

# Children's Critical Incident Debriefing Tool

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Student: \_\_\_\_\_

Date and Time: \_\_\_\_\_

My Stress Level:

0	1	2	3	4	5	6	7	8	9	10
None	Manageable			Need Help			Critical		Out of Control!	

a) What level is your stress at right now?

b) Describe what happened clearly. Acknowledge your own choices and actions. Use the back if necessary:

c) What was the highest level your stress reached during this incident?

d) What did you do to reduce this to a more manageable level?

e) What did you do RIGHT during this incident?

f) What did you do WRONG during this incident?

g) What will you do differently next time something like this happens? Use the back if necessary.

By signing below, you are promising that you are safe, that you will do nothing to hurt yourself or anyone else and that you will not act to destroy property.

\_\_\_\_\_  
Student/Date

\_\_\_\_\_  
Adult/Date