

*Insert Setting Emblem*

Bereavement Policy for Early Years Settings

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| Version | September 2019 |
| Setting |  |
| To be reviewed | August 2021 |

Setting Background – ***To be personalised by setting***

Motto / ethos / community to be added by setting

*Example –*

Our setting is fully committed to the emotional health and well-bring of our children and young people and that of our staff. We are dedicated to the continual development of a healthy and thriving setting and strive to work towards this in all aspects of setting life. We are passionate about providing an ethos, environment and curriculum that can provide support during difficult times, including time of death or dying.

# Rationale

Within our setting there may be some recently bereaved children who are struggling with their own situation – or sometimes the entire setting community is impacted by the death of a member of staff or a child.

Wigan’s Safeguarding Partnership are committed to improving the offer around bereavement support in Wigan. Trained bereavement support leads are available across the borough who provide advice and support to anyone working with a bereaved person or family. A bereavement support lead can be accessed by contacting the Wigan Safeguarding Partnership[[1]](#footnote-1).

Every 22 minutes in the UK a parent of dependent children dies, leaving about 41,000 bereaved children each year. Many more are bereaved of a grandparent, sibling, friend or other significant person, and sadly around 21,000 children die in the UK each year.

The Children Act 1989 [[2]](#footnote-2)aimed to ensure the welfare of the child is paramount, working in partnership with parents to protect the child from harm. All intentions of this policy endorse that aim as we endeavour to counter any adverse effects of bereavement and maintain children’s emotional well-being.

***Setting name*** recognises the impact a bereavement by suicide may have on a child / young person, be that of a member of the family or setting community. We also understand the risk of suicide is greater in peer groups of someone who has died by suicide.

**Papyrus UK** can offer support and advice to young people thinking of suicide or anyone who may be worried about someone who is. Details of organisations who can offer support to anyone with suicidal ideations or people who may be worried about someone can be found in *Appendix E*.

# Objectives

We understand that bereavement is an experience which will be faced by all members of our setting at some point. It will be a more difficult experience when the loss is of a member of that setting – a child or staff member.

This policy will provide guidelines to be followed after a bereavement. The aim is to

be supportive to both children and adults, and for staff to have greater confidence and

be better equipped to cope when bereavement happens. Every death and the

circumstances in which it occurs is different and this policy has been constructed to

guide us on how to deal professionally, sensitively and compassionately with difficult

matters in upsetting circumstances.

We recognise:

* That grief may not always be apparent to the onlooker, but its invisibility makes it no less real.
* That differing religions/cultures view death and bereavement from different perspectives and all viewpoints should be taken into consideration and given equal value. [*Appendix B*](#_Appendices)
* That the death of a child has huge repercussions beyond the immediate teaching / care team of that child and every effort should be taken to inform and deal sensitively with the far-reaching contacts.

Section 19 of the Children and Families Act 2014 [[3]](#footnote-3)makes clear that local authorities, in carrying out their functions under the Act in relation to disabled children and young people and those with special educational needs (SEN) must have regard to:

* the views, wishes and feelings of the child or young person, and the child’s parents / guardians,
* the importance of the child or young person, and the child’s parents / guardians, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions,
* the need to support the child or young person, and the child’s parents / guardians, in order to facilitate the development of the child or young person and to help them achieve that best possible educational and other outcomes, preparing them effectively for adulthood. [*Appendix C*](#_Appendices)

# The role of the setting owner/voluntary management committee

To approve policy and ensure its implementation, to be reviewed every two years.

# The role of the setting manager

The manager is often the first person to become aware of the death of a child or a member of staff within the setting and will therefore hold several key responsibilities such as:

* liaising with outside agencies, the Local Authority and keeping the setting owner / voluntary management informed
* be first point of contact for family / child concerned.
* Responding to media enquiries and acting as spokesperson for the setting.

NAME OF SETTING MANAGER

Contact to the deceased family should be established by the manager or owner to gather factual information regarding the death, if not already received from agencies such as Greater Manchester Police. The family’s wishes should be ascertained and respected regarding the sharing of information which should be communicated rapidly to avoid rumour and assumption that may cause the family further distress. All staff will be mindful of the use of social media sites and their impact throughout this time as rumour and gossip spread quickly. Refer to Social Media section for further advice and information.

The deputy manager will assume this role in the absence of the owner or manager.

In a leading and supporting role, the wellbeing of a senior staff member is important and there may be times when this role will need to be handed over to others. Senior staff can seek support from EPS, colleagues and CAMHS as well as other national organisations detailed at the end of this document. *Appendix E*

# The role of the Local Authority

Teams within the local authority can offer support at times of bereavement. These include the Educational Psychology Service (EPS), Early Learning and Childcare team including Early Years Inclusion and Social Care.

It may be possible to plan bereavement support to some extent, for example if a child or member of the setting community has a terminal illness. At other times the death may be sudden and unexpected. At these times the EPS Critical Incident procedures can be implemented. Centralised training ‘Responding with Confidence to Critical Incidents’ is offered by the EPS on an annual basis to nurseries. This helps settings to think about how they would respond to such an incident and understand key messages and processes that can help at times of unexpected death.

Wigan Safeguarding Partnership and Wigan Safeguarding Adult Boards bereavement support strategy group, developed collaboratively across the partnership, can offer support and guidance including access to a large repository of resources and links to a bereavement support lead for ongoing support and advice.

# Death of a child or staff member within the setting

* ***Setting name*** will place the emotion and well-being of the child(ren) / young person centrally to their needs and support.
* Links and communication with a Wigan bereavement support lead practitioner will be made if required.
* Cultural and religious considerations should be considered (see [*appendix B*](#_Appendices) sourced from CBUK)
* A clear communication process should be identified, taking lead from the family and asking who they may wish to communicate with at the setting.
* All staff should be informed first and be prepared and able to then pass on information to children and families. This should include contact to current staff members who may not be in work that day.
* Children who may be particularly vulnerable, such as friends of the deceased, room group of a staff member, or those who may have witnessed the event, should be identified and informed in a way most appropriate for them. This may be individually or as a peer group by a person known to them.
* Staff may need support in relation to the news and may feel that they are not the most appropriate person to share the news to children. All staff should be reminded of the support available to them and an informal mutual support forum, for example the staffroom at the end of the day, can provide staff the opportunity to share feelings and reactions.
* Any member of staff affected by the death will be offered ongoing support as appropriate and will be a priority for the setting. It is only to be expected that many members of staff will be emotionally affected and would benefit from the provision of a calm environment in which to meet with other colleagues and spend some time in reflective mode. Additionally, those staff who may be particularly vulnerable or known to be alone that night will be offered support. This could include the exchange of phone details in order to provide a point of contact for the member of staff.
* ***Settings name*** will be sensitive of any arrangements which may have been already discussed for a child or person who died from a progressive illness or on end of life care.
* A letter to all of the settings families affected should be distributed at the earliest opportunity and wherever possible, the wording of this communication should be shared in advance with the bereaved family for their input. Sample letters can be found at the end of the policy.
* In consultation with the family, arrangements for the funeral attendance may be clarified, with the consideration of full or partial setting closure in some circumstances.
* Where necessary, a press statement should be prepared by the setting manager / owner and assistance can be sought by contacting the local authority press office.

* The family and children should be asked for their views in how best to mark the death in an appropriate way for that setting which is relevant to the deceased and be considerate of the nature of the death. Examples of these can be found in [*Appendix D*](#_Appendices). Special care should be taken to avoid sensationalising the death in order to safeguard the setting community and avoiding contagion.

# Children who are bereaved

***Setting name*** recognises that the impact of bereavement follows a child throughout their life so information should be recorded and shared with relevant people, particularly at transition points. ***Setting name*** will endeavour to be aware of any ongoing bereavement issues for new pupils / students. To this end it is important to have effective communication with feeder schools / settings.

A more common experience for practitioners / staff is that of a child experiencing the death of a parent or sibling. Whole setting activities will not normally be appropriate in this situation, but the needs of that individual will still be given careful consideration.

Support can be offered and undertaken with Early Help and lead by the setting, with consent of the family.

A child’s understanding of death and loss varies depending on age and developmental stage. [*Appendix A*](#_Appendices) provides further information on a child’s understanding of death and loss by age groups[[4]](#footnote-4)

# Social media

If news of the incident or death is shared on social media sites, ***setting name*** will act quickly to establish the facts and communicate effectively to the setting community as previously described to avoid rumour and speculation as well as alleviating complexities and unnecessary trauma to the bereaved family.

It is our policy that no information regarding the death will be shared using social media by staff, until all the facts have been established and all family members, friends and colleagues have been informed. Respect and empathy are key to ensuring the bereaved do not face unnecessary trauma and ***setting name*** will make every effort to handle the event and communication of this in a sensitive and efficient manner.

# Supporting children with additional learning needs (Remove where applicable)

Children with learning difficulties are no different to all other children and young people, in having their grief recognised, hearing the truth and being given opportunities to express their feelings and emotions, but may need extra help with their understanding and ways to express feelings.

Support for each child should be dependent on their needs and suitable resources utilised for communication to be honest and understood, finding creative ways to communicate when words are sometimes not appropriate.

Further information can be found in [*Appendix C*](#_Appendices) and the useful resources section at the end of this policy.

# Appendices

Appendix A**:** Children’s understanding of death

The following information is based on developmental chronology and is taken from CRUSE bereavement care website. It is helpful to consider these developmental levels when thinking about how children with special needs may experience grief.

The nature of a child’s understanding of death and bereavement will be different at

different stages of development. Although a child’s grief is individual, their understanding of the loss of a loved one progresses as they mature. In this section you will find the most common understandings of death by children at certain stages of their development.

Do bear in mind that a child’s understanding of death during their development will differ in circumstances where the child may be experiencing educational difficulties.

* Birth to six months

Babies do not cognitively understand the notion of death; however that does not mean to say that they do not respond to the loss of someone close, or that they don’t experience grief. A baby up to six months old experiences feelings of separation and abandonment as part of their bereavement. The bereaved baby is aware that the person is missing, or not there and this can cause the baby to become anxious and fretful. This can be heightened if it is the baby’s primary caregiver who has died and the baby is able to identify that the one who is now feeding them, changing them and cuddling them is not the deceased person. Similarly if it is the baby’s mother who is grieving a loss, the baby can pick up on these feelings and experience grief too.

* Six months to two years

At this developmental stage the baby is able to picture their mother or primary caregiver internally if she/he is not present. If it is the primary caregiver who has died the baby will protest at their absence by loud crying and angry tears. It is common for babies to become withdrawn and lose interest in their toys and feeding and they will likely lose interest interacting with others. At the more mature end of this developmental stage bereaved toddlers can be observed actively seeking the deceased person. For instance if granddad spent much of his time prior to death in his shed the toddler might persistently return to investigate the shed in the hope that they will find him there.

* Two years to five years

During their development between the age of two to five, children do not understand that death is irreversible. For instance, a four year old child may be concerned that although nanny was dead, she should have come home by now. This example illustrates how children at this stage do not understand the finality of death and nor do they understand what the term “dead” actually means. It is common for a young child to be told that their aunt has died and still expect to see them alive and well in the immediate future. Children do not understand that life functions have been terminated and will ask questions such as:

“Won’t Uncle Bob be lonely in the ground by himself?”

“Do you think we should put some sandwiches in Grandpa’s coffin in case he gets

hungry?”

“What if Nan can’t breathe under all that earth?”

“Will Daddy be hurt if they burn him?”

As the cognitive understanding of children in this age range is limited, they can sometimes demonstrate less of a reaction to the news of the death than might be observed by an older child and might promptly go out to play on hearing the news of the death.

Children aged between two and five years old have difficulty with the abstract concepts surrounding death. For instance, they might be confused as to how one person can be in a grave and also be in heaven at the same time. They will become further confused if they are told that the deceased person is simply sleeping and this in turn could make them fearful of falling asleep or seeing anyone else asleep. They might insist on waiting for the person who has died to wake up or similarly if they have been told that the person who has died has gone on a long journey they may await their return.

At this age bereaved children can become involved in omnipotence or magical thinking. This refers to the concept that bereaved children believe that their actions, inaction, words, behaviours or thoughts are directly responsible for their loved one’s death. This form of thinking is not exclusive to this particular age group and can be experienced by many bereaved children and young people of older ages. It is essential that you explain to the bereaved child that the death was not in any way their fault or responsibility. The need to reassure the grieving child that nothing they said / didn’t say, did or didn’t do caused the death is paramount.

* Five years to ten years

Children at this developmental stage have acquired a wider understanding of death and what it entails. They begin to realise that death is the end of a person’s life, that the person who has died won’t return and that life functions have been terminated. By the age of seven the average child accepts that death is an inevitably and that all people including themselves will eventually die.

This understanding can also increase a child’s anxieties regarding the imminent deaths of other people who they are close to. Children of this age are broadening their social networks by attending school and are therefore open to receive both information and misinformation from their peers and social circles. With this in mind it is important that the cause of death, the funeral and burial process and what happens to the deceased person’s body are explained in a factual and age appropriate manner to the bereaved child. Children will ask many questions and may want to know intricate details pertaining to the death and decomposition of the body. Again, it is vital that children have such details explained to them clearly so that they understand.

At this developmental stage children can empathise with and show compassion for peers that have been bereaved. Children aged between five and ten often copy the coping mechanisms that they observe in bereaved adults and they may try to disguise their emotions in an attempt to protect the bereaved adult. The bereaved child can sometimes feel that they need permission to show their emotions and talk about their feelings.

The important thing is to let them do this. Avoid remarks such as, “Come on be a big brave girl for mummy” or “Big boys don’t cry”, such comments however well meant can make children feel they need to hide their feelings or that what they are feeling is wrong. This can cause complications as the bereaved child develops.

* Teenagers

Young people or teenagers have developed a greater understanding of death, the long term implications of losing someone close and are more keenly aware of the emotional aspects than their younger counterparts.

Due to the developmental changes taking place within the young person at this time their reactions to death are likely to be extremely intense. Many young people will reflect on the injustice of the death asking why the person who has died had to die and they will be considering in greater depth the notion of fate.

The bereaved young person is likely to become concerned about who will pay the bills or care for them if the person who has died was their primary caregiver. The bereaved young person is likely to have a wider social network which they are more likely to seek support from them than their immediate family as they struggle to create an identity independent from that of their family.

The young person’s tasks of grieving are very similar to that of an adult but the young mourner is often unable to manage the strong emotions that bereavement entails and can therefore present as being extremely angry and even end up in physical fights. Some bereaved young people can revert to childish behaviour in order to relocate some security and normality in their lives where as others might try to “grow up too fast” and see themselves as taking on adult roles.

It is essential to remember that young people are not adults and should therefore not be burdened with adult roles. Like all children and young people, bereaved teenagers need to be allowed and encouraged to share how they are feeling and what frightens them.

There can be a tendency for young people to try and avert their emotions or bottle them up by avoiding the family or by assuming the role of an adult. If this happens, gentle encouragement is needed for the young person to open up and communicate their feelings. Sometimes a bereaved young person may become involved in risky behaviours in an attempt to manage their grief and its associated emotions.

For example, some bereaved young people may use alcohol or drugs as a way of self soothing. Often the alcohol / drugs act as an anaesthetic to the pain they are experiencing. Self-harming can also be employed by bereaved young people in an attempt to help them cope with their sadness. If the bereaved young person is self-medicating or harming themselves help should be sought.

Appendix B: Cultural and religious considerations

Different Cultures and Beliefs

Schools have to function within an increasingly multi-cultural society, in which various beliefs, religious and non-religious, require to be taken into account. Respect for the differing needs, rituals and practices is essential when acknowledging a death. It is this diversity that enriches our lives.

General points for Eastern Faiths:

Within a faith there are often many variations and it is wrong to be prescriptive beliefs can be moderated by life in a Western Culture. This is especially so for the younger generation, who may find it difficult to fit in with the stricter requirements of older members of a family or community. Families tend to be much more involved in preparing the body and the funeral

arrangements than in Christian faiths.

Because of belief in an afterlife, it is important that the whole body is retained. Post-mortems therefore tend to be viewed as unwelcome procedures. The coffin is likely to be kept at home until the funeral and may well be open. All who wish to pay their respects will be very welcome. The following descriptions merely give an overview of the major religions and belief systems that are found in the UK.

***Christianity***

Christians believe that there is just one God and that Jesus Christ was the Son of God. They believe that Jesus died on the cross (The Crucifixion), and that three days later, God raised him from the dead (The Resurrection).

Christians believe in an afterlife and also the idea of resurrection but the details around what actually happens at the time of death and afterwards, varies within the different denominations. For some, as soon as a person dies, he or she is judge by God and will immediately go to Heaven or Hell, dependent on how good or bad a life they led. For Roman Catholics, there is a half-way place called Purgatory, where an impure soul can stay until fit to enter Heaven. Others believe in the Day of Judgement, when the world will end and the dead will return to life to be judged by God.

Within the different Christian denominations, there are many variations on what happens at a funeral. When someone dies, the body is taken to an undertaker who will carry out the necessary preparations for the body to be laid out. This is to enable those who wish to view it before it is placed in a coffin. The funeral, organised by an undertaker, is about one week after the death. This usually takes place in a church, but sometimes a crematorium, or a combination of the two. The coffin will remain closed. Wreaths or bunches of flowers may be placed on the coffin. It is traditional to wear black but this custom varies. If held in a church, the funeral service may include a Holy Communion, Eucharist or Mass. The body will either be buried or cremated, dependent on the wishes of the deceased and the family. A churchyard grave is often marked by a headstone but for a cremation, the family may choose a more informal way to mark where the ashes are buried or have been scattered.

***Islam***

Muslims believe in life after death when, on the Last Day, the dead will come back to life to be judged by Allah. The good will reside in Paradise, the damned in Hell.

Muhammad teaches that all men and women are to serve Allah and that they should try to live perfectly, following the Qur`an. Devout Muslims believe that death is a part of Allah’s plan and open expressions of grief may be viewed as disrespectful to this belief.

As cremation is forbidden, Muslims are always buried, ideally within 24 hours of the death. Ritual washing is usually performed by the family or close friends at the undertakers or mortuary. They will wrap the body in a clean cloth or shroud. The coffin is often very plain as traditionally one would not be used. The grave is aligned to enable the head of the deceased to be placed facing the holy city of Mecca. Muslim graves are unmarked but to meet UK requirements, a simple headstone is used as a compromise.

There is an official mourning period of three days when the family will remain at home and be brought food by friends and relatives. For forty days after the funeral relatives may wish to make regular visits to the grave on Fridays.

***Hindu***

Hindus believe in reincarnation and a cycle of rebirths. When a person dies, the soul is reborn in a new body, returning to earth in either a better or worse form. What a person does in this life will influence what happens to them in the next, the law of Karma. Those that have performed good deeds in this life will be reborn into higher order families, those whose behaviour has been bad will be born again as outcasts. A Hindu funeral is as much a celebration as a remembrance service. Hindus cremate their dead as it is the soul that has importance, not the body which is no longer needed. White is the traditional colour and mourners usually wear traditional Indian garments. If attending, it may be worth asking what will be appropriate dress. During the service, offerings such as flowers or sweetmeats may be passed around and bells rung so noise is a part of the ritual. The chief mourner, usually the eldest son, and other male members of the family, may shave their heads as a mark of respect. In India, the chief mourner would light the funeral pyre. Here, he will press the button to make the coffin disappear and in some instances, may be permitted to ignite the

cremator. Ashes may be taken back to India to be scattered on the River Ganges. In the UK, some areas of water have been designated as acceptable substitutes. The mourning period lasts between two and five weeks.

***Sikhs***

Sikhs believe the soul goes through a cycle of rebirths, with the ultimate objective being to reach perfection, to be reunited with God and, as a result, break the cycle. Thus death holds no fear and mourning is done discretely. The present life is influenced by what happened in previous ones and the current life will set the scene for the next.

The deceased is cremated as soon as possible after death. The coffin is taken to the family home where it is left open for friends and family to pay their respects. It is then taken to the Gurdwara where hymns and prayers are sung. A short service follows at a crematorium, during which the eldest son presses the button for the coffin to move behind the curtain. In India, the eldest son would light the funeral pyre and no coffin would be used. After the funeral, a meal may held at the Gurdwara. The ashes may be taken back to India to be scattered. Here they may be sprinkled in the sea or river. The family remain in mourning for several days after the funeral and may listen to readings from the Guru Granth Sahib (Holy Book).

***Buddhist***

Buddhists believe that nothing that exists is permanent and everything will ultimately cease to be. There is a belief in rebirth but not of a soul passing from one body to another. The rebirth is more a state of constantly changing being rather than a clear cut reincarnation. The ultimate objective is to achieve a state of perfect peace and freedom. Buddhists try to approach death with great calmness, and an open minded attitude of acceptance. There are few formal traditions relating to funerals and they tend to be seen as nonreligious

events. Cremation is the generally accepted practice and the service is kept very simple. It may be conducted by a Buddhist monk or sometimes family members.

***Humanist***

Humanists are non-religious. They follow the principle that this life is the only one we have and therefore when you are dead there is no moving on to another one. The focus of a Humanist funeral is on celebrating the life of the deceased. The person people knew is talked about, stories shared, and memories recalled. Their favourite music may be played, whatever it is. This is done by friends and family who are supported by an Officiant. The ceremony, usually a cremation, will be tailored to meet the family’s wishes rather than following a set pattern.

**Appendix C**: Talking about death to children with learning difficulties (where developmentally appropriate)

When talking about death and bereavement with a child with learning difficulties it

might be helpful to consider: -

* WHO should be key worker working with the child and family - inform parents who this person will be and keep in contact.
* WHERE is the child most receptive to new ideas? – quiet room, pool, outside. Use this space for talking with the child.
* WHAT should be talked about? (as agreed with parents). Ensure that you use the same language and ideas as the family to avoid confusing the child.
* HOW is new information normally given? - signs, verbally, pictures. Use the same format to talk about illness and death.
* HOW is new information normally reinforced? – you will probably need to repeat information a number of times over a long period.
* PROCEED at a level, speed and language appropriate to the child
* BUILD on information given – small bites of the whole, given gradually will be easier to absorb.
* REPEAT information as often as needed.
* WATCH for reactions to show the child understands – modify and repeat as needed.
* FOLLOW child’s lead – if indicating a need to talk or have feelings acknowledged, encourage as appropriate.
* WATCH for changes in behaviour to indicate the child is struggling more than they can say and offer support as needed.
* LIAISE with other agencies involved with the child to ensure accuracy and continuity of information.

All children benefit from being given simple, honest “bite size” pieces of information

about difficult issues - often repeated many times over. For some children with

special needs, it might be more appropriate for symbols to be used to convey ideas

rather than language. This can include the use of ‘talking mats’ or other symbol support resources.

**Appendix D**: Memorialisation ideas

* Memory boxes can be constructed to contain mementoes and items of significance.
* Art and craft work - memory mobiles, decorating photo-frames, creating a

Collage, express feelings and assist understanding.

* Memorial or remembrance book for students / pupils to leave a message.
* Pebble pool with messages or names.
* Displaying a piece of work of a subject the child enjoyed (art, design, music, English)
* Family trees and life Story work can help to reiterate and reinforce the child’s

experiences

* Collate group responses to a loss to help in the understanding of shared grief.
* Plant flowers; create a memory garden, memory tree.

NB. In an environment where further deaths may be experienced (Early years settings with

children with life-limiting conditions) it would be wise to consider a realistic approach

to memorialisation, eg. Names on stones to be added to a water feature – rather than

naming rooms after a specific person.

Appendix E: **Useful resources and websites**

[Wigan Safeguarding Partnership](http://www.wiganlscb.com/home.aspx) – 01942 486025

**For schools, professionals and individuals**

[Child Bereavement UK](https://www.childbereavementuk.org/) - supports families and educates professionals both when a baby or child of any age dies or is dying, and when a child is facing bereavement. Large choice of resources available to purchase including an information for school’s pack. **Helpline 0800 02 888 04**

[Cruse Bereavement Care](https://www.cruse.org.uk/) – offer support, advice and information to children, young people and adults when someone dies. Section for schools and professionals as well as parents, military families and young people (see Hope Again). **Helpline 0808 808 1677**

**Support around suicide and bereavement by suicide**

[Papyrus UK](https://papyrus-uk.org/) – Provide confidential support and advice to young people struggling with thoughts of suicide, and anyone who is worried about a young person via their helpline **HopelineUK 0800 068 4141**. Engage communities and volunteers in suicide prevention projects and deliver training programmes to individuals and groups

[Shining a Light on Suicide](http://www.shiningalightonsuicide.org.uk/) – help to find what support is available in the boroughs of Greater Manchester and provide national resources that are available to help if you are bereaved by suicide or concerned that someone you know may be thinking of suicide.

[Samaritans](https://www.samaritans.org/) - We're working together to make sure fewer people die by suicide. Every six seconds, we respond to a call for help. No judgement. No pressure. We're here for anyone who needs someone. **Call 116 123**

[Survivors of Bereavement By Suicide (SOBS)](https://uksobs.org/) - We exist to meet the needs and overcome the isolation experienced by people over 18 who have been bereaved by suicide. Includes support groups, contact via email, forum or **helpline 0300 111 5065**

**For children and young People**

[Hope Again](https://www.hopeagain.org.uk/) - is the youth website of Cruse Bereavement Care. It is a safe place where you can learn from other young people, how to cope with grief, and feel less alone. You will find information about our services, a listening ear from other young people and advice for any young person dealing with the loss of a loved one

[Winston’s Wish](https://www.winstonswish.org/) – Offer support for children and young people after the death of a sibling or parent – **Helpline 08088 020 021**

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Suggested template for letter to parents / families – **These are for use by the setting and should not be included in the published policy on the website.**

*Before sending a letter home about the death of a child, permission should be gained from the child’s parents / guardians and the contents of the letter and the distribution list must be agreed by the family and setting.*

All letters can be changed and personalised dependent on circumstance.

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Sample letter on death of a child:

Dear

Your child’s room leader / nursery assistant had the sad task of informing the children of the death of <Name>,

They were told that <name> died from an illness called cancer. As you may be aware, many children who have cancer get better but sadly <NAME> had been ill for a long time and died peacefully at home yesterday.

When someone dies, their family and friends have lots of feelings of sadness, anger,

and confusion - these are all normal. The children have been told that their early ear practitioners are willing to try and answer their questions at the setting, but I have made available some information which may help you to answer your child’s questions as they arise.

You can obtain this from the nursery.

Yours sincerely

<Name> Setting Manager

Sample letter on death of a staff member:

Dear

I am sorry to have to tell you that a much loved member of our staff <NAME> who has been a practitioner at this setting for a number of years has died.

Our thoughts are with <Name …….’s> family at this time and in an effort to try to respond to his/her death in a positive way, all the children have been informed.

When someone dies it is normal for family and friends to experience many different feelings like sadness, anger and confusion, and children are likely to ask questions about the death that need to be answered honestly and factually in terms that they will understand.

The children have been told that their practitioners are willing to try and answer their questions but if there is anything else you or your child needs to know, please do not hesitate to ring the setting and we will be more than happy to help you.

Yours sincerely,

<Name> Setting manager

Sample letter to a bereaved family in circumstances the loss of a family member (Sibling, Parent, Guardian, Grandparen)

**Initial contact should be made via telephone or face to face wherever possible**.

Dear <Name>

We are so very sorry to hear of <NAME / FAMILY MEMBER> death. There are no words to express the sadness of losing a child / loved one and we can only begin to imagine the anguish you must be going through.

As a early year setting community, we are doing our best to offer comfort and support to <CHILDS NAME> and be assured that you are in our thoughts at this very sad time.

Do not hesitate to contact us if we can be of support in any other way.

With Sympathy,

<NAME> Headteacher

1. 01942 486025 or wscb@wigan.gov.uk [↑](#footnote-ref-1)
2. <http://www.legislation.gov.uk/ukpga/1989/41/contents> [↑](#footnote-ref-2)
3. <http://www.legislation.gov.uk/ukpga/2014/6/section/19/enacted> [↑](#footnote-ref-3)
4. Source: Cruse bereavement care [↑](#footnote-ref-4)