



Bereavement Policy

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1. Purpose

This policy outlines our commitment at Staffordshire University Academies Trust (SUAT) to supporting pupils and their families who have been bereaved. Value in supporting the protective factors for children and young people's mental health and emotional wellbeing is immeasurable. Several studies point to the importance of including bereavement, loss and grief in school emotional health and wellbeing curriculum, as well as adopting whole-school approaches and policies to deal with bereavement.

Death is something that most people choose not to think about so when faced with it we often find ourselves ill prepared. The purpose of this Bereavement Policy is to help everyone involved at a time when there may be shock, upset and confusion, ensuring that there is as little disruption as possible, effective communication takes place and each member of the Academy community is supported to help them through a very difficult time.

Many children and young people will experience bereavement, through the loss of a parent, sibling, grandparent, or friend. Children can also face the loss of a loved animal or pet which can be as significant for them as losing a relative or friend. The term 'bereavement' refers to the process of grieving and mourning and is associated with a deep sense of loss and sadness. It is a natural process; however, its effects can be overwhelming. At any one time, 70% of primary schools have a recently bereaved child on their roll. As children spend most of their time at school, teachers and staff members will be the primary source of care and support. Bereaved children will see our academies as a haven away from the turmoil of emotions at home and will look to trusted staff members for support.

2. Scope

This policy applies to SUAT's Academies, all teaching and non-teaching staff, trainee teachers, other trainees, volunteers, agency staff and individuals or external contractors who provide services to the Trust.

The purpose of this policy is to encourage good practice and aims to support the emotional and physical wellbeing of bereaved pupils and their families, from the early days of an unexpected or expected bereavement onwards. It can be shared with bereaved families, to help explain what Academies within (SUAT) are trying to do to help, and how we will do that and to reflect the Academy Trust ethos of compassion for the children in our care, their family, and their wider families.

3. Objectives

Staffordshire University Academies Trust (SUAT) have a have robust set of procedures that enable staff to communicate with, and support bereaved pupils, and their families, both before, and after a pupil's return to our academies. Our procedures will help suddenly bereaved children and young people to:

- Be safe – with their welfare supported

- Be involved – be given information and choices
- Feel connected – with support from people they trust and can help
- Understand, and be understood – particularly regarding their reactions, feelings, and thoughts
- Be respected – have their identity and family context acknowledged
- Thrive – within our supportive education setting

All bereavements, in all families, matter to our academies equally

- Every bereavement is unique, and results in different challenges.
- Sometimes, more than one person dies suddenly in a family, or a family faces other difficult challenges, such as injury, or another life challenge.
- Every family is unique, and their needs deserve to be understood and met.

4. Wider Grief Considerations

Anticipatory Grief

Most of us think of grief as something which happens *after* a death. In fact, grief can start a long time beforehand, but this is often not acknowledged, talked about, or even understood. When a loved one receives a terminal diagnosis, grief can begin right there and then. All the feelings and thoughts experienced at this time can be just as intense and difficult as those after a death. Anticipatory grief, which is the normal mourning that happens when a patient and his/her family is expecting death.

During the COVID-19 pandemic, an increase in children experiencing grief or anticipatory grief became evident with many children feeling new concern and worry for their families and friends. An estimated **10,450** children and young people were bereaved of a parent, grandparent, or caregiver due to Covid-19 in England and Wales between March 2020 and April 2021, sadly adding an extra layer of worry to children with thoughts that this may happen to them.

The grief felt before a death might feel no different to the grief afterwards, but it does present some unique challenges. Firstly, not everyone will experience anticipatory grief. For some, it may be that not acknowledging what is happening is a very good coping strategy and grieving may be perceived as giving up hope.

Those who are living with the knowledge of their loved one's impending death can find themselves conflicted. On the one hand, they hold onto the hope that the person won't die but at the same time, they are struggling with the idea of letting go of their beloved when they do die.

Children and young people experiencing anticipatory grief may experience:

- Anger or irritability
- Anxiety
- Denial
- The desire to withdraw from social situations
- Desperation
- Dread
- Guilt
- Feelings of responsibility
- Intense preoccupation with the dying person
- Sadness
- Tearfulness

Ambiguous Grief

Children experience loss every day. Frequently, the term loss is equated with a death loss. However, children undergo many different types of loss that encourage the experience of grief. In fact, many significant losses have little to do with biological or physiological death.

Ambiguous grief means that a loved one is physically here, but because of reasons such as addiction, dementia, traumatic brain injuries or mental illness, is psychologically gone. In contrast to anticipatory grief, there are times in a child's life when someone they love becomes someone they barely recognise. Other aspects of ambiguous grief may include the sudden departure of a loved one, creating a hole where their loved one is supposed to be and triggering a grief response.

Other examples of ambiguous loss may include, but not be limited to

- Separation or divorce
- A pet loss
- A friend's move to a distant location
- Destruction of a favourite toy
- Incarceration

Grief is a natural reaction to loss in addition to a range of emotions, children experience physical responses to a loss, such as exhaustion, insomnia, headaches, stomach aches, distractibility, and regressive behaviours, which may lead to academic and school difficulties. Just like adults, children process grief in unique ways. There is no right or wrong way to grieve. Many times, adults will see a grieving child playing or having fun and believe that the child has not been affected by the loss.

Coping strategies for ambiguous grief and loss

- **Remember that the present doesn't override the past.** This can be easier said than done, but it is important to remember that the person your loved one is now doesn't change the person they were. Even if their words or behaviours now are difficult or hurtful, even if your relationship has changed and is not what it was, this doesn't change the person they were and the relationship you had. Cherish those positive memories, write them down, create a scrapbook of old photos, whatever you can.
- **Understand that the illness isn't the person.** It can be tough when someone you love seems like they should be the same wonderful person they always were, and they are not. Whether it is addiction, dementia, a brain injury, mental illness, or anything else, it is important to understand the illness. As much as we may still feel anger, frustration, or blame toward the person, understanding the illness can divert some of those feelings.
- **Acknowledge the grief and pain of the loss.** Be mindful in recognising this type of grief, it is important that you give yourself permission to grieve this loss. Acknowledge and express the pain of the loss, rather than trying to ignore or avoid the pain.
- **Be open to a new type of relationship.** When the person we love has changed, the relationship we have with them will inevitably change. This can feel like it is objectively and entirely a bad thing, but there is an opportunity for a new type of relationship. It may be that the new version of the relationship might be very hard, in fact, many days it will be very hard. But being open and seeking gratitude in your new relationship can be extremely helpful.
- **Connect with others who can relate.** When experiencing ambiguous loss and grief, finding a support group can be of help. There are support groups out there for caregivers of those with dementia, groups like Al-anon and Nar-anon for family members of those with addiction, and groups like MIND who offer groups for family of those with mental illness.

5. How Children Understand Death at Different Ages

There is a role for policy and practice to embrace multidisciplinary systems of support for children and young people experiencing bereavement in terms of valuing the role of schools, peer support, and consideration of family context, as well as involvement of family, within the support provided to children and young people.

The aim of systems of support should be that staff are aware and mindful of the varying levels of understanding children have regarding death, loss and bereavement and that young people get the right support, at the right time, and by the right people.

Preschool-age children (2-5 years old)

At this stage of development, children believe that death is reversible. They may also be convinced that it was something that they said or did which caused the person to die. Abstract concepts are not easily grasped, and so it is important that the child is spoken to in very concrete terms. To make sense of what has happened, children at this age may often ask the same questions over and over again.

Key points at this age

- Children are curious about death and believe death is temporary or reversible.
- May see death as something like sleeping—the person is dead but only in a limited way and may continue to breathe or eat after death.
- Are characterised by ‘magical thinking’ and understand the world as a mix of reality and fantasy.
- Are naturally egocentric and see themselves as the cause of events around them.
- Often feel guilty and believe that they are responsible for the death of a loved one, perhaps because they were ‘bad’ or wished the person would ‘go away’.
- May think that they can make the deceased come back if they are good enough.
- Will worry about who will take care of them and about being abandoned.
- Are still greatly affected by the sadness of surviving family members.
- Cannot put their feelings into words and instead react to loss through behaviours such as irritability, aggression, physical symptoms, difficulty sleeping, or regression (such as bed-wetting & thumb sucking).

Anticipatory support for children aged 2-5

During the weeks or months leading up to a loved one’s death, it is important to be concrete and use observable examples with preschool-aged children about end-of-life issues. For example, staff should avoid descriptions of death as “sleep” (e.g., “mummy is going to sleep soon and won’t wake up”) because they can create worries about bedtime (e.g., fear that they will also not wake up if they go to sleep). Instead, staff should be encouraged to talk about death in concrete terms (e.g., “death happens when the body stops working”).

Pre-schoolers should be regularly engaged with their parents/carers during this time. Because they have a more egocentric thought process, they may attribute current events to something they did wrong. Therefore, it is important that parents and caregivers have patience with their children and communicate openly in order to prevent any misunderstandings, including guilt.

Primary school-age children (6 to 11 years)

Children begin to develop the understanding that death is irreversible and something that happens eventually to all living things. Death may be regarded as something that is a bit ‘spooky’, and they may display what seems to be an unhealthy curiosity in the more morbid aspects of death. Children at this age may complain of headaches, a sore tummy or other ailments. These are referred to as ‘somatic’ complaints and are generally physical manifestations of emotional pain. Behaviour may change, but it is important to encourage children at this age to express their feelings and understand that what they are feeling is perfectly natural.

Key points at this age:

- Understand that death is final but see it as something that happens only to other people.
- May think of death as a person or a spirit, like a ghost, angel, or a skeleton.
- Understand that death is universal, unavoidable, and will happen to them (by age 10).
- Are often interested in the specific details of death and what happens to the body after death.
- May experience a range of emotions including guilt, anger, shame, anxiety, sadness, and worry about their own death.
- Continue to have difficulty expressing their feelings and may react through behaviours such as school phobia, poor performance in school, aggression, physical symptoms, withdrawal from friends, and regression.
- Still worry about who will take care of them and will likely experience insecurity, clinginess, and fear of abandonment.
- May still worry that they are to blame for the death.

Anticipatory support for children aged 6 – 11

Because school is usually a central focus of children’s lives between 6 and 11 years, it is important to involve the appropriate school personnel and inform them of what is happening in that child’s life. Some children,

however, may not welcome being approached by their teachers about what is going on in their own homes. Instead, parents/carers should make sure that their children know whom to contact within the school system, especially if they are having difficulties at or during school.

It is helpful for children to maintain a certain level of responsibility and regular routines. This can reinforce that life goes on, even in the context of a parent's illness and eventual death. Children may also need additional help from adults with school tasks and activities. In response, families may come to rely on others within their community to provide more support to their children. Finally, it should be noted that school-age children are vulnerable to worries about their own health or the health of their surviving family members. These concerns will require reassurances if and when they manifest.

Secondary school-age children 11-16

Adolescence is a time of great change and grief impacts on the developmental task of moving from dependence to independence. Young people are moving from familial ties to increased involvement with peers. It can be difficult to ask for support while trying to demonstrate independence. Young people do not like to feel different from their peers in any way and being a bereaved young person can be extremely isolating. The support of peers with similar experiences can be very powerful.

Teenagers will have an adult understanding of the concept of death but often have their own beliefs and strongly held views and may challenge the beliefs and explanations offered by others.

Young people who have been bereaved at an earlier age may need to re-process their grief as they think about and plan for their future and fully understand the impact of life without the person who died.

Key points at this age:

Just like adults, teens react to death or impending death in their own way. It is vital to take a wider and more holistic view and be mindful of changes as their personal dynamic alters from what they have been used to up to experiencing loss. Common threads to be aware of, but not limited to, include:

- Becoming more withdrawn
- Acting out their distress
- Risk-taking behaviour
- Display feelings of being "out of control"
- Taking on adult responsibilities and become 'the carer' for those around them

Anticipatory support for children aged 11– 16

Supporting a secondary school aged child through anticipatory grief follows much the same guidelines as younger children, however as teens are reluctant to feel any different from their peers, discretion is important to them so as not to stand out or feel different in any way. Designating a point of contact within the Academy to provide a channel of communication is helpful as is reminding them that they can access support when they need to. It is important, when supporting a teen through anticipatory grief to:

- Acknowledge their presence, their importance, their opinions, thoughts, and feelings.
- Be patient and open-minded. Allow them to grieve in their own way.
- Be available – Sit with the child, listen to them, and answer their questions.
- Let them know that a range of different emotions is normal.
- Validate their feelings and do not minimise them.
- Check in with other adults involved in their life – teachers, school counsellors, coaches.
- Provide communication facilities away from peer groups, such as "walk and talk".

Supporting a bereaved child with Additional Support Needs

Children with Additional Support Needs are sometimes assumed to need protection from death and dying more than most or not have the capacity to understand. It can be easy to underestimate their ability to cope with difficult situations. The challenge is finding creative ways to communicate when words are sometimes not appropriate. If using words, use the real ones, for example dead and dying, not euphemisms.

There are an estimated 44,496 children with SEND bereaved of a parent in the UK and, just like all bereaved children and young people, they need support to understand and cope with their grief. Adults are naturally inclined to want to protect and shield children from difficult and sad situations, and this may be even more so for children with special educational needs and disabilities due to their ability to understand death.

When you tell a child with special educational needs and disabilities the news of a death, provide all of the relevant details to the level of your child's understanding and using their preferred mode(s) of communication. By giving children with SEND the facts about the death, we are helping them to understand what has happened and supporting them with any changes this may bring about, which is best for the whole family.

5 Commitments

If a pupil is suddenly bereaved, in the first instance they can be supported as follows:

- Establish a core group of staff responsible for communication and co-ordination of support offered. This should include a main point of contact.
- In the days after the death, but before a bereaved pupil returns to education, a nominated person with experience and skills in listening and empathetic support, will contact the family to:
 - Acknowledge the bereavement, offer the Academy's condolences, and listen to their story of bereavement, if they want to tell it, in confidence.
 - Establish the family's initial wishes regarding what the child, wider school community, and media (if applicable) should be told about the death.
 - Offer time for the family to reflect on information they may wish to keep private, and a future time to talk about it further, if necessary.
 - In the days after the death, inform staff members and pupils. This will be done in an age-appropriate and sensitive way, considering confidentiality, potential stigma surrounding cause of death and the family's wishes (as established with them).

6 Communications

For the recently bereaved child and their family, communication commitments include the following:

- Offering a point of contact and explain ongoing support the Academy can offer, and listen to the family's views on the pupil's emotional needs
- Offering future availability, as required, to discuss anything the family may wish, relating to the pupil's welfare, and explaining days and times available
- Offering bereavement resources that are age-appropriate and signpost to online advice and relevant agencies
- Signpost to agencies that can support families bereaved in sudden ways, including www.sudden.org, www.mariecurie.org.uk, winstonswish.org, and local providers

7 Plans to Return

Offering the opportunity, at a time and place agreed with the family, for a teacher (or other school representative who the pupil knows and trusts), to meet with the pupil directly, accompanied by any family member/s, to explain what will happen when the pupil returns to school, and who will support them in school.

- Make clear the names of anyone else who is available to communicate with the pupil's family, and find out who, within the family, wishes to liaise with the Academy.
- When the pupil returns to the Academy, the Academy will:
 - Determine the date of that return in discussion with the family, reflecting on the needs of the pupil.
 - Acknowledge their bereavement directly with them in an age-appropriate way, and considering their faith and culture and the family's wishes (as established with them)
 - Discuss collaboratively with the pupil, family, and our staff what can be done to best support them

- Work to enable the pupil's re-integration into 'normal' school routines and create a safe and secure environment for them.

9. Continuing Due Diligence

For a bereaved pupil's remaining time in school, the Academy will:

- Ensure significant dates (such as death anniversaries, birthdays, and culturally significant dates such as annual festivals) are recorded and considered
- Allow opportunities for reflecting on the death, through encouraging an ongoing and open dialogue with the pupil, and with their family
- Consider a pupil's bereavement when planning school activities that might trigger thoughts or feelings about the bereavement and engage the pupil and their family in discussions regarding the pupil's involvement, providing information and choice.
- If a bereaved child or young person is showing signs of suffering from a mental health condition, or other illness, or any indicators or risks of harm, we will ensure that information is shared with the family, and appropriate agencies, and managed appropriately.

When helping a bereaved pupil, the Academy will continue to:

- Ensure they know who they can reach out to for support and how to access this help in ways that are easy and discreet
- Offer them opportunities to express their reactions, feelings, and emotions about their bereavement, in ways they want to, safely and confidentially
- Offer a safe and supervised space where a pupil can go if they need time out from a classroom or playground because of their bereavement
- Use age-appropriate bereavement resources available to us from www.sudden.org and from other child- or youth-specific bereavement charities, and review and update a list of resources that are available on an annual basis
- Be aware of the pupil's family circumstances, including their cultural background, and its relevance to their bereavement
- Be on the lookout for changes in behaviour that may be a sign of a mental health condition, or other illness, or risk to health and safety; and signpost to support for the wider family, as well as the pupil, through the local authority, in order that the family unit work together where necessary.

10. Staff Support and Inclusion

To enable and support staff, Academies will:

- Ensure staff involved in planning school activities and lessons are helped to identify content that may be triggering for children/young people who are suddenly bereaved and consider whether to avoid this content or manage its delivery with care and sensitivity.
- Provide bereavement training and refresher bereavement training, specific to supporting children/young people, and specific to sudden bereavement care and mental health
- Give supportive HR management and peer support to staff who liaise with suddenly bereaved families.

11 Annual Review

Annual reviews will include:

- Annually review age-appropriate bereavement tools, such as websites, books and other resources, and ensure we have books and website lists we need.

- Annually review a list the Academies maintain of national and local age-appropriate services that help children and families who are suddenly bereaved, such as charities and mental health services, and understand what they do, so we can appropriately signpost to them.
- Keep these lists in an accessible place with this policy and procedures.

12 Resources

<https://unitedbrainassociation.org>

<https://www.mariecurie.org.uk>

<https://whatsyourgrief.com>

<https://www.mentalhealth.org.uk>

<https://www.uptodate.com>

<https://www.winstonswish.org>

<https://www.elsa-support.co.uk>

<https://www.staffordbereavementsupport.org.uk>

14. Training providers

<https://www.childbereavementuk.org>

<https://www.winstonswish.org>

<https://www.cruse.org.uk>