

# Support after distressing events

Standard operating procedure (SOP) | WRK-SOP-004

|                                  |                                                                                                                             |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| Document type                    | Standard operating procedure (SOP)                                                                                          |
| Title                            | Support after distressing events                                                                                            |
| Document ID                      | {{facility.code}}-WRK-SOP-004                                                                                               |
| Version and status               | 1.0   Draft, for ASF Expert Committee approval                                                                              |
| Prepared by                      | {{roles.quality_lead.name}}, Quality lead                                                                                   |
| Reviewed by                      | {{roles.clinical_director.name}}, Clinical director      Date: _____                                                        |
| Approver and signature           | {{roles.clinical_director.name}}, Clinical director<br>Signature: _____      Date: _____                                    |
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| Replaces                         | None (new document)                                                                                                         |
| Standards and criteria supported | Standard 2E, criterion 2E.3                                                                                                 |
| Evidence basis                   | E-006, E-009                                                                                                                |
| Status of this document          | Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria. |

## At a glance: what to do

1. After a distressing event, offer support to every staff member involved within 24 hours.
2. Offer a confidential route to occupational health or a counsellor.
3. Check on the staff member again after one week.
4. Record the offer and the response.

Stop and get help straight away if: a staff member involved in a serious event has not been offered any support.

## 1. Purpose

To make sure staff affected by serious or distressing events get timely, confidential support [EC].

## 2. Scope

|                   |                                                                                                           |
|-------------------|-----------------------------------------------------------------------------------------------------------|
| Applies to        | All staff involved in or affected by a serious event, including patient deaths, serious harm and violence |
| Locations         | All services                                                                                              |
| When              | Within 24 hours of the event, with follow-up at one week                                                  |
| Does not apply to | Routine stress without a specific event                                                                   |

## 3. Definitions and abbreviations

| Term                     | Meaning in this SOP                                                                        |
|--------------------------|--------------------------------------------------------------------------------------------|
| <b>Distressing event</b> | An event that may cause significant psychological distress to people who were involved     |
| <b>Debrief</b>           | A structured conversation after an event to share what happened and what support is needed |

## 4. Background and rationale

Staff who are not supported after distressing events are at higher risk of burnout and of leaving the service. Early support is quick and low cost.

## 5. Responsibilities

| Role                | Duties in this SOP                                           | Competence needed   |
|---------------------|--------------------------------------------------------------|---------------------|
| Service manager     | Starts the support process within 24 hours                   | Management          |
| Occupational health | Provides confidential support and follow-up                  | Occupational health |
| Staff member        | Accepts or declines support and tells the manager what helps | Own role            |

## 6. Equipment, materials and resources

| Item                                  | Specification or standard | Check before use            |
|---------------------------------------|---------------------------|-----------------------------|
| List of confidential support contacts | Current                   | Printed in every staff room |

## 7. Safety and infection prevention

- Support is offered, never forced. Staff can decline and ask later.

## 8. Before you start

- Confirm the confidential support contacts are current.

## 9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

| Step | Action                         | How to do it                                                                                                                                        | Key point                                                |
|------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1    | Identify those affected.       | <ul style="list-style-type: none"> <li>List everyone involved or affected by the event.</li> </ul>                                                  | Do not assume only the person at the centre is affected. |
| 2    | Offer support within 24 hours. | <ul style="list-style-type: none"> <li>Speak to each person privately.</li> <li>Give the support contacts in writing.</li> </ul>                    | The offer is made, and recorded, within 24 hours.        |
| 3    | Hold a debrief where needed.   | <ul style="list-style-type: none"> <li>Hold a short, facilitated debrief for the team within 72 hours, if the team wants one.</li> </ul>            | The debrief is not a review of individual blame.         |
| 4    | Follow up at one week.         | <ul style="list-style-type: none"> <li>Check with each person how they are coping.</li> <li>Record the response and any further support.</li> </ul> | The one-week check is the one most often missed.         |

### Decision points

- If a person is not fit to work after the event, occupational health decides on temporary duties.

## 10. Special situations

| Situation     | What to do                                                                           |
|---------------|--------------------------------------------------------------------------------------|
| Patient death | Support is offered in the same way, and the family liaison process runs in parallel. |

## 11. Problems and escalation

- Any staff member who reports thoughts of self-harm is referred to occupational health the same day, and to emergency services if at immediate risk.

## 12. Monitoring and compliance

| What is checked                                | Target | How often  | Who                      | If the target is missed              |
|------------------------------------------------|--------|------------|--------------------------|--------------------------------------|
| Affected staff offered support within 24 hours | 100%   | Each event | Service manager          | Escalate to chief executive          |
| Follow-up at one week recorded                 | 100%   | Each event | Occupational health lead | Escalate to occupational health lead |

## 13. Records

| Record                             | Where it is kept         | Kept for                 |
|------------------------------------|--------------------------|--------------------------|
| Support offer and follow-up record | Occupational health file | Employment plus 40 years |

## 14. Training and competence

- Managers are trained in the first conversation after an event at induction.

## 15. Related documents

| ID          | Title                                            | Relationship                   |
|-------------|--------------------------------------------------|--------------------------------|
| WRK-POL-003 | Occupational health, safety and wellbeing policy | Policy this procedure supports |
| WRK-SOP-006 | Violence and aggression prevention and response  | Events that involve violence   |

## 16. Evidence

| ID    | Source and status                   |
|-------|-------------------------------------|
| E-006 | ASF Policy Framework v1.2. Adapted. |
| E-009 | ASF Expert Committee consensus.     |

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

## 17. Change history

| Version | Date                        | What changed  | Approver and signature            |
|---------|-----------------------------|---------------|-----------------------------------|
| 1.0     | {{document.effective_date}} | First version | Pending Expert Committee approval |