and give your contact information
- If is the job of the crisis tram to assess what kind of action the faculty needs to take and to initiate such action.

4 ACTION IN DIFFERENT CRISIS SITUATIONS

4.1 A crisis affecting an individual

The handling of problems described in this chapter *is not usually part of the remit of the crisis team*, but such examples may help its members to recognise and face such problems. The problems described may lead to traumatic events, if they are not dealt with in time. Each member of the community may help someone in difficulties by directing him/her towards professional assistance.

4.1.1 The risk of suicide

A person is at risk of suicide if:

- he/she attempts suicide or wilfully injures him/herself (e.g. slashing)
- he/she talks about suicide or threatens to commit it
- he/she seems to be planning suicide; e.g. he/she is giving away his/her possessions
- death-related matters are constantly on his/her mind
- he/she identifies with someone who has committed suicide
- he/she cannot see a solution to his/her problems nor accepts help
- a violent death or suicide has already taken place in his/her family
- is often under the influence of alcohol
- a major loss: a death, move, fight, failure, social shame
- he/she is excessively critical of him/herself and is always aiming for perfection

PROCEDURES:

- **Immediately talk calmly with the person concerned**
- **Do not judge, underestimate, lie, offer platitudes**
- **Give the person time, show you are responding to his/her request for help**
- **Contact the faculty nurse / university pastor**
- **Direct the person concerned to someone who can provide help – if possible accompany him/her**
- **Do not leave the person alone before you have ensured that further action is being taken**

4.1.2 Bullying, mental violence and discrimination

Bullying, mental violence or discrimination is taking place if:

- a person is being put down, disparaged, mocked, threatened
- unreasonable working performance is demanded of him/her in relation to his/her working conditions
- a person's treatment is insulting, accusing, insinuating
- attempts are made to force somebody out of their workplace
- a person is the target of sexual harassment

PROCEDURES:

- **If you suspect that it is a question of bullying, immediately intervene**
- **The bully must be told that his/her actions are unacceptable**
- **The physical and psychological safety of the victim must be ensured**
- **If necessary, contact external assistance, e.g. discuss the matter with the faculty nurse or contact an occupational health and safety representative**
- **Resolving the situation requires a discussion / meeting with both parties involved, a teacher, Dean of Faculty and, if necessary, a student health representative or occupational health and safety representative**

4.1.3 Depression and exhaustion

Symptoms of depression include:

- sleeping disorders
- eating disorders
- helplessness, feebleness, desperation
- apathy, withdrawal; no longer any interest in hobbies or friends
- hostility / self-disgust
- hyperactive, difficulties in concentration
- tendency to weep or wallow in sadness
- talking, thinking or writing about death

PROCEDURES:

- **If several of these symptoms are obvious, contact the faculty nurse / an expert in mental health**
- **Remember the risk of suicide, depression may also involve signs of this**
- **Be ready to talk things over if the person wants to, or show in some other way that you are ready to do so**

4.1.4 Difficulties with studying

Higher education studies differ greatly from studies in upper secondary school. Adapting to a new way of studying and a different school organisation can cause great difficulties for some students. The motivation to study can disappear and be replaced by symptoms of stress and fatigue. Problems in studying can be caused by:

- doubts about having chosen the correct subject
- external pressures on studies
- excessive pressure to perform placed by the student on him/herself
- a lack of human relationships, wanting to be alone
- overemphasis on student life and a deterioration in study performance
- drawing out studies for different reasons, taking excessive time to complete thesis

PROCEDURES:

- **When you notice problems, immediately discuss the matter with the student**
- **Contact the student's tutor and the student counsellor if the faculty has one**
- **Reorganisation of studies using, for example, a personal study plan may help the situation**
- **In problems concerning the selection of a subject, the matter may be discussed with such people as a career choice psychologist at the employment office**
- **A student tutor may also be of help to those suffering problems with studies**
- **Through the faculty nurse, ask that the student's studying difficulties be investigated by a student health psychologist**

4.1.5 The abuse of intoxicants

The characteristics mentioned below may be a sign of the abuse of intoxicants:

- deterioration in the ability to cope with work/studies
- the need for money increases and the circle of friends may change
- absence from class increases, particularly in the mornings and on Mondays
- the person talks irrationally, tells fanciful stories and lies
- the character of the person changes
- the person exhibits signs of fear, anxiety, restlessness
- the person shows physical signs of dependency on a substance, dilated pupils or bloodshot eyes, shivering, sweating, weight change, drowsiness, confusion
- certain substances have a particular smell, e.g. paint thinner, cannabis
- the person possesses things such as a pipe, knives, pieces of the substance
- change in appearance and manner

PROCEDURES:

- **When you notice symptoms, immediately discuss the matter with the person concerned**
- **Encourage him/her to seek help**
- **If necessary, contact the faculty nurse or social services and organise a meeting between the student, teacher, degree programme manager, nurse and doctor**
- **If the person is under the influence of alcohol during a lesson, remove him/her from the class and ensure that he/she does not leave driving a motor vehicle**
- **Direct him/her straight to the faculty nurse or a clinic where intoxication can be checked by a breath test or some other kind of test**
- **Refusal to take part in tests is not a barrier to treating the student for intoxication problems**
- **The student's removal from the university must be notified to Dean of Faculty**
- **Confiscate any intoxicants in the student's possession**

- withdrawal, wanting to be alone

- confused and irrational speech
- rituals and obsessions
- attitude to work / studies changes:
 - does not care about them at all, or
 - tries to do more than he/she is capable of
- strange behaviour, which he/she cannot or will not explain
- drops hints about needing help
- a sudden change in appearance – e.g. untidiness
- a polarisation or change in emotional expression – e.g sudden fits of laughter or crying
- delusions

PROCEDURES:

- **If these symptoms are abundant / repeating, contact the faculty nurse / expert in mental health**
- **The distinctions between exhaustion, depression and psychotic behaviour may be difficult to judge**

4.1.7 Sexual harrassment

According to the Act on Equality between Women and Men, it is the duty of the employer to ensure that nobody has to suffer from sexual harassment. At the University of Applied

Sciences, this means both staff and students. Nobody has to tolerate insulting or unpleasant behaviour.

- obscene talk, double entendres and observation or questions about a person's body, clothing or private life
- anything unpleasant or insulting to the victim of harassment
- harassment may manifest itself through sexually suggestive gestures or expressions
- sexually-flavoured communication (letters, e-mails, phone calls)
- physical touching
- attempts, remarks or demands concerning sexual contact or some other kind of sexual relations

PROCEDURES:

- **Tell the harasser or bully of the effect that his/her behaviour has and ask him/her to stop**
- **If the harassment continues, the victim's supervisor / tutor must be informed**
- **The employer / institute is responsible once the victim has officially reported the matter**
- **Attempts should first be made to resolve the matter through discussions within the faculty concerned**
- **In this situation, an elected official and occupational health and/or safety representative may provide support and advice**
- **If the matter cannot be talked over within the victim's immediate circles, a telephone help line may be contacted – the important thing is to act quickly!**

4.2.1 The death of a student or member of staff

Action must always be decided upon individually and on a case-by-case basis. The death of a student or member of staff affects not only the family of the deceased but also his/her friends and acquaintances. A case of death must be communicated openly, particularly amongst the group or class that it specially concerns. Always respect the wishes of the immediate family. Hold a moment of silence in the community and fly a flag to half-mast. Express your condolences to the family and arrange for colleagues / friends to be present at the funeral.

If it is a question of the death of a close family member of a student or member of staff, check whether the concerned party wants news of the death told to others. If a student is absent from school and news of the death of his/her loved one is received by the school, contact the student as you normally would when he/she is absent.

Do not leave the concerned party alone but talk to him/her. If you are worried about him/her, contact the crisis team and experts on the subject. Ensure that a group of students has the chance to discuss the death, if it looks as if the situation requires it. If the situation is also bothering you, don't think about it alone!

PROCEDURES:

- **Always respect the wishes of the immediate family and express the condolences of the school**
- **Announcement must be made uniformly, openly and simply**
- **Hold a moment of silence and fly a flag at half-mast**
- **If necessary, help in dealing with the matter should be organised for those concerned and those in the deceased's immediate circles**
- **Contact the crisis team regarding necessary further action**

4.2.2 Threat of suicide

A person issuing threats of suicide must be taken seriously and his/her problems in no way underestimated.

PROCEDURES:

- **Try to discuss and resolve the situation with the person concerned**
- **Direct the person to mental health services**
- **In an acute situation, contact the faculty nurse**
- **Don't try to handle the matter alone but contact the school crisis team**

4.2.3 Suicide or attempted suicide

If suicide or an attempted suicide takes place within the school community, the matter must be dealt with. If it is not, it may cause anxiety and new problems.

PROCEDURES:

- **Contact the person's immediate family**
- **Factual information concerning the causes of the situation will help in dealing with it**
- **Efforts should be made to deal with the matter within the immediate community, to try to avoid people suffering anxious feelings and experiences**

4.2.4 Incident of violent crime

assistance

A situation of violence is shocking and can be fatal. Such a situation often requires both composure and quick thinking.

PROCEDURES:

- **Try to do something - do not walk away**
- **Try to stop the situation from developing, but ensure your own safety!**
- **Ask for help from others**
- **Call the police**

4.2.5 Threat of an accident

A seriously threatening situation might be, for example, a fire or somebody posing a threat to those around him/her. Such a situation may cause those involved to suffer psychological after-effects such as sleeplessness and symptoms of depression.

PROCEDURES:

- **Inform the school crisis team about the threat**
- **The crisis team will organise external crisis assistance**
- **In order to prevent such a situation occurring in future, the occupational health and safety manager / group must also be informed**
- **The technical investigation of the incident will also require the help of the authorities (e.g. fire brigade)**

4.3. Social crisis

4.3.1 Major incident of violence / terrorism

An act of terrorism or major act of violence causes fear and anxiety in all members of society. Even if the incident in itself is physically distant from the individual, it can still cause fear and anxiety, which can lead to severe symptoms and incapacity to work.

PROCEDURES:

- **The school crisis team will consider the necessary support functions and if necessary organise external crisis assistance for the whole**

4.3.2 Major incident

A major incident that takes place at school or in the surrounding area may cause the death and serious injury of many people. An incident taking place very nearby is a major stress factor as well as a serious threat. Being rescued may cause some people to suffer depression.

PROCEDURES:

- **The authority in charge of rescue work will organise counselling in the aftermath of a major incident**
- **The school crisis team will also organise opportunities for further discussion of the matter**
- **All specialist services are enlisted to assist in dealing with the matter: health centres, school health care services, emergency social services, voluntary organisations (e.g. Red Cross) and the Church.**

4.3.2 Incidences in normal conditions or emergency conditions

The Emergency Powers Act (1080/1991), Section 2 defines emergency conditions. According to this act, such conditions may include a serious violation of the territorial integrity of Finland and a threat of war against the country; war or a threat of war between foreign countries and a serious international crisis implying the threat of war and requiring immediate action for the increase of the defensive readiness of Finland; a serious threat to the livelihood of the population or the foundations of the national economy brought about by hampered or interrupted import of indispensable fuels and other energy, raw materials and goods or by a comparable serious disruption of international trade; and a catastrophe, provided the authorities cannot control the situation with regular powers.

Incidences in normal conditions may often seem like emergency conditions and be comparable in their effect. Dealing with such a situation usually requires the close and seamless co-operation of many different authorities, particularly in management relations. Incidences in normal conditions may include acts of terror, major accidents / significant traffic accidents, toxic emissions, nuclear accidents, epidemics, organised crime, hijacking and uncontrolled movements of the population.

PROCEDURES:

- **Such situations are handled according to instructions issued by the State and official bulletins issued by the media are observed**

5 WHAT TO DO AFTER A CRISIS SITUATION

5.1 Crisis reaction stages

Individual reactions following a traumatic experience are set off automatically and are similar in everyone. People have a natural ability to cope even with a situation that seems unbearable and to get on with their lives.

Not all our reaction models, however, help or improve the handling of a traumatic experience. Previously, we may have adopted methods of dealing with crises, which hindered rather than helped their successful handling. Some of the different crisis support functions might have been a significant help in coping with it.

Next, we will present a summary of the four stages of reaction to crisis according to Cullberg (1991).

5.1.1. Stage of shock “It can’t be true!”

The stage of shock lasts for several hours. Shock gives the mind extra time; it protects it from information and experiences that it is not yet ready to deal with.

The person is unable to process what has happened, so may even deny it. He/she will behave in an unusual way or inappropriately. He/she may either forget what has happened or remember it exceptionally well. He/she may seem unemotional. Even physical pain may not be felt.

Most people maintain their ability to act during the stage of shock, although they may be unable to make decisions. About 20% of people panic, become hysterical or depressed.

The means of helping someone through the stage of shock are psychological first aid (see Para. 2.1.) and holding a ‘defusing’ meeting (see Para 2.2.).

5.1.2. Reaction stage “What happened?”

The reaction stage comes when the danger and the threat are over. This stage lasts 2-4 days, and may be extended when there is a need to maintain working capacity. At this time, a person will try to establish why and how everything happened. He/she no longer denies the incident, but its significance changes to being an actual part of his/her life.

In the reaction stage, emotions start to become agitated. A person will feel sorrow at the loss, he/she may feel desperate, anxious and either feel guilty or try to seek out a guilty party.

During this stage, physical symptoms may appear, such as shivering, nausea, heart trouble, muscle pains, dizziness, lack of appetite, thirst, fatigue and sleep disorders.

In the reaction stage, people often want to talk about what has happened. The mind is open to dealing with the loss. At this stage, it is important to offer the chance of this. Debriefing is a method, which can help in dealing with the reaction stage (see Para. 2.3.).

5.1.3. Processing stage “How do I get through this?”

This stage can last several weeks, even months. The mind begins to close, and there is no longer a desire to discuss the incident. The process of dealing with things slows down. Mulling over the experience turns inwards and continues only in the mind of the person. The loss is still mourned, but the mind gradually begins to make room for other things too. Feelings vary. There are good and bad days.

Symptoms of the processing stage include difficulties with memory and concentration, lack of flexibility, increased irritability and rage, a desire to be alone, a feeling of absence in the company of others and depression including difficulty in thinking about the future.

The most important way of helping during this stage is to listen. A grieving person needs to be surrounded by people who can tolerate his/her weeping and desperation, and not demand him/her to cheer up. If the person gets so bogged down in grief that he/she cannot see any light at the end of the tunnel, it is advisable to enlist professional help.

If necessary, contact the faculty nurse. The university pastor is also available.

5.1.4. Re-orientation stage “To life!”

Memories of the loss gradually fade and can be controlled. The person concerned starts to plan a future. He/she is able to talk about the event and accept it as part of an unknown, powerful fear or anxiety in life.

The hoped-for end result is that the loss becomes a conscious and peaceful part of the person him/herself. After a crisis, nobody can be exactly as they were, but in the best case, the person is stronger and better prepared for life ahead.

5.2. Dealing with a crisis

5.2.1. Psychological first aid when an individual has encountered a shocking event

Anyone at the university – be they a member of staff or a student – may unexpectedly have to support someone who is in shock.

During the stage of shock, it is important to create an atmosphere of safety, in which the victim can analyse his/her feelings in peace. Someone in shock needs someone to listen to him/her. He/she will often have an enormous need to talk about the incident. Its repeated

analysis will help at this stage. If the victim is too shocked to talk about it, it is important to try to get him/her to open up and share the experience.

During the stage of shock, comforting is of no use. The victim will interpret this as an inability on the part of the helper to tolerate his/her pain. This will prevent him/her from expressing his/her reactions, thoughts and emotions. The victim may also feel insulted, if the helper says he/she can understand how it feels. As far as the victim is concerned, nobody can even imagine how he/she is feeling.

You can best help someone in shock:

- by remaining calm yourself; this will create an atmosphere of safety
- by listening; the victim will need to analyse the events again and again
- by encouraging him/her to talk about even the most difficult feelings
- by taking care of the needs of the victim; handkerchiefs, glass of water, being close, touching
- by ensuring that the victim is not left alone

Being calm next to someone in shock is not easy. Encountering him/her will also arouse feelings of helplessness and anxiety in the helper. It is important to be aware that the helper should not attempt to make him/herself feel better by trying to console the victim or turning his/her attention away from a situation of anxiety.

If necessary, contact the faculty nurse or university pastor.

5.2.2. Group defusing

'Defusing' entails analysing an event with a group of people in shock, making it seem innocuous and mitigating its adverse effects. Its purpose is to recover people's ability to function as quickly as possible. The important thing about analysing a shocking incident in a group is that it is done together, with no group member being sent home alone in a state of shock.

People in the organisation specially trained for such tasks should act as leaders of a defusing meeting, and preferably not a superior, a teacher of the group or a close colleague. A defusing meeting should last 20-45 minutes.

Progress of a defusing meeting:

1. Introduction stage

- the leader explains:
 - why the meeting has been organised and what has happened
 - what will happen at the meeting

2. Discussion stage

- the aim of the analysis of a traumatic event is to defuse the most prominent feelings
 - what happened
 - what each participant did, saw, heard and felt

3. Information stage

- people recount how the situation or incident continued, how the victims are now and, if necessary, provide more extensive background as to what happened
- the leader tells the participants about normal psychological reactions and gives instructions about how to view them

4. Follow-up stage

- consideration is given to whether a debriefing meeting is necessary and, if so, when

If necessary, contact the faculty nurse or university pastor.

5.2.3. Group debriefing

Debriefing is a group method intended to be used for dealing with a traumatic event during the reaction stage, i.e. 1-3 days after the event. That is when a person starts to be aware of what actually happened and what it means to him/her. The purpose of debriefing is to support, boost and guide the process of dealing with an incident and the reactions, feelings and thoughts that it gives rise to.

Professionals trained for the task should act as leaders in debriefing. Plenty of time should be reserved for the session, 2-3 hours depending on the size of the group.

In a debriefing session, the reality of the event should be faced such as it is. The incident is analysed stage-by-stage, and the psychological reactions to it are looked at under the guidance of the leader. Everyone is given the chance to speak and to share his/her feelings.

It is also the job of the leader to give information concerning how we human beings normally react in traumatic events, and then to tell how to view these reactions. The aim of giving this information is to make the participants' own reactions, thoughts and feelings seem normal and tolerable, so that they can live with them.

Progress of a debriefing meeting:

1. Initial stage

- the leader explains the purpose of the session
- the leader motivates the participants

2. Fact stage

- the truth is faced, i.e. the incident is analysed in detail and chronologically creating an overall picture of what happened
- everyone takes turns to say who they are what they have to do with events

3. Thought stage

- everyone recounts in turn what he/she was thinking at the different stages of the event, and which thoughts were most troubling

5. Reaction or feelings stage

- the most important stage of the session, the aim being to reduce anxiety and avoidance behaviour
- it is the job of the leader to help the participants face their difficult feelings, such as anger, loss, shame, fear, etc.

6. Normalisation stage

- the leader tells about normal reactions and gives information about possible future reactions
- the leader explains how to cope

7. Concluding stage

- the leader quickly summarises the session
- agreement on how to follow up

If you wish to arrange a debriefing session, contact the emergency debriefing services in your area.

6 READINESS FOR CRISIS PROCEDURES

6.1. Communicating crisis procedure guidelines

- Students: studying the manual in orientation lessons
- New employees: studying the manual in the introduction to their job
- Staff: regular communication of crisis procedure guidelines to all members of staff

6.2. Readiness for action and training in crisis procedures

- Annual special courses for the AMK crisis team at national level
- Annual training for faculty crisis teams and staff
- Organising and updating first aid courses for staff (4-8 hrs)
- Evacuation drills for each faculty
- Preliminary fire extinguishing training for staff

6.3. Keeping the crisis procedures manual up-to-date

- The updated manual is available to the staff in electronic form on the university's intranet
- Changes of contact person, for example, should be notified to the Rector's office, which maintains an electronic version
- Each member of the crisis team also has a paper version of the crisis procedures plan
- The AMK crisis team checks the manual every year and evaluates the validity of its guidelines in the light of possible new information

7 CONTACT INFORMATION

General emergency number		112
Rescue services		112
Police		112
Emergency social services		112
Own nurse	_____	
Own doctor	_____	
University pastor	_____	
Lappeenranta emergency debriefing service		0400 536135
Imatra emergency debriefing service (daily 8.00 am – 8.00 pm)		040 5165091

SOURCES AND LITERATURE

The primary sources for this crisis procedures manual were 'Koulun kriisitoimintamalli – tukiaineisto peruskoulujen, lukioiden ja ammattioppilaitosten kriisityön kehittämiseen' (school crisis procedures model – support material for the development of crisis work in comprehensive schools, upper secondary schools and vocational colleges) published by STAKES (the National Research & Development Centre for Welfare & Health), and 'Kuin salama kirkkaalta taivaalta' (like lightning from a clear sky) by Salli Saari (see list of literature).

The crisis procedures manuals of the Häme, Lahti and North Karelia universities of applied sciences were used as a basis for producing and editing the material.

Further information on crisis situations and how to cope with them can be found in the following literature:

- | | |
|---------------------------|---|
| Ayalon, Ofra | Selviydyn. Mannerheim League for Child Welfare, Finnish Red Cross and the Finnish Association for Mental Health 1995 |
| Cullberg, Johan | Tasapainon järkkyessä – psykoanalyttinen ja sosiaalipsykiatrinen tutkielma. Helsinki Otava 1991 |
| Dyregrov, Atle | Katastrofipsykologian perusteet. Vastapaino 1994 |
| Eränen, Liisa | Katastrofipsykologia. Valtion painatuskeskus 1991 |
| Heiskanen, Tarja
(ed.) | Takaisin elämään – henkinen tuki ja onnettomuudet. Mannerheim League for Child Welfare, Finnish Red Cross and the Finnish Association for Mental 1994 |
| Holma, Markku
(ed.) | Surun kohtaaminen koulussa – virikemateriaalia kriisitilanteiden käsittelyyn. Kirkon kasvatusasiain keskus (includes material on bereavement and death in other religions and a global overview) |
| Rautava, Marie
(ed.) | Koulun kriisitoimintamalli – tukiaineisto peruskoulujen, lukioiden ja ammattioppilaitosten kriisityön kehittämiseen. Operating models for a suicide prevention project 6/97. Aiheita-julkaisu 43/1997 |
| Saari, Salli | Kuin salama kirkkaalta taivaalta. Crises and how to cope with them. Otava. 1999 |
| Upanne, Maila | Koulu ja kriisitilanteiden hallinta – näkökulmia nuorten itsemurhien ehkäisyyn. Support material for a suicide prevention project 1/93 STAKES 39/1993 |

Appendix 1

UNIVERSITY OF APPLIED SCIENCES CRISIS TEAM

Rector - Anneli Pirttilä

040 766 4807

**Dean of Faculty / Head of Unit
concerning the matter**

University - Pastor Minna Jaakkola

0400 789 390

Publicist - Mervi Palonen

040 508 9794

Secretary General of Students' Union - Susanna Kauppinen 040 841 6303

TECHNOLOGY

Imatra:

Dean of Faculty - Antti Lehmusvaara

**02049 66751
040 501 4244**

Lecturer, Head of Unit - Kari Manninen

040 359 3996

Training Secretary- Tiina Matikainen

**02049 66752
040 745 5752**

TECHNOLOGY

Lappeenranta:

Dean of Faculty - Antti Lehmusvaara

**02049 66751
040 501 4244**

Lecturer - Timo Iivarinen

02049 66544

Training Secretary - Tarja Puurtinen

**02049 66511
040 587 5512**

HEALTH CARE AND SOCIAL SERVICES

Valto Käkelän katu 3, LAPPEENRANTA

Dean of Faculty – Päivi Vehmasvaara	020 4966901 040 7555 392
Lecturer - Simo Saikko	0204966945 040 7261485
Nurse - Paula Tuuva	0400 235 953 616 2722
Training Secretary - Sari Kuittinen	0204966902
Student (head tutor) - Antti Peltola	0503219614
University Pastor - Minna Jaakkola	0400 789 390

BUSINESS ADMINISTRATION

Dean of Faculty - Merja Heino	02049 66803 040 760 5533
Vice Dean of Faculty - Heikki Sintonen	040 771 8299
Nurse - Ulla-Maija Pulliainen	
Lecturer - Tarja Muikku	040 578 7600
Students - Jenni Kaartinen/Jutta Pakkanen	
Training Secretary - Anita Ylä-Outinen	02049 66829 040 595 2829

TOURSIM AND HOSPITALITY

Dean of Faculty - Merja Heino	02049 66740 040 760 5533
Vice Dean of Faculty - Heikki Sintonen	040 771 8299
Nurse - Marja Luoma	
Lecturer - Jukka Moilanen	040 575 1560
Student - Miina Maria Kolari	
Training Secretary - Leena Anttalo-Peltonen	02049 66735

FINE ARTS AND DESIGN

Dean of Faculty - Juhani Järvinen	040 5632307
Vice Dean of Faculty - Jean-Erik Kullberg	050 3554095
Nurse - Mervi Hasu	020 6173213
Lecturer (OPO) - Päivi Eronen	050 3485589
Training Secretary - Nina Pesonen	04049 66712
Student - Oili Kuukasjärvi	050 501 0603
University Pastor - Minna Jaakkola	0400 789 390

UNIT OF CRAFTS AND DESIGN

Senior Lecturer, Head of Unit - Eija Mustonen	040 763 3690
Lecturer - Tarja Talonpoika	02049 66637
University Pastor - Minna Jaakkola	0400 789 390
Training Secretary - Nina Pesonen	04049 66712
Student - Veera Metso	045 1106986

How to help in an accident (Red Cross guidelines)

If you are the first on the scene, proceed as follows:

Assess the situation

- find out what has happened
- assess the number of people requiring help and the need for help

Prevent further accidents

- approach a hazardous situation with caution
- first rescue those in danger
- warn others of the danger

Administer first aid

- begin life-saving first aid as soon as possible

Make an emergency call

- in all accident cases, one call to the emergency centre is enough
- call the general emergency number 112, and give the following information:
 - first tell what has happened
 - give the location of the incident
 - tell who you are and where you are calling from
 - answer the questions you are asked
 - do not hang up before you are told to do so

Return to the scene of the incident

- report on the arrival of extra assistance and the instructions you have received

Assembly point if a building has to be evacuated

Appendix 3

Announcement and remembrance of a death

Announcing a death

Before announcing a death, it is advisable to obtain as detailed information as possible on when and how it happened, if necessary from the authorities. Tell it directly and openly, avoiding clichés. After that, it is important to ensure that nobody is left alone. Those in shock need to be monitored so that they can freely release their emotions. A calming presence is the best medicine.

Remembrance of a death

In the event of the death of a student, teacher or other member of staff, it is important to mark it in the university in some way. The most common way is to fly a flag at half-mast. A shared moment of remembrance in the university and remembrance in a group of students offer the chance to share common grief. It is the job of the crisis team to decide on the organisation and content of the moment of remembrance.

Remembrance in the university

A moment of remembrance in the university may include:

- some words of remembrance by the Dean of Faculty
- a speech by a teacher / pastor
- poetry, music

Remembrance in a group of students

It is important to give the opportunity for shared grief. Lighting a candle is a natural way to begin communal remembrance. In addition to discussion, grief can also be channelled through poetry, music, drawings or writings.

Appendix 4

Rescue plan