When an Employee Dies: Managing the Aftermath of a Critical Incident

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EVERY ORGANIZATION—government, nonprofit, and private sector alike—is subject to critical incidents. Critical incidents vary from acts of nature such as hurricanes, earthquakes, and tornadoes, to unforeseen tragedies such as the Oklahoma City bombing, to the unexpected and violent death of an employee.

On March 14, 1998, an event occurred that the managers and employees of the United States Probation Office for the Northern District of California never would have imagined. At 9:45 that Saturday evening, the senior deputy chief and the chief probation officer were notified that their PC systems administrator, a gifted and extremely popular employee, had been killed in an automobile accident earlier that day. Also, the deceased employee’s wife was critically injured and his grandmother killed.

This article tells how the probation office responded to the event. It addresses the importance of organizations instituting critical incident response policies, what such policies should include, and how to develop one. The article also underscores how managers’ ability to cope is crucial to the critical incident recovery process.

The Critical Incident Response

Critical incidents, regardless of what type they are, spur a similar sequence of events: The critical incident happens. The members of the organization react. The members experience a recovery period. Then the members reach a point of closure—if the preceding stages are handled thoughtfully.

In the case of the probation office in the Northern District of California, the chief and the deputy chief—after facing the initial shock of the news of their employee's death—instituted the following sequence of events. They first contacted the local Employee Assistance Program (EAP) early Sunday morning. The EAP established immediate telephone counseling services that were available to any of the probation office's employees 24 hours a day, 7 days a week. The EAP also arranged for counselors, who were critical incident experts, to be available in person in the district’s two largest offices the following day. The third largest office had EAP counselors on site the second day following the tragedy.

Also on Sunday, the senior managers telephoned all managers in the district to inform them of the death and asked them, in turn, to contact their staffs before employees returned to work the next day. Before the workday began on Monday, 103 of the 106 employees had been called personally about the news. Calls also were made to former employees who were close friends of the deceased.

Senior managers focused on gathering information to share with the staff. They tried to determine when, where, and how the accident occurred and the condition of the deceased’s wife. They sought details about the funeral services, information about the deceased’s family, and biographical information about the deceased. They also looked for opportunities for staff members to share their grief. The process of gathering information, sharing information, and offering support to fellow employees continued for some time.

Managing the Aftermath

The probation office staff was confronted with having to face and accept the tragic and unexpected death of a colleague. Initially, employees were shocked, grieving, and unable to concentrate on their jobs. Additional emotional challenges arose at the wake, the funeral, and the cremation ceremony, all of which the staff members were invited to attend. Each of these events was extremely emotional and particularly poignant because of the love and affection the employees felt for their deceased colleague.

For some time after the death, the employees performed little routine work other than critical tasks. They were involved with the more important, immediate issue of grieving and of supporting their coworkers. Meetings were held in every office to allow for remembering, grieving, and providing emotional support. “Sharing” vases were placed in each office to allow staff members to contribute flowers in memory of their colleague. Pictures, poems, and other written remembrances were gathered and placed in albums for the widow and family. One employee who had been particularly close to the PC systems administrator had a video photo collage made that was given to the widow.

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and family. Plaques, pictures, and other mementos were placed in each of the district’s eight offices to honor the deceased colleague.

A few months after the PC administrator’s death, the deceased’s parents, sister, and brother visited the district’s headquarters office. His widow also made a visit. The visits allowed the family to express their appreciation for the love and support the staff had offered to family members. It also gave the staff an opportunity for healing and closure.

For the managers, seeing the impact of this incident on the probation office staff made two points very clear: 1) events such as these have an enormous, long-lasting emotional impact on the staff, and 2) they place managers in the unique and sometimes conflicting role of providing emotional support to the staff while they, the managers, need a chance to grieve themselves. For them, witnessing the profound grief and sadness of their employees was extremely stressful and emotional. No one is immune to the impact of such an incident.

Critical incidents may present themselves in a variety of circumstances. They seldom are identical in terms of cause, yet are similar in terms of results. They force individuals and organizations abruptly to confront death or other unexpected loss. No amount of planning can eliminate the tragedy involved, but planning can help employees through the difficult time and can help facilitate the healing process.

The account of what transpired in the hours, days, and months following the critical incident described here may seem overwhelming at first glance. Focusing on this actual incident highlights two important points. First, managers should understand the need to put in place a comprehensive critical incident response policy in their organizations. Second, managers should note the importance of addressing not only their staff’s needs, but their own needs in the aftermath of a critical incident.

**The Critical Incident Response Policy**

Over the years, many state governments have seen the wisdom of requiring car owners to carry automobile insurance. Indeed, few of us would risk driving without such protection. So, we pay the premiums and hope that we never have to file a claim. Those of us who have had the misfortune of being in an accident especially appreciate the value of knowing that the insurance coverage was there when we needed it. Developing a critical incident response policy for your office is a sort of insurance.

A definition might be helpful. In clinical terms, “critical incident” generally refers to any incident that sufficiently overwhelms one’s coping abilities. Critical incidents often are sudden and unexpected and may involve the serious injury or death of a family member, friend, or coworker. Just as individuals may be affected by a critical incident, so, too, may organizations. This impact on organizations manifests itself through the collective reactions of the employees. How well an organization moves through the aftermath of a critical incident may be determined largely by the organization’s level of preparation before the incident.

Developing a critical incident response policy can be an effective way to address the needs that may surface in an organization both before and after a critical incident. Minimally, such a policy should include the following:

**Statement of Purpose.** The critical incident response policy should begin with a statement of its purpose, just as any organizational policy should. The statement should address who is covered by the policy, describe the roles, functions, and responsibilities to be carried out in the event of a critical incident, and indicate which personnel will assume the tasks.

**Definition of Terms.** The policy should define terms commonly used in critical incident response. These terms include: critical incident, post-traumatic stress, critical incident debriefing, critical incident defusing, mental health professional, peer support personnel, and critical incident stress management.

**Mental Health Professionals.** The policy should state which area mental health professionals have been designated to provide critical incident assistance to your organization and explain both their pre- and post-incident responsibilities. The mental health professional's role is important and should be set forth clearly in the policy. For example, mental health professionals could be called upon to provide pre-incident education for upper- and mid-level management or the entire staff. They could be available for consultation on an incident-by-incident basis. They could assess the need for professional follow-up for employees after a critical incident.

In developing your policy, you should consider adopting the Critical Incident Stress Management (CISM) process endorsed by the International Critical Incident Stress Foundation, which promotes using mental health professionals specially trained in the crisis intervention field. This training is not part of the general mental health curriculum. Therefore, in seeking a mental health professional in your community to provide services in the event of a critical incident, do not hesitate to ask questions about the person’s critical incident training and experience.

**Pre-incident Education.** The policy should emphasize pre-incident education for everyone in your organization. Every employee is a potential recipient of critical incident services and should understand the CISM process. Through pre-incident education, employees can enhance their knowledge about what constitutes a critical incident and what are the most common crises and stressors. They can learn about the nature of stress and psychological trauma and how best to utilize coping skills. They also can find out about resources and how to access them.
This part of the policy may address what critical incident training the organization offers and the frequency of such training. It also may review information about roles, functions, and responsibilities in the event of a critical incident and who is responsible to carry out each task. Educating staff about roles, functions, and responsibilities pre-incident allows organizations to consider assigning staff before a crisis. Experience has taught us that trying to make these assignments once an incident already has happened is ill advised.

**Criteria and Mechanisms for Team Activation.** The CISM team generally is composed of mental health professionals and trained peer support personnel. Some organizations, mainly in the public safety arena, form their own CISM team by contracting with a mental health professional. They then agree to have a select group of staff members trained as peer support personnel. However, most organizations will not staff their own CISM team. Therefore, identifying outside resources and establishing the criteria under which such a team will be activated are crucial. Every state has trained CISM teams. Many states have organized network for CISM response. You may contact the International Critical Incident Stress Foundation at 410-750-9600 to identify a team in your area. Once you reach an agreement with a team, set the conditions under which your organization will call upon the team and the mechanisms or logistics to activate the team. Remember in making your arrangements that you should seek a CISM-trained mental health professional not only to lead critical incident stress debriefings and defusings, but to provide training and consulting.

**Timeline for Policy Review.** As you would with any organizational policies, address periodic review and update of the critical incident response policy.

A word of caution: Be sure to keep your critical incident response policy separate from your post-shooting policy. Remember that a critical incident is any incident that overwhelms an individual’s (or organization’s) ability to cope. Some organizations have constructed critical incident policies that primarily, or solely, address office response in a post-shooting scenario. Focusing on post-shooting incidents sends the wrong message about the nature of critical incidents and to whom CISM interventions will be provided. They should be available to all employees.

**Coping as a Manager**

Managers are not immune from the effects of a critical incident. That is not to say that they do not have effective coping resources to call upon if such an event occurs. The point is that being a manager does not grant you special immunity from tragedy. In the hours and days following critical incidents, more than one manager has been heard to say, “Just knowing that my people are being taken care of is comfort enough for me.” Indeed, most managers will go to great lengths to address their staff’s needs and concerns. However, after the policies have been activated and the resources accessed, what then? A quick review of some of the reasons why CISM is effective for employees will help emphasize why managers need to avail themselves of these services.

**Early Intervention.** Several researchers have examined the importance of early intervention during the acute phase of a critical incident. As early as World Wars I and II, Salmon (1919) and Kardiner and Spiegel (1947) noted the importance of providing quick, emergency-oriented psychiatric interventions. Lindy (1985) discussed the formation of the “trauma membrane” after a traumatic event. Another way to think about this is to envision individuals forming a psychological “protective shell” around themselves as a way to insulate themselves from the rest of the world (Everly & Mitchell, 1997). In analyzing the tenets of crisis response, Solomon and Benbenishty (1986) noted that “immediacy” was found to exert a positive effect. These works—as well as those of Rapoport (1965), Nordow and Porritt (1979), and Post (1992)—emphasize the need for managers, as victims of critical or traumatic incidents, to monitor their reactions from the moment the event occurs.

**Psychosocial Support.** The CISM process argues against the old adage that “it’s lonely at the top.” With the CISM process, it does not have to be. Many of us enjoy the benefits and rewards of social interactions with family, friends, and coworkers. These same benefits and rewards enable the CISM process to be effective. Maslow (1970) highlighted the importance of social support by listing the need for social affiliation as a basic human need. How important is social affiliation as a strategy in managing crisis response? Buckley, Blanchard, and Hickling (1996) found an inverse relationship between social support and the prevalence of post-traumatic stress disorder in the wake of motor vehicle accidents. Dalgleish et al. (1996) found similar results. In looking at the role of social support in psychological trauma, Flannery (1990) found a general trend indicating that social support was effective in reducing the negative impact of trauma.

So, given the importance of psychosocial support in the aftermath of a critical incident, where can managers go? Arranging for a CISM intervention just for managers is one option. When you are planning interventions for large groups of people, you can plan separate interventions for mid- or upper-level managers. Managers also can arrange for one-on-one interventions. Another resource for managers—one that is not directly provided by CISM but that can be quite helpful—is to contact other managers who have been through similar experiences. If you know another manager who has dealt with the aftermath of a critical incident, call that
person and talk out your thoughts and reactions. Interacting with peers in these instances can be a source of immeasurable comfort and support. Certainly, you can always seek the services of your local EAP, but make sure that you speak to staff there with training in post-incident stress. Throughout all of this, remember that your reactions to the critical incident are normal; it is the event that is abnormal. Accessing psychosocial support after a critical incident can be an excellent way to accelerate your recovery and continue to manage and lead your staff effectively.

The Need for Expression. This point is closely tied to the previous one. Not only do you find comfort in knowing that you are not alone by seeking psychosocial support, you help speed your recovery by encouraging dialogue. Bruno Bettleheim (1984) stated that “what cannot be talked about can also not be put to rest.” Everly and Mitchell (1997) also have noted that “recovery from trauma is predicated upon the verbal expression of not only emotions, but also cognitions” and that this notion is almost universal in the crisis response literature. Pennebaker and colleagues demonstrated that the value of expression is found not only in psychological outcomes, but physiological and behavioral as well (Pennebaker, 1990; Pennebaker & Beal, 1986).

The importance of verbal expression is highlighted throughout the CISM process. Individuals are not coerced, but encouraged, to talk during an intervention. Verbalizing after a critical incident allows individuals to label what they are experiencing. It helps them assign meaning to the event and impose a sense of order onto a chaotic situation. By giving themselves a chance for expression after a critical incident, managers may accelerate their recovery, thus allowing themselves to lead others to do the same.

Education. Pre- and post-education are important tools for recovery after a critical incident. Indeed, education is one of the goals of the CISM process. Making people aware, in advance, of possible reactions during and after a critical incident can mitigate crisis stress. Everly (1989) noted that understanding achieved through information/education can be a powerful stress reduction strategy. During a crisis, most people report that things are out of control. Education permits you to make informed and purposeful decisions, thereby giving you back the perceived control. Taylor (1983) and Bandura (1997) argued that the power of perceived control can serve to mitigate crisis stress and psychological discord. Through the education process, you are helping to set appropriate expectations for people, thereby preparing them to cope effectively should a critical incident occur.

In addition to setting appropriate expectations, the CISM process teaches people sound and effective coping skills. As a manager, how do you cope with the day-to-day stressors in your life? Are your coping skills adequate? Do they truly help you to move through your difficult times? Or do they simply allow you to mask your reactions and therefore prolong the impact of the crisis and your recovery from it? In your role as a leader, these are important questions to consider. Chances are, when a critical incident happens, you will call upon those same coping skills because that is what you always have done. If these skills have served you well, they likely will do so again. If they have not, they may not only fail you in a crisis, but also the people who will be looking to you for leadership.

You may find that the coping skills taught in the CISM process are ones that you already employ. If so, you will feel reinforced. If, however, they are skills that are not necessarily in your repertoire, you then will have a choice. You can choose to do what you always have done and hope for the best. Or you can add these new skills to your repertoire and, thus, increase your chances for a healthy and perhaps quicker recovery.

Conclusion

No one can predict when a critical incident might happen or how people will respond to it. A crisis amplifies your role as manager and trains all eyes on you. The expectations are that you will lead. Will you be prepared to do so? The answer to this question, in large part, may be determined by actions you take now, before a crisis hits. If your office does not have a critical incident response policy in place, make it happen. Identify resources in your area willing to assist you and your staff. Talk with other managers who have formulated policies and who have weathered critical incidents in their organizations. Learn from their experiences. Get a pre-incident education program going. Involve staff members at all levels. And, finally, do a personal inventory of your coping skills and how well they have served you. Identify other resources you think might help you personally in the event of a crisis.

Taking the steps discussed here will help you and your staff be prepared. Perhaps no one truly can be prepared for the devastation of a Hurricane Andrew or an Oklahoma City bombing. By taking certain proactive measures, however, you can be better equipped for managing the aftermath of a critical incident and thus increase the chances that your organization—and you—will recover quickly and successfully.

References


