

CRISIS INTERVENTION PLAN

“PREVENTING CHAOS IN TIMES OF CRISIS”

**CONWAY HIGH SCHOOL WEST
2300 Prince Street
Conway, AR. 72032**

CONWAY HIGH SCHOOL WEST CRISIS INTERVENTION PLAN

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CRISIS RESPONSE TEAM: DEFINITION AND FUNCTION

Definition

A **Crisis Response Team** is a group empowered to act in situations that are physically or psychologically dangerous to students or staff.

The objectives of this team are:

1. To provide for the safety, welfare, and care of the students and staff.
2. To provide order out of chaos.
3. To be prepared and professional.
4. To minimize liability by having a plan and following it.

Function

Crisis Response Teams may be utilized when the emotional or physical safety of students or staff is threatened. Such situations may be:

1. Medical emergency or natural emergency.
2. Violence in or around a school (from outsiders or students/staff).
3. Death of a student or staff member.
4. Suicide of a student or staff member.

The extent of Crisis Response is determined by the impact the tragedy has had on the school and staff.

I. THE CRISIS RESPONSE TEAM

A. Composition

Since the Crisis Team could be responsible for a wide variety of tasks, a Crisis Team should be comprised of approximately seven to eight members. A custodian, two teachers, a school administrator, a nurse, a school counselor, a secretary, and an adjunct mental health professional might be considered.

The Crisis Team should be composed of two kinds of members:

1. Regular school faculty/staff

The faculty/staff members who know the students best should be considered likely candidates for the team. Careful attention should be used in selecting faculty/staff who relate well with students and who have the students' respect.

2. Adjunct members

These members may have more training and/or experience in specialized fields (health, psychology) or could be more knowledgeable about the availability of community resources. These may be part-time employees, consultants, or volunteers from the community.

B. Qualities of the Team Members

It is important that the Crisis Team members have such qualities as:

1. Leadership ability
2. Training
3. Ability to be a team player, i.e., interactive cooperation
4. Calmness and the ability to maintain professional perspective
5. Decision-making ability
6. Availability

C. Team Leader

A Crisis Team leader and a "backup" should be designated in advance to be in charge during a crisis. Usually this will be the principal, but the "backup" would assume the team leader's role if necessary.

1. Leadership Criteria Include:

- a. Availability
- b. Confidence
- c. Knowledge of the students
- d. Knowledge of the community
- e. Seen as a leader

2. Duties of the Leader:

- a. Maintain a current record with the telephone numbers or persons and organizations who are to be contacted IMMEDIATELY (such as. the superintendent, police and fire chiefs, emergency health service, school staff).
- b. Designate a Crisis Team headquarters within each school.
- c. Assemble the Crisis Team to review the overall plan and individual responsibilities at regular intervals.
- d. Arrange for staff in-service on crisis management.

- e. Assign an appropriate team member, plus backup, to log events and actions during the crisis. This will provide an accurate record for later use.
- f. Assess situation quickly as to who is involved, what is happening, and what should be done. The impact on students and staff determines the amount of involvement needed.
- g. When It Is Over: It is important that a DE-BRIEFING occur with the Crisis Team to talk over what happened, and to receive counseling on dealing with the stress they suffered during the event. Support services may need to be provided to team members.

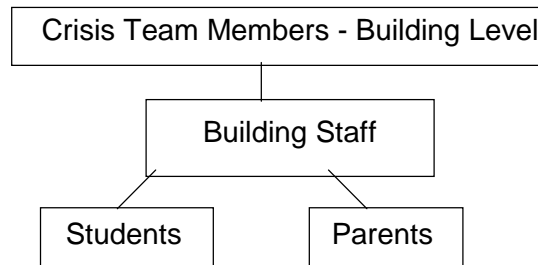
D. Training of the Crisis Team

The Crisis Team should receive specialized training. This training may be provided at the district level to all team leaders. Each leader will be responsible for training the school team. Additionally, each counselor in the district should receive training in crisis intervention techniques. Crisis Team training should include, but not be limited to training in:

1. First aid
2. Advanced Cardio-Pulmonary Resuscitation
3. Possible causes of suicide
4. Incidence of suicide
5. Warning signs of suicide
6. Use of assessment tools and intervention skills with "at-risk" students
7. Local mental health resources (community and private)
8. Facts related to suicide contagion and "postvention" techniques
9. Basic concepts of grief and grief management
10. Development and maintenance of local resource linkages
11. Development of interpersonal skills
 - a) Active listening and speaking skills
 - b) Crisis intervention skills
12. Training and assignment for specific administrative tasks
13. Steps to take for public safety regarding natural emergencies
14. Preventive measures regarding fire danger.

There is no intent that the crisis team will be prepared or expected to provide psychotherapy or ongoing counseling for any student. The skills to be used by the crisis team are intended for use in containing a crisis situation or to deter the development of an emergency, thereby keeping the school functioning as smoothly as possible.

TRAINING MODEL



BUILDING LEVEL TRAINING FOR CRISIS

Training is a critical element in establishing workable approaches to handling all crisis situations. Much of this training should be provided by the designated crisis team in each building. This does not exclude the use of other trained school personnel and/or outside professionals.

Faculty/Staff Training

1. Identify and interpret school district policies regarding crisis response.
2. Identify and familiarize participants with the crisis team members and their functions.
3. Train faculty to identify at-risk students.
4. Prepare faculty to appropriately handle crisis contacts made by students after school hours.
5. Train teachers to lead constructive dialogue with their students following a crisis situation.
6. Train secretaries, custodians, food service personnel, and any other appropriate staff members in communication, crisis response, district policies, etc.

Procedures for General Crisis Intervention

Unanticipated events, such as suicides, school bus crashes, natural disasters, or multiple injuries or deaths, can quickly escalate into a school wide catastrophe if not dealt with immediately and effectively. Knowing what to do if such a crisis occurs will minimize the chaos, rumors, and the impact of the event on the other students. As a reminder, for the purposes of this manual, crisis is defined as:

A sudden, generally unanticipated event that profoundly and negatively affects a significant segment of the school population and often involves serious injury or death.

The following procedures should be implemented if a school wide crisis occurs. A General Crisis Intervention Checklist is provided at the end of this section to help you track the actions taken.

Immediately Following Notification of Crisis

The school administrator or designee should implement the following procedures when the school is notified of a near-death or fatal crisis situation:

1. Tell the person providing the information not to repeat it elsewhere in the school. Explain the school's need to verify the information and have any announcement of the event come from the designated school administrator. If there is concern regarding the likelihood of compliance with this request, it may be useful to keep the reporting person in the office (or have that person come in to the office if he or she called in the information) until appropriate steps can be taken.
2. Tell office staff members NOT to repeat or give out any information within or outside school until specifically instructed to do so. Have them direct all inquiries to the administrator or designee until told otherwise. In schools using student office help, it may be useful to request that only adults answer the school telephone for the remainder of the day.
3. In cases of reported student death, verify the reported incident by calling the police liaison or coroner.

DO NOT DISTURB THE AFFECTED STUDENT'S FAMILY.

The timing of the notification of a crisis may alter the order of the initial steps taken. For example, if the school is notified in the morning, all procedures should be implemented on that day with emergency faculty meetings scheduled for lunch and after school.

If notification is received at night or on the weekend, ask the person providing the information not to spread the information further until the situation is verified, and proceed with # 3. Continue through the remaining general crisis intervention procedures, instructing office staff as appropriate (# 2) the following school day.

Following Verification of Crisis

The following actions are listed in a priority order. In actuality, several things will happen simultaneously. It is critical, however, that # 1-10 occur BEFORE THE PUBLIC ANNOUNCEMENT (#11) IS MADE.

Once verification of a crisis has occurred, the administrator and/or CRT designees must attend to the following:

1. Notify the superintendent or other appropriate district administrator of the event. Have that person notify the media liaison if necessary.
2. Convene the Crisis Response Team. To not unnecessarily alarm others, use the coded message developed for these situations (e.g., "CRT members, please report to room 5," or "A CRT meeting will convene in room 5 in 10 minutes").
3. Have an administrative assistant or other designee notify the school's social worker, psychologist, and/or counselors. If the affected student was in a special education or other special program, notify the appropriate program coordinator.
4. Assign CRT members in the building to locate, gather, and inform closest friends of the deceased/injured and provide support. Pull this group together before the general announcement is made. If significant others are absent or out of the building, assure that a knowledgeable, supportive adult gives the news to them. With parent or guardian consent, have these absent students transported to the school if practical and appropriate.
5. Prepare a formal statement for initial announcement to the entire school. Include minimum details and note that additional information will be forthcoming. A sample statement is included on p. 56. Also prepare statements for telephone inquiries.
6. Decide on a time for an emergency staff meeting and announce it over the public address system. Invite designated outside professionals to join the meeting to help staff members process their own reactions to the situation. A sample format for a staff meeting is on p. 8.

7. Identify students, staff, and parents likely to be most affected by the news (e.g., due to their relationship to the deceased/injured, recent or anticipated family losses, personal history with similar crisis, recent confrontations with the affected student). These persons are targeted for additional support.
8. Determine if additional district/community resources are needed, or are needed to "stand by", to effectively manage the crisis, and notify them if appropriate.
9. Assign team members in the building to:
 - a. Provide grief support for students in designated building areas. (Try to have more than one area available for this purpose.) Have the adults on duty in these areas keep lists of students they see. (Form B). Make sure the parents/guardians of these students are notified regarding the impact of the event on their children.
 - b. Review and distribute open-ended questions to help teachers with classroom discussion. A sample list of discussion questions and guidelines is included in the appendix.
 - c. Stand in for any substitute teacher in the building or for any staff member unable or unwilling to deal with the situation during the announcement and subsequent discussion.
 - d. Coordinate and greet all auxiliary support services staff members and take them to their assigned locations. Provide a sign-in/out sheet for them. See appendix for a sample.
 - e. Distribute the developed list of community resources to all classes.
 - f. Assign a counselor, psychologist, social worker, or other designated staff member to follow a deceased student's class schedule for the remainder of the day if that will be helpful to teachers of those classes.
10. Station staff/student support members as planned prior to making the announcement.
11. Announce the crisis over the public address system or by delivering a typed statement to every classroom teacher before the end of the period. Include locations of in-building support. See appendix for a sample announcement.

Once the announcement is made, assigned staff members will perform the following:

- a. Monitor grounds for students leaving the building without permission. Redirect them to support services. If unable to intercept, notify a family member expressing the school's concern.
- b. Notify parents of students closest to the deceased/injured and ask them to pick up their children at the end of the school day. Implement the evaluation plan previously developed to plan for masses of parents who will pick up their children.
- c. Notify bus drivers--especially those who drive the buses usually traveled in by the injured or deceased student, or who are experiencing the most severe shock.
- d. Notify feeder schools regarding siblings or other students predicted to be strongly affected.
- e. Provide support to faculty and other staff members in the lounge. Provide private support to individual staff members identified in # 7.
- f. Collect deceased student's belongings from his/her locker or other sites at the end of the day.
- g. Officially withdraw a deceased student from the school attendance rolls.

The Staff Meeting

The school administrator and designated staff or community members must do the following at the first staff meeting during a school crisis:

- a. Pass around a photograph of the deceased/injured student to familiarize staff with the student.
- b. Review the facts of the crisis and dispel rumors.
- c. Help staff members process their responses to the situation.
- d. Describe the feelings that students may experience and suggest how teachers might handle specific situations.
- e. Provide guidelines for helping students who are upset. See Appendix Form C, for sample discussion questions and guidelines.

- f. Encourage teachers to allow for expressions of grief, anger, etc., in the homeroom or class in which the announcement is received or in other classes throughout the day. Emphasize the acceptability and/or normalcy of a range of expressions. The guiding principle is to return to the normal routine as soon as possible within each class and within the school. The structure of routine provides security and comfort to all members of the school community.
- g. Encourage staff to dispel rumors whenever possible and discourage any "glorification" of the event (especially in suicidal death).
- h. Request staff to meet 30 minutes early the next morning to review procedures and debrief. If the crisis occurs on a Friday, call the meeting for the following Monday morning.

GENERAL CRISIS INTERVENTION CHECKLIST

- _____ 1. Direct staff and others not to repeat information until verification is obtained.
- _____ 2. Notify superintendent.
- _____ 3. Convene CRT and assign duties.
- _____ 4. Notify building support staff, such as counselors, psychologists, and/or social workers.
- _____ 5. Inform closest friends of the affected student and provide support
- _____ 6. Prepare formal statement or announcement.
- _____ 7. Announce time and place of emergency staff meeting.
- _____ 8. Identify other/additional students, staff, and parents likely to be most affected by the news.
- _____ 9. Assess need for additional community resources.
- _____ 10. Assign trained staff or community professionals to:
 - _____ Provide grief support to students
 - _____ Review and distribute discussion questions to teachers
 - _____ Stand in for absent/affected/substitute teacher
 - _____ Distribute lists of community resources.
- _____ 11. Make official announcement.
- _____ 12. Hold emergency staff meeting.
- _____ 13. As needed, assign team members and other staff to monitor grounds; notify parents, support staff, and feeder schools; provide support to staff; collect student belongings and withdraw student from school rolls.

Long-term Follow-up to Crisis Situations

The following information may be useful in the days and weeks following a crisis. Longer term follow-up procedures also are listed.

The Day After: Workday Two of Crisis Management

1. Gather faculty members and update them on any additional information/ procedures.
2. In case of death, provide funeral/visitation information if affected family has given permission.
3. Identify students in need of follow-up support and assign staff members to monitor each of these vulnerable students:
 - a. Coordinate any ongoing counseling support for students on campus.
 - b. Announce ongoing support for students with place, time, and staff facilitator.
 - c. Notify parents of affected students regarding community resources available to students and their families.
4. Convene **Crisis Response Team** for debriefing as soon as possible:
 - a. Discuss successes and problems.
 - b. Discuss things to do differently next time.
5. Allow staff an opportunity to discuss feelings and reactions.

Long-Term Follow-up and Evaluation

1. Provide list of suggested readings to teachers, parents, and students.
2. Amend crisis response procedures as necessary.
3. Write thank-you notes to out-of-building district and community resource people who provided (or are still providing) support during the crisis.
4. Be alert on crisis anniversaries and holidays. Often students will experience an "anniversary" grief reaction the following month or year of the crisis, or when similar crises occur that remind them of the original crisis. Holidays, too, are often difficult for students who have experienced loss.

EMERGENCY CRISIS RESPONSE

Any unforeseen combination of circumstances, that require some type of action to provide for the safety, welfare and care of students and staff, can create an emergency crisis situation.

Knowing what to do if an emergency occurs will minimize the danger, chaos, and emotional and physical impact on students and staff, while providing for medical assistance to injured and the safety and security for all.

The following list gives examples of the many types of situations that create an emergency crisis situation.

- Acts of violence
- Gun shots
- Homicide
- Accidental Death
- Kidnapping
- Riots
- Rape
- Tornado
- Severe Weather
- Earthquake
- Gas leaks
- Explosion
- Chemical Spills
- Fire
- Air Plane Crash
- Medical Emergency due to illness
- Natural disasters

EMERGENCY CRISIS SITUATION RESPONSE PLAN

ACTIVITY	Day of Crisis	Person(s) Responsible
1. Remove other students from the area. Ring the bell and/or use all-call if students are not in class. KEEP THE STUDENTS IN CLASS, UNLESS THE BUILDING MUST BE EVACUATED.		Faculty Principal
2. Call the police, fire department or for an ambulance, if needed.		Principal
3. If a student has been injured, designate a nurse or other school personnel to ride in the ambulance to the hospital and take the student's health folder. The person at the hospital will contact the school to report on the current condition of the student.		Crisis Team
4. Notify the Superintendent's Office Speed 01 or 450-4800		Principal
5. Contact the student's family to discuss how the family wishes to handle the situation. Information that will be released should be discussed with the family. Only the facts are to be released. If the incident is a suicide attempt, offer no speculation as to the reason.		Principal
6. Post someone at the doors of buildings to monitor who goes into and comes out of the buildings.		Crisis Team
7. Convene the Crisis Team and make plans for the rest of the school day.		Principal
a. Determine other school personnel needed such as counselors or special staff to help check students out of school, etc.		Crisis Team
b. Meet with counselors and special staff to inform them of the situation and determine strategies.		Principal Crisis Team
c. Determine how and when students and faculty will be informed of the events and what information will be released.		Crisis Team

- | | | |
|----|--|----------------------------|
| d. | Determine process for releasing students from class to see a Counselor. | Principal
Crisis Team |
| e. | Inform students where the Crisis Center is located and that counselors are available for students who need to talk with a counselor. Keep a list of students who come to the Crisis Center to be used for follow-up. | Crisis Team
Counselor |
| f. | Determine what, if any, written communication related to the incident to send home by students. | Crisis Team |
| g. | Students may be checked out of school by established procedures. When checked out, they must leave the school premises and not return for the remainder of the day. | Secretary
Special Staff |
| 8. | Convene a faculty meeting at the end of the school day to discuss events of the day, answer questions, and determine how to proceed the following day. | Principal |

DAY 1: First School Day Following the Crisis Emergency

Suggested Steps:

1. The Crisis Team and school personnel may meet prior to the beginning of the school day to review any special plans for Day 1 and to provide the faculty an opportunity to process their reactions to the event.
2. At the start of each class, the students should be given the opportunity to talk about their reaction to the event. Teachers should be aware of any student who is having significant difficulty and refer such students to the Crisis Center for counseling. Teachers should attempt to resume normal class activities as soon as appropriate.
3. The faculty should be convened at the end of Day 1 to review the day's events, to provide support for each other, and plan for Day two.
 - a. Teachers should be encouraged to make calls during the evening to parents of students who seemed particularly upset during the day.
 - b. Any new information should be shared with staff and news media as appropriate.

Day 2: Second School Day Following the Crisis Emergency

Suggested Steps:

1. The Crisis Team and faculty could meet prior to the beginning of the school day to review any special plans for Day 2 and to provide the faculty an opportunity to process any of their reactions to the event.
2. The Crisis Center should remain open to any students needing brief counseling. "High risk" students should be referred outside for more intensive counseling.
3. Classes should be back to normal as much as possible.
4. Teachers should be asked to continue monitoring students' reactions and behaviors for signs of agitation or depression.
5. Counselors should receive absence reports the first few days after the crisis event to determine whether "high risk" students are absent, and if so, counselors should contact these students and offer assistance.
6. All school personnel should report all rumors regarding the victim to the Crisis Team Leader and make appropriate efforts to correct or prevent the spread of any rumors.

Day 3: Third School Day Following the Crisis Event

Suggested Steps:

1. The Crisis Center should remain open.
2. "High risk" students continuing to show signs of stress should be recommended for outside professional help. These students' parents should be notified of this recommendation.
3. If applicable, Crisis Team could make presentations to each class affected by the emergency. Students should be encouraged to participate in these discussions, and any students interested in discussing these matters more fully should be urged to see their school counselor.
4. School personnel should watch for any changes in students, being particularly observant for any signs of agitation or depression in individuals or groups.

Day 4: Fourth School Day Following the Crisis Emergency

Suggested Steps:

1. The Crisis Center should remain open.
2. An announcement over the P.A. system should be made to all students that the Crisis Center will be closed after Day 4 and any special concerns or counseling needs will be handled through the counselor's office.
3. Students should be encouraged to put the crisis behind them and focus on the future with a positive outlook.
4. School personnel should watch for any changes in students, being particularly observant for signs of agitation or depression reactions from individuals or groups.

FURTHER PLANS:

1. Crisis team members should closely monitor all identified "at risk" students for a minimum of 30 days following the crisis event or Day 0.

**CRISIS TEAM LEADER'S INFORMATION SHEET
EMERGENCY CRISIS SITUATION**

1 . Obtain the following information:

Date : _____

A . What has happened?

B. Who has been notified?

- _____ Police
- _____ Fire
- _____ Ambulance
- _____ Parent
- _____ Superintendent

C. Is the building secure? _____ Yes _____ No

D. Injuries? _____ Yes _____ No

If Yes, how many? _____ What type of injuries? _____

E. Where are the injured? _____

F. Are other staff members needed? _____ Yes _____ No

G. Is transportation (buses) needed? _____ Yes _____ No

H. Is the Building Level Crisis Team functioning properly?

EMERGENCY CRISIS RESPONSE PLAN CHECKLIST

- _____ 1. Use all call, bell, or voice command to manage student movement.
- _____ 2. Call the police or fire department, if needed. 911
- _____ 3. Call ambulance, if needed. 911
- _____ 4. Designate nurse or other person to ride in ambulance, if needed.
- _____ 5. Call the Superintendent's Office. Speed 01 or 450-4800
- _____ 6. Call student's family.
- _____ 7. Post staff outside doors.
- _____ 8. Convene Crisis Team
- _____ 9. Meet with outside support personnel, if appropriate.
- _____ 10. Prepare written communication for distribution to students.
- _____ 11. Convene faculty meeting at the end of the day.

MEDICAL AND NATURAL EMERGENCY

Medical emergency falls into categories:

- (1) Health Problems (2) Accidents

Health Problem or Accident

1. Immediately remove all students from the emergency situation and surrounding area. If possible, remove victim from the area. Any witnesses should be identified immediately and kept available for detailed information if necessary.
2. If a weapon is involved, immediately summon the police.
3. If a health problem or personal injury has occurred:
 - a. Administer first aid and/or CPR as needed.
 - b. Call school nurse if necessary.
 - c. Contact parent or guardian. Explain problem or details and request what doctor they prefer. If severe, or deemed necessary, call an ambulance.
 - d. Designate secretary or teacher or other personnel to ride in the ambulance.
 - e. If possible, take students health folder for emergency personnel or hospital use.
 - f. In severe cases, and if deemed necessary for control purposes, turn off bells or ring bells if students are not in class.
 - g. Notify school principals and superintendent's office of situation and action taken.
 - h. If appropriate, a written accident report should be sent to appropriate officials.

SEVERE WEATHER / TORNADO

Procedures for handling a severe weather / tornado crisis resulting in personal injury are incorporated in “MEDICAL AND NATURAL EMERGENCY” section, Emergency Crisis Response Procedures, and the Earthquake evacuation procedures.

A copy of the building’s severe weather / tornado drill procedures should be posted in every class room. Copies of the building’s severe weather plans are included in the appendix of this manual.

1. Each classroom should have a severe weather / tornado drill plan and instructions posted.
2. The severe weather or tornado drill signal will be announced over the intercom to avoid confusion with a fire drill.
3. When an announcement is made, please move to the designated area for your classroom and assume a safety position.
4. All students, teachers and staff should remain in their designated area until the all-clear signal is heard.
5. The all-clear signal will be an announcement over the intercom instructing everyone to return to their class and resume normal activities. There will also be a long ringing of the mechanical bell system. This is sound of old style mechanical bells and not electronic tones, to insure that someone does not confuse the normal class change tone with the all-clear signal.
6. If it becomes necessary to evacuate the building due to storm damage, please follow the normal fire drill evacuation procedures.
7. Teachers should check roll and account for every student.
8. While evacuating, watch for dangerous debris such as broken glass and loose electrical lines.
9. After evacuating the building, go directly to your assigned area away from the building and remain there for further instruction.
10. Keep all students together and keep driveways clear for emergency vehicles.

Preparation For Severe Weather / Tornado

These items should be considered:

1. Cell phones for back-up communication.
2. Flash lights and extra batteries.
3. Medical trauma kit and supplies.
4. Battery powered portable PA system or power megaphone.
5. Back-up copies of class rosters for all teachers arranged by period will be needed if computers are down and class roll books can not be located to account for all students.
6. Campus map showing the location of all utility main disconnects or shut off valves, and locations of any and all hazardous chemicals.
7. Floor plan of all laboratories with chemical storage location and gas line and shut off valve locations.
8. Floor plans of all buildings showing room numbers and teacher assigned.
9. Back-up copies of all tornado drill class assignment locations for search and rescue if necessary.
10. Back-up copies of the master schedule for teacher location by period.
11. Supplies to protect and preserve permanent records exposed to weather.
12. List of all fire extinguisher locations.

* Some items such as class rosters will be very necessary for student and staff accountability. For this reason, back-up copies should be keep at a nearby location in case storm damage destroys on-site copies.

SEVERE WEATHER / TORNADO EMERGENCY CRISIS RESPONSE

IN THE EVENT OF DIRECT STORM OR TORNADO DAMAGE

Follow the Emergency Response Plan with emphasis on the following:

1. Assemble the **Crisis Response Team** and designate a command post.
2. Assign duties and follow the Emergency Crisis Response Plan
3. Survey campus for injuries and damages.
4. Call fire department and ambulance, if needed.
5. Notify the Superintendent's office.
6. Check campus for dangerous debris and any fallen electrical lines and/or gas leaks.
7. Set security around the campus to keep out all unauthorized vehicles and visitors and maintain a clear path for fire/rescue and ambulance.
8. If evacuation is necessary, see that the seriously injured are not moved unless absolutely necessary.
9. Assist arriving medical and rescue personnel with the location of trapped and/or injured.
10. Collect all student information and health forms.
11. Compile list of all injured.
12. Keep every one except emergency personnel, out of the buildings until declared safe by the Maintenance Supervisor or his designee.
13. Designate a safe assembly area for teachers to take students after evacuation.
14. Provide assistance for faculty or staff that have been informed of personal property damages or family injuries.

FIRE

In case of fire, the following procedure should be followed.

1. Sound the fire alarm signal and evacuate the building.
2. Notify the fire department. 911
3. Search for the exact location of the fire. If feasible, a fire extinguisher may be used by staff personnel pending arrival of the fire department.
4. Follow specific fire drill procedures for each building. A copy of the building's fire drill plan should be posted in every class room. Copies of fire drill plans are included in the appendix of this manual.

BOMB THREATS

A threat to bomb a school should be taken seriously. The person taking the call shall report the threat immediately to the principal or his/her designee. According to Conway Public School Board Policy, the principal or designee shall:

1. Notify the Conway Police Department and Fire Department.
(call 911)
2. Execute evacuation plan. If the caller gave any indication as to the location of the bomb, avoid that area during evacuation.
 - a. On clear days, follow normal Fire Drill Procedures. (see appendix)
 - b. In inclement weather, follow normal Fire Drill Procedures; then
 - 1) Search a large group area first (gym, cafeteria, auditorium)
 - 2) Move students to the large area as soon as it has been determined that the area is safe.
3. Notify the Superintendent or his designee of the bomb threat.

Bombs can be constructed to look like almost anything and can be placed or delivered in any number of ways. The probability of finding a bomb that looks like the stereotypical bomb is almost nonexistent. The only common denominator that exists among bombs is that they are designed to explode.

Most bombs are homemade and are limited in their design only by the imagination of, and resources available to, the bomber. Remember, when searching for a bomb, suspect anything that looks unusual. Let the trained bomb technician determine what is or is not a bomb.

EARTHQUAKE
EMERGENCY AND EVACUATION PROCEDURES

I. EARTHQUAKE PREPAREDNESS

A. Obtain or draw a map of school and school grounds

1. This combination plot map and floor plan will serve many purposes. It will be used to note potential hazards and the location of utilities, emergency equipment, and supplies. Further, it will provide a basis for the following:
 - a. Establishing an evacuation route
 - b. Identifying a safe, open-space assembly area
 - c. Developing procedures for conducting emergency response activities (e.g., search and rescue, damage assessment, etc.)
2. Mark clearly by name the location of classrooms, library, and other activity rooms, restrooms, heating units, hallways, and all doors and closets. In addition, locate:
 - a. Main shut-off valves for water and gas
 - b. Electrical power master switch
 - c. Stoves, heating/air-conditioning equipment
 - d. Chemical storage and gas lines in laboratories
 - e. Hazardous materials stored by custodians
 - f. Portable, battery-powered PA equipment radios and lighting
 - g. Fire extinguishers
 - h. First aid equipment
 - i. Outside water facets/hoses
 - j. Overhead power lines
 - k. Underground gas and sewer lines

3. As you work through this and subsequent steps, make a list of your information needs, such as the locations of sewer and underground gas lines. Then contact the appropriate information source(s) (e.g., the Fire Department or Public Works Office).

II. IN THE EVENT OF AN EARTHQUAKE

A. Inside the school building

1. If inside a school building, everyone should:
 - a. Move away from windows or other potential hazards.
 - b. Get under desk or table or other shelter against an inside wall. If the shelter moves, move with it and stay under it.
 - c. Assume drop position and be silent so directions can be heard above the noise of the earthquake.
 - d. Stay in drop position until earthquake is over and/or until further instructions are given.
2. After the initial shock and things settle down, teachers will evacuate the classroom, being alert to the possibility of aftershocks.
3. When leaving classrooms, teachers should make every effort to take the roll book with them. Announce that no one is to return to the room unless authorized to do so.
4. Teachers will take classes to prearranged place on campus and remain there until the reentry to school buildings has been approved, until they are directed to take the students elsewhere. or until they have been released, picked up by parents or other authorized persons.
5. Schools will remain open indefinitely until every student has been released to parents or to an authorized person.

B. Outside the school building

1. If outside the school building or walking to or from school when an earthquake occurs:
 - a. Get in the open clear of all buildings, trees, exposed wires, or other hazards that may fall. Assume drop position until quake is over.

2. After the earthquake: If on the way to school, continue to school; if on the way home, continue home.

C. On the school bus

1. Drivers should immediately stop the bus away from hazards.
2. Occupants should assume drop position under seats if possible, or in the aisles.
3. After the earthquake: If on the way to school, continue to school; if on the way delivering students home, continue to do so.
4. If conditions do not permit such continuation, send message to superintendent/designee or principal and wait for assistance.

III DURING AN EXTENDED PERIOD AFTER AN EARTHQUAKE

A. The Superintendent/Designee shall:

1. Check status at the schools, the district office, and buses.
2. Evacuate district office if necessary, and set up command post.
3. Confer with police, fire department, and city officials regarding situation at each school and in the community.
4. Determine plan for continuation of school following the disaster.
5. Notify principals and radio stations so that parents are informed of the situation at each school.
6. Release principals when all students and teachers have been released.

B. The principals shall:

1. Appoint guards to see that no unauthorized person goes back into the buildings until they have been declared safe by the Director of Maintenance.
2. Post traffic control at school entrance to keep parking lot free for emergency vehicles.
3. Assess total school situation and check with superintendent/designee.

4. Select and announce the location of disaster and first aid centers; call on principal's designees to operate the first aid center.
5. Direct the recovery of all medical and disaster- related supplies, equipment, and information listings from the first aid supply stations.
6. Oversee conservation and distribution of water
7. See that parents/guardians are notified as soon as possible of any serious injury to students. If necessary, send injured persons to designated emergency centers.
8. Release students according to superintendent/ designee's directive.
9. Release teachers at the principal's discretion.

C. The teachers shall:

1. Remain with class group, or report to the designated disaster center if the teacher does not have a class group.
2. Remain in charge of all first aid for the students in their class group until an emergency first aid station is established.

Students with major injuries are to remain in the classroom, supervised by one teacher from a buddy group. Students with minor injuries are to be cared for after evacuation.

3. When evacuating classroom, take roll book.
4. Check with buddy classes when evacuating. If there are seriously injured persons who cannot be moved, assign one teacher to remain. Other teachers evacuate the rest of the students.
5. Take roll. Send notice to disaster center immediately of any student who is not with class group, noting possible whereabouts, i.e., at library, absent from school, etc. Take roll periodically throughout the disaster period.
6. Note on class roster the name of anyone who, for any reason, leaves the class group: to go to first aid center, disaster center, home, home of authorized person.

7. If the student (early grades) is released to anyone other than a parent or authorized person, i.e., to first aid center, write the child's name on the child in permanent ink. (The child might go into shock or become unconscious later and not be able to give name. If child is sent to medical center away from school, identification is even more essential.)
 8. Be aware that there are many members of the community who are expected to assist those at the schools: search and rescue volunteers, persons with special skills or equipment, those who have stored supplies, and volunteers to help teachers.
 9. Encourage students to talk about their experiences and feelings. Talking is the best way for a fearful child to give expression to his/her concerns. Maintaining verbal contact with students will not only provide reassurance but will allow the anxious child the means to vent his/her apprehensions. Talking it out is absolutely essential in psychological adjustment to the disaster.
 10. As the time period extends, remind students that they are in perhaps the safest place possible under disaster conditions. Fill in time with games, songs, stories, exercise and rest periods.
 11. Report to the principal when all students have been released.
- D. The nurse shall: (if at the school)
1. Assist the injured
 2. Help set up and staff the emergency first aid center.
- E. The secretarial staff shall:
1. Under the direction of the principal provide for the preservation of essential school records.
 2. Monitor radio emergency broadcasts.
 3. Funnel volunteers to locations where needed.
- F. The custodians shall:
1. Check water, gas, and electricity; if so directed by the principal, turn off utilities and intake valve on water heater.

2. Assist in any fire-fighting or recovery activities
3. Assist the principal in establishing controls to prevent the use of contaminated water.
4. Help set up emergency sanitation facilities if needed.

Throughout this plan, all key persons have been designated by role. It is assumed that each of these persons will have one or two people trained to carry out their responsibilities if necessary.

VIOLENCE IN AND AROUND THE SCHOOL

In the event of violence, unwanted intruders, kidnapping, the immediate concern is to aid the victim(s).

I. Violence

1. Contact the police - 911.
2. Follow medical procedures.
3. Isolate the situation as best as possible.
4. Notify parent or guardian.
5. Contact the superintendent.

II. Unwanted intruder

Safety measures should be in place at all buildings. They include:

1. Signs stating that all visitors are to report to the office posted on exterior doors.
2. Substitute teachers, parent volunteers, and visitors should be issued identification badges when they check in at the front office.
3. All visitors are required to sign in at the front office. Teachers in isolated areas of the building are provided either intercom or telephone service.

III. Kidnapping

All parents will be asked to complete forms requesting names of persons to whom their children can be released. These names will be kept in the office, and limited to a list of three. Names of persons the student can be released to must be in the student's file.

1. Remain calm.
2. Students will be supervised before school, during lunch and after school during bus loading period.
3. Any person in the building without a visitors pass will be summonsed.
4. Communicate with the perpetrator(s), if feasible.
5. Cooperate with the perpetrators in absence of bodily harm or threat to life.

DEATH OF STUDENT OR STAFF MEMBER

The circumstances surrounding the death may determine the degree of implementation of the general crisis intervention procedures, depending on the level of impact upon students and staff. Students and staff more directly involved with the victim should be monitored closely. A counselor will be made available for classroom intervention, individual crisis counseling, and referral to appropriate outside agencies of any student (s) or staff member in need of further assistance.

Steps to be recognized in the grief process and appropriate/inappropriate responses are included on the following pages.

PATH OF GRIEVING

DENIAL OF LOSS (*"He can't be gone!"*)

REALIZATION OF LOSS (*"Oh, God, it's true. He's gone forever!"*)

FEELING OF ABANDONMENT, ALARM, AND ANXIETY
(*"Dear God, how will I ever make it alone?"*)

DESPAIR, CRYING, PHYSICAL NUMBNESS, MENTAL CONFUSION,

INDECISIVENESS, RESTLESSNESS (a product of anxiety) insomnia,
loss of appetite, irritability, loss of self-control, wandering mind

PINNING (the physical pain and agony of grieving) and a search for some token
remembrance of the lost love object

ANGER (*"Why did he have to die?; Why didn't he take better care of himself?;
It's not fair!"; "Now what am I supposed to do?"*)

GUILT (*"I should have taken better care of him. It's my fault he got sick!
I shouldn't have been so mean!"*)

FEELINGS OF LOSS OF SELF, OR TOTAL EMPTINESS (*"Half of me is gone"*)

LONGING (the dull ache that won't go away, even when with others)

IDENTIFICATION WITH THE LOST PERSON BY ASSUMING SOME OF HIS TRAITS
ATTITUDES, OR MANNERISMS

PROFOUND DEPRESSION.. (*"I just want to die!"*)

PATHOLOGICAL ASPECTS, such as a myriad of minor aches and ailments, and a
marked tendency toward hypochondria (*"Who will take care of me now?"*)

VOLUNTARY RETURN TO SOCIETY

APPROPRIATE ACTIONS FOR DEALING WITH GRIEF

During the time of a crisis involving personal injury to or death of a child, words of comfort and support from school staff are extremely important to both the parents and friends. It is, however, important for us to avoid saying inappropriate phrases which may serve to further complicate the pain, suffering, and grief of the family and friends. Below are items which may be appropriate and items which are generally inappropriate to say to a family.

INAPPROPRIATE PHRASES:

"I know just how you feel."

"Everything is going to be all right."

"How did this happen?"

"What got into him/her that she would do such a thing?"

"What had you done to him?"

"Why was he so defiant?"

"It would be a blessing if he would go ahead and die."

"No, you really don't feel that way."

AVOID THEOLOGICAL STATEMENTS

Respect individual beliefs and statements by students or parents.

MORE APPROPRIATE RESPONSES:

"I feel part of the pain/grief that you are feeling at this time."

"I know that it must be difficult (terrible) for you now."

Simply say, "I am sorry because there is no other way I can feel for you."

"What may we do to assist you?" Suggest what you are willing to do.

"Don't try to second guess your own wisdom or decisions."

Do not be afraid to say the child's name when discussing the incident.

Let the family affirm their feelings. Do not negate their expression of feelings; what they say is usually correct.

Let the individuals know that there will be people available to help.

Listen to parents and what they have to say; you may build integrity by not saying anything.

Affirm that being a parent/friend sometimes involves having to deal with pain and grief that we do not want to deal with.

SYMPTOMS OF GRIEF IN YOUNGER CHILDREN

- Nervousness
- Uncontrollable rages
- Frequent sickness
- Accident proneness
- Antisocial behavior
- Rebellious behavior
- Hyperactivity
- Nightmares
- Depression

SYMPTOMS OF GRIEF IN OLDER CHILDREN

- Difficulty in concentrating
- Forgetfulness
- Poor schoolwork
- Insomnia
- Reclusiveness or social withdrawal
- Antisocial behavior
- Destructive behavior
- Resentment of authority
- Overdependence
- Resistance to discipline
- Frequent sickness
- Accident proneness
- Overeating
- Truancy
- Experimentation with drugs and/or alcohol
- Depression
- Secretiveness
- Sexual promiscuity
- Staying away or running away from home
- Talk of or attempted suicide

HOW LONG DOES GRIEVING LAST?

The answer to this question depends on many factors, the principal ones being:

1. The degree of attachment or love for the one lost.
2. The period of psychological preparation.
3. Age and general health at the time of bereavement.
4. Security when bereavement occurs.
5. The extent of supportive family network.
6. The presence and affection of a close circle of friends to help in coping.

THE PHYSICAL ASPECTS OF GRIEF

Most research shows seven symptoms to be most common among people in a state of bereavement as follows:

1. Waves of physical distress marked by crying, sobbing, sometimes by screaming.
2. Closing up of the throat muscles, making swallowing uncomfortable.
3. A feeling of choking and loss of breath.
4. Heavy and repeated sighing.
5. An empty feeling in the abdomen
6. Lack of muscle power: muscle aches and pains
7. A feeling of extreme tension, as if you're going to explode inside.

EMERGENCY CONFERENCE WITH PARENTS

In a meeting with school personnel today, information was shared regarding _____ and his/her emotional condition and behavior. Since my child has continued to exhibit signs of extreme anxiety following the recent crisis at school, the recommendation was made that counseling/mental health services be sought immediately.

I have been provided with names and phone numbers of local agencies, private practitioners, and others who can provide assistance to my child and me.

School Personnel

Parent or Guardian

School Personnel

Parent or Guardian

Date

SUICIDE CRISIS

Few events in the life of a school are as potentially disruptive, chaotic, or painful as the suicide of a student. School personnel should not be expected to handle problems of this magnitude without the resources of official policies and procedures and an adequately trained staff to carry out a school based plan of action.

Each employee of a school district should be involved in a coordinated suicide prevention effort in the public schools. The campus principal has a key role in providing leadership for implementation of campus suicide prevention activities. Classroom teachers, librarians, and other school personnel play a crucial role in the identification, referral, and monitoring of troubled and suicidal students. Students, likewise, have a role in the identification, referral process and, where appropriate, peer counseling. School counselors, along with other support personnel organized into campus "crisis teams", are central to implementing any effective intervention plan.

I. THE CRISIS TEAM

Refer to pages 1-3

II. IMPLEMENTATION OF FORMAL METHODS OF IDENTIFYING SUICIDAL AT-RISK STUDENTS

A critical element in any action plan is the functional application of proven methods for identifying at-risk students. This should be a disciplined, yet flexible decision making process which assesses the potential lethality of the student's behavior and his personal resources. This will include considering the need for hospitalization or referral for ongoing mental health services.

A. Referrals to Crisis Team

An at-risk student can be self-referred or referred by another student or a friend, parent, neighbor, teacher, or other school personnel to the crisis team for assessment.

Teachers, parents, or other school personnel who identify a potentially suicidal student will usually initially refer that student to the school counselor or designated crisis team member. Each school should include, as apart of its referral procedures, a method to "red flag" students in need of immediate assistance from the crisis team. Referring personnel should be responsible for transmitting all relevant information concerning the student to the counselor at the time of referral.

When time permits, any referral information should be carefully reviewed prior to interviewing the student. This might include interviewing the referring person about his/her observations of the student's behavior and any other relevant information that is known. Interviewing those school personnel who best know the student could also be very helpful.

IN EVERY INSTANCE THE CRISIS ASSESSMENT INTERVIEW SHOULD TAKE PLACE WITHIN 24 HOURS.

B. The Crisis Assessment Interview

A designated crisis team member should remove the identified student from class to a quiet and secure office to conduct the assessment interview. The student must not be left unattended until the assessment is completed. The criteria for deciding which team members will conduct this interview should be based on the following factors:

1. Training and experience of team members
2. Seriousness of presenting problem
3. Time and coverage constraints
4. The student's relationships with the faculty

This decision should be discussed with the principal involved and made on a case-by-case basis.

C. Assessment of the Suicide At-Risk Student

The crisis team member receiving the referral should carefully interview the identified student in order to make an initial assessment as to the magnitude of risk (low, moderate, or high). The proper plan of action will be determined by this assessment. The Suicide Prevention/Assessment Response (SPAR) Form will serve as a useful guide.

THE DETERMINATION OF RISK CAN BE DEFINED AS:

High	Imminent danger
Moderate	Potential danger high
Low	No immediate risk identified

HIGH RISK

Imminent Danger - Requires: **IMMEDIATE** Response

1. Contact **Crisis Response Team** leader immediately.
DO NOT LEAVE THE STUDENT UNATTENDED.
2. Contact parents/guardians. If they don't respond, call protective services and report as medical neglect.
3. Call police and if required, and ambulance.
4. Call community mental health resource person and request his/her immediate assistance.
5. Complete Suicide Prevention Assessment Response (SPAR) Form and prepare for follow up.

MODERATE RISK

Potentially Dangerous- Requires: **Thorough Evaluation/Referral**

1. Contact crisis team leader.
2. Obtain phone consultation from identified community mental health person.
2. Contact parents and request parents to pick up the student. Provide referral options.
3. Complete SPAR Form.

LOW RISK

Requires: Short Term **Monitoring** as Needed

1. Contact crisis team leader.
2. Complete SPAR form within 24 hours.
3. If warning signs persist, set up an appointment to see student the following day.
4. Contact parents and set up a conference.

III. PREVENTION CONTAINMENT POSTVENTION

Each suicide crisis event presents a unique and profound challenge for school administrators and staff. Having adequate policies and procedures in place will guide the administrative decision-making process. Sufficient pre-planning and implementation will help prevent a "bad" situation from becoming worse.

Administrators should have a grasp of the realities of a crisis situation, be sensitive to the needs of the survivors, and ensure that existing policies and procedures are followed. Following these steps will aid in maintaining a functional school in any emergency.

Reports of published follow-up studies conclude that if these steps are adequately followed, the much feared phenomenon of contagion (serial suicides) can be averted. Postvention services (a series of planned interventions made with the survivors following a suicide) must also be attended to in the policy making process.

A. Response Plan to Suicide/At-Risk Behavior Occurring Off Campus and After Hours

Most suicide threats and attempts occur after school hours and off campus. School personnel are often perceived as important personal resources by students and their parents. For this reason school personnel may be called upon at home and after hours to help in a crisis. It is most important that formal guidelines for handling such emergencies be made available to, and followed by, school personnel. Doing so will ensure that these after-hour emergencies are handled effectively.

In many situations where a student calls a teacher at home and signals suicidal intentions, the student's family may not be available or helpful. Therefore, that teacher should obtain as much information from the student as possible (essentially the same as for a crisis assessment at school). If this teacher is not a crisis team member, as soon as possible, he/she should contact a crisis team member for assistance in handling the situation. Depending upon the crisis team member's assessment of the seriousness of the situation, the following persons could be contacted:

1. Student's parents
2. Police
3. Ambulance
4. Protective services
5. Local community mental health center emergency worker (or personal therapist)
6. Peer counselor team (Life Preservers)

Should the situation become extremely critical (the student has ingested pills or poison or has possession of a gun or knife), the police must be notified immediately.

The following information should be gathered and made available to emergency personnel:

1. Name of student and parents/guardians
2. Student's home address
3. Exact nature of the threat
4. Exact location of student
5. Who else is near the student who could be helpful
6. Name, address, and phone number of person reporting the incident

One should delay contacting any other people until the immediate safety of the student is assured. Some situations are of such critical proportions that the teacher should remain on the phone with the student AT ANY COST. This contact should be maintained until the immediate crisis is resolved or emergency personnel have arrived on the scene. In such a case, the teacher remaining on the phone with the student might pass a note to someone else in close proximity (his/her spouse, companion, or friend) requesting assistance to summon emergency personnel.

An alternate method, which should be used only as A LAST RESORT due to the risk involved, is for the teacher to hang up for a minute to call another member of the crisis team. Then, while the teacher returns to the student, this second team member will contact all other necessary personnel.

SPECIAL NOTE:

It is crucial that prior cooperative agreements be achieved with local law enforcement officials to facilitate the smooth and efficient handling of a crisis event. School administrators and crisis team members need to be aware of how school personnel can best assist the police in any such situation.

A completed suicide, even when it occurs off campus and after hours is of such magnitude that virtually all students and school personnel will bear of the event quickly via the "rumor mill". The range of emotional reactions by everyone in the school to such information will vary greatly. Neither the pretense that "nothing has happened" nor the glorification of such a tragic event will help the survivors effectively cope with their own emotions.

Suicide Attempts

When a school becomes aware that a student or staff member attempted suicide, the school must protect that person's right to privacy. Should a parent or other family member notify the school of a student's suicide attempt, the family should be referred to appropriate community agencies for support services. Staff response should be focused on quelling the spread of rumors and minimizing the fears of fellow students and staff. As opposed to convening a CRT meeting and alerting the student body, any services provided to the person who attempted suicide must be kept confidential and coordinated with outside service providers, such as a suicide crisis counselor or hospital emergency team.

A SUICIDE ATTEMPT BECOMES A CRISIS TO BE MANAGED BY SCHOOL STAFF ONLY WHEN ONE OR MORE OF THE FOLLOWING CONDITIONS EXIST:

1. Rumors and myths are widespread and damaging.
2. Students witness police action or emergency services response.
3. A group of the attempt survivor's friends are profoundly affected by the suicide attempt and request support.

When one or more of the above conditions exists, the following should be implemented:

1. Tell the person providing the information about the suicide attempt not to repeat it elsewhere in the school.
2. If school office staff members heard the report, tell them not to repeat or give out any information within or outside school unless they are specifically told to do so.
3. Have the Crisis Response Team member closest to the survivor talk to the most profoundly affected friends and determine the type of support needed.
4. Provide space in the school for the identified peers to receive support services. Provide necessary passes to release these students from class to receive services.

School Reentry for a Student Who Has Attempted Suicide

Efforts to respond to suicide attempts and other traumas should be focused on making the student's return to school a comfortable one. Because families exposed to a suicide attempt experience considerable guilt and fear, they are more likely to disclose that a daughter or son has made an attempt if they know the school has a helpful, nonthreatening manner of dealing with suicide.

Because a student who attempted suicide often is at greater risk for suicide in the months following the crisis, it is extremely important to closely monitor his or her reentry into school and to maintain close contact with parents and mental health professionals working with that student.

Assuming the student will be absent from one to four weeks after a suicide attempt and possibly hospitalized in a treatment facility, your school should follow these steps:

1. Obtain a written release of information form signed by the parents. This makes it possible for confidential information to be shared between school personnel and treatment providers.
2. Inform the student's teachers regarding the number of probable days of absence.
3. Instruct teachers to provide the student with assignments to be completed, if appropriate.
4. Maintain contact with the student to keep him/her informed of the latest developments in the school, if appropriate.
5. Seek recommendations for aftercare from the student's therapist. If the student has been hospitalized a Crisis Response Team member should attend the discharge meeting at the hospital.
6. The CRT member should convey relevant nonconfidential information to appropriate school staff regarding the aftercare plan.
7. Once the student returns to school, a CRT member should maintain regular contact with him/her.
8. The school should maintain contact with the parents, provide progress reports and other appropriate information, and be kept informed of any changes in the aftercare plan.

EMERGENCY CONFERENCE
With Parents

In a meeting with school personnel today, information was shared regarding _____ and his/her emotional condition and behavior.

Since my child has expressed suicidal thoughts, the recommendation was made that psychiatric/mental health services be sought immediately. I have been provided with names and phone numbers of local agencies, private practitioners, and other who can provide assistance to my child and me.

School Personnel

Parent or Guardian

School Personnel

Parent or Guardian

Date

DOs and DON'Ts Related to Suicidal Threats

The publications of many organizations and governmental agencies contain advice for people who want to help suicidal youngsters. That advice is summarized below.

DOs

- LISTEN** to what the student is saying and take her/his suicidal threat seriously. Many times a student may be looking for just that assurance.
- OBSERVE** the student's nonverbal behavior. In children and adolescents, facial expressions, body language, and other concrete signs often are more telling than what the student says.
- ASK** whether the student is really thinking about suicide. If the answer is "yes," ask how she/he plans to do it and what steps have already been taken. This will convince the student of your attention and let you know how serious the threat is.
- GET HELP** by contacting an appropriate CRT member. Never attempt to handle a potential suicide by yourself.
- STAY** with the student Take the student to a CRT member and stay with the student for awhile. The student has placed trust in you, so you must help transfer that trust to the other person.

DON'Ts

- DON'T** leave the student alone for even a minute.
- DON'T** act shocked or be sworn to secrecy.
- DON'T** underestimate or brush aside a suicide threat ("You won't really do it; you're not the type"), or try to shock or challenge the student ("Go ahead. Do it."). The student may already feel rejected and unnoticed, and you should not add to that burden.
- DON'T** let the student convince you that the crisis is over. The most dangerous time is precisely when the person seems to be feeling better. Sometimes, after a suicide method has been selected, the student may appear happy and relaxed. You should, therefore, stay involved until you get help.
- DON'T** take too much upon yourself. Your responsibility to the student in a crisis is limited to listening, being supportive, and getting him/her to a trained professional. Under no circumstances should you attempt to counsel the student.

Myths and Facts About Suicide

MYTH: People who talk about suicide don't commit suicide.

FACT: Most people who commit suicide have given clues of some type to one or more people. It is not safe to assume that someone talking about suicide will not attempt it; the majority of those who attempt suicide have stated their intent to someone.

MYTH: Suicide happens without warning.

FACT: While explicit verbal warnings are not always given, there are clues ahead of time. The difficulty is that not everyone recognizes the signs and symptoms that would alert him/her to the possibility of suicide.

MYTH: Suicidal people are fully intent on dying.

FACT: Rather than specifically wanting to die, students who attempt/commit suicide often do so simply because they have exhausted their coping skills and see no other options for relief from pain.

MYTH: Once suicidal, a person is suicidal forever.

FACT: Preoccupation with suicidal thoughts is usually time-limited. Most young people who work through a suicidal crisis can go on to lead healthy lives.

MYTH: Once a person attempts suicide, the humiliation and pain will prevent future attempts.

FACT: Eighty percent of persons who commit suicide have made at least one prior attempt (Hafen & Frandsen, 1986). It is critical that concerned adults and peers monitor a student who has attempted suicide for several months following the attempt. Those students who receive help for their suicidal risk before they have made an attempt have a better prognosis than those who were intervened upon following an attempted suicide.

MYTH: Suicide occurs more often among the wealthy.

FACT: Suicide knows no socioeconomic boundaries.

MYTH: Suicidal behavior is inherited.

FACT: As with other patterns of behavior, suicide sometimes seems to run in families. However, suicide is not a genetic trait, so it is not inherited. What can appear to be a family trait of suicide may be because family members share a common emotional environment and often adopt similar methods of coping. In a family where someone has committed suicide, suicide may be viewed as acceptable in times of distress.

MYTH: People who attempt or commit suicide are mentally ill/psychotic.

FACT: Many suicidal persons historically have had difficulty in working through problems. Other people who attempt or commit suicide choose it as an option when their previously successful means of coping are not effective, and they are unable to otherwise stop the pain they are experiencing. A history of mental illness does increase the risk of suicide.

MYTH: Talking about suicide can encourage a person to attempt it.

FACT: On the contrary, initiating a discussion of suicidal feelings may give a suicidal adolescent permission to talk about the pain she/he is experiencing and, by so doing, provide significant relief. It is highly unlikely that discussing suicide would influence a nonsuicidal person to become preoccupied with the idea.

MYTH: People who attempt suicide just want attention.

FACT: Suicide should be considered a "cry for help." Persons overwhelmed by pain may be unable to let others know they need help, and suicide may seem the best way to relieve the pain. Suicidal behavior may be a desperate move to reach out for much needed help.

MYTH: Suicide is most likely to occur at night as well as over the holiday season.

FACT: Suicides can occur at any time, regardless of season, time of day or night, weather, or holidays. Childhood and adolescent suicides, however, are most likely to occur in the spring, and second most likely to occur in the fall. Most childhood and adolescent suicides occur at home on weekends or between the hours of 3 p.m. and midnight (Eyeman, 1987; Indiana State Board of Health, 1985).

MYTH: When depression lifts, there is no longer any danger of suicide.

FACT: This is a dangerous misconception. The lifting of depression often accompanies the development of a suicide plan and the final decision to commit suicide. If the improvement in mood is sudden and circumstances have not changed, the risk of suicide remains high.

Crises Requiring Limited School Involvement

In certain crisis situations, a schoolwide response would be excessive and unnecessarily impact students. In other instances, police involvement may limit the school's ability to respond to the incident.

When suicide risk is present, or when attempted suicide has occurred, a limited response by trained school staff and/or the CRT should be all that is necessary to contain potential panic and reduce further risks. While these situations do not, of themselves, constitute a schoolwide crisis, inappropriate responses to these events can lead to chaos. In the case of a homicide, an immediate school-based response may be limited due to law enforcement intervention. However, a general crisis response should follow due to the emotional trauma and stress such an event would cause.

Crises Occurring During Summer or School Breaks

If a school administrator or other CRT team member is notified of a crisis during the summer (or when affected students are on break), the response usually will be one of limited school involvement. In that case, the following steps should be taken:

1. Institute the phone tree to disseminate information to CRT team members and request a meeting of all available members.
2. Identify close friends/staff most likely to be affected by the crisis. Keep the list and recheck it when school reconvenes.
3. Notify staff or families of students identified in # 2 and recommend community resources for support.
4. Notify general faculty/staff by letter or telephone with appropriate information.
5. Schedule faculty meeting for an update the week before students return to school.
6. Be alert for repercussions among students and staff. When school reconvenes, recheck core group of friends and other at-risk students and staff, and institute appropriate support mechanisms and referral procedures.

Crises that occur during vacation require fewer responses from the school.

SUICIDE PREVENTION ASSESSMENT/RESPONSE (SPAR) FORM

Students' Name _____ DOB _____ Sex: M: _____ F: _____

School _____ Grade _____ Teacher _____

Parent's Names _____

Address _____

Phone:(Hm) _____ (Wk) _____

Person Completing (SPAR) _____ Date _____

Other Crisis Team Members:

This form can be used to plan, conduct, and record a suicide prevention assessment interview with a student. The crisis team member can use this form as a guide in making decisions regarding the information that should be gathered. This form is also designed to serve as an aid in monitoring any follow up of interventions initiated.

When incident occurred: _____

Who referred: _____

Content of referral
incident: _____

Any history of counseling/mental health care? NO _____ YES _____

In therapy now? If yes; Who/Where _____

Category of present self-destructive behavior (check any that apply):

_____ Serious attempt - doing something that she/he believes will
cause death, having the conscious intent to die.

_____ Mild attempt - behaving self-destructively in a way that the
student accurately perceives would not be a serious threat to life.

_____ Suicidal threat - saying or doing something that indicates a
self-destructive desire.

_____ Suicidal ideation - thinking about killing oneself.

DETERMINATION OF PRESENT LETHALITY/RISK

___ Low ___ Moderate ___ High

I. SUICIDE ASSESSMENT

YES Answers increase the probability of a suicide attempt or completion.

	NO	YES
1. Presently does the student demonstrate any signs of:		
a. Being high or intoxicated	___	___
b. Increased trouble concentrating	___	___
c. Confused thinking	___	___
d. Seeing, hearing, feeling what is not there (hallucinations)	___	___
e. Extreme misinterpretations of events and others' behavior	___	___
f. A dramatic change in behavior	___	___
g. Difficulty distinguishing fantasy from reality?	___	___
2. Is the student showing signs of depression:		
a. hopelessness, helplessness, sadness, or frequent fearfulness	___	___
b. many physical complaints	___	___
c. recent changes in sleeping patterns (too much/little, fitful, or early waking)	___	___
d. significant change in overall activity level (hyper or slowed down)	___	___
c. problems in concentration, memory, and/or judgment	___	___
f. significant changes in weight/appetite	___	___
g. social problems, including withdrawal or unusual hypersociability	___	___
h. decreased motivation, apathy	___	___
i. deterioration in personal habits/hygiene i.e. soiled clothing, unkept room	___	___

	NO	YES
j. lack of interest in previous activities that were once pleasurable?	___	___
3. If previously depressed, has the student shown a recent, unexplained mood elevation and/or energy increase?	___	___
4. Does the student show recent signs of significant:		
a. irritability, anger, or rebellion?	___	___
b. evidence of marked rage or masked depression (fire setting, vandalism?)	___	___
c. impulsive or accident-prone behavior?	___	___
5. Has there been a history of truancy or running away?	___	___
6. Has there been a recent loss of:		
a. loved person by death, separation/divorce, alienation (who, when)?	___	___
b. a warm adult parental figure?	___	___
c. peer relationships, breakup with boyfriend/girlfriend?	___	___
d. school/sports success, decreased school performance?	___	___
7. Has there been significant family changes or dysfunction? (unemployment, frequent moves, frequent fights, physical, sexual, emotional abuse)	___	___
8. Is the student experiencing internal or external pressure to achieve?	___	___
9. Has there been significant medical problems concerning student/other family members:	___	___
a. alcohol/drug misuse. Who? (pattern and quantity)	___	___
b. chronic or debilitating illness (mental/physical) which has involved considerable change in self-image/self-concept. Who? Describe	___	___
c. a significant change in general physical health including pregnancy. Who? Describe,	___	___

	NO	YES
10. Has the student or family member been threatened with prosecution, criminal involvement, or exposure?	___	___
11. Is there a lack of an effective support system for the student, i.e. friends, family, community?	___	___
12. Are there signs of interest in or pre-occupation with death? (written notes, poems art work even as a joke)	___	___
13. Is there a lack of interest in the future, avoidance of/or refusal to discuss reasons for living, avoidance of realistic future planning?	___	___
14. Has the student completed any "final acts"? (giving away valued possessions, donating body to science, writing wills or suicide notes)	___	___
15. Has the student expressed rescue needs or fantasies, including "hints" that help is needed, such as <i>"I'm a burden to others"</i> or <i>"No one will miss me if I'm gone"</i> ?	___	___
16. Does the student view death in a romanticized manner or as reversible thus denying the finality of death?	___	___
17. Has a family member or close friend ever threatened or completed suicide? Who? Describe.	___	___
18. Has the student considered suicide in the past, or made previous threats? If yes, describe.	___	___
19. Has the student made previous suicide attempts? If yes, describe.	___	___
20. What feelings are presently being expressed by student? Check all that apply.		
___ Hopelessness/Helplessness		___ Anxiety
___ Need to be punished		___ Anger
___ Lack of alternatives		___ Sadness/Depression
___ Lack of support from significant others		
21. Has student made a suicide plan?	___	___
Record below.		
a. Are the means necessary to carry out the plan easily available? (pills, weapons, etc.)	___	___
b. Is death a likely result? (lethality of the plan)	___	___
c. If the plan is carried out, is the probability of rescue low? _____		
d. Who does the student think would be most affected by his/her death?		

RECORD THE STUDENTS SUICIDE PLAN IN AS MUCH DETAIL AS POSSIBLE.

RESOURCES:
(as seen by student)

Other possible resources:

II. CRISIS INTERVENTION PLAN

YES Answers increase the possibility of avoiding a suicide attempt or completion.

	NO	YES
1. Have you responded to the student in an open, non-judgmental manner, giving him/her the opportunity to discuss all suicidal feelings, thoughts and plans?	___	___
2. Is the student willing to delay carrying out the suicide plan?	___	___
3. Is the student willing to verbalize the reason she/he wants to commit suicide and then problem-solve about other ways to accomplish this goal?	___	___
4. Is the student willing to discuss positives aspects of him/her self or positive plans for the future?	___	___

- | | NO | YES |
|---|-----|-----|
| 5. Does the student understand and accept the fact that you cannot keep information about suicide confidential? | ___ | ___ |
| 6. Is the student willing to accept your contacting his/her parents for help? | ___ | ___ |
| 7. Is the student willing to accept other kinds of help if needed (e.g. Crisis Hotline numbers, counseling, hospitalization)? | ___ | ___ |
| 8. Has the student committed to the "STAY ALIVE CONTRACT"? | ___ | ___ |
| 9. When you contacted the parents, were they understanding and concerned about the problem? | ___ | ___ |
| 10. Did the parents sign the "EMERGENCY CONFERENCE" form? | ___ | ___ |
| 11. Have the parents agreed to implement an intervention plan for this student? | ___ | ___ |
| 12. Have all this student's teachers been contacted, informed of suicide danger signs, and is each willing to monitor the student's behavior in the future? | ___ | ___ |

III. INTERVENTION PLAN

Action	Person Responsible	Date
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Immediate Actions Taken	When	By Whom
_____ School district administrator notified	_____	_____
_____ Parents notified	_____	_____
_____ Police notified	_____	_____
_____ Mental Health Services notified	_____	_____
_____ Others (specify)	_____	_____

IV. Long Range Planning

YES ANSWERS INCREASE THE POSSIBILITY OF AVOIDING A SUICIDE ATTEMPT OR COMPLETION.

	NO	YES
1. Are you continuing to participate in and monitor the student's intervention plan? If not, to whom has this responsibility been transferred? _____	___	___
2. Is this student continuing to participate in the intervention plan?	___	___
3. Are the parents continuing to participate in the intervention plan?	___	___
4. Are the student's teachers continuing to monitor his/ her behavior?	___	___
5. Does your intervention plan include provisions for extra monitoring at times of stress such as losses, suicides by other students, anniversaries of suicide attempts, etc.?	___	___
6. Are these provisions being carried out? If not, Why?	___	___
7. Does the intervention plan need to be changed? How?	___	___

STAY ALIVE CONTRACT

I, _____(Student)

COMMIT THAT I WILL NOT TAKE ANY ACTIONS TO END MY LIFE BEFORE I TALK
WITH YOU _____(School Personnel)
AGAIN.

IF I FEEL SUICIDAL OR HAVE SUICIDAL THOUGHTS BEFORE I SEE YOU
ON, _____, I WILL CONTACT YOU AS SOON AS
POSSIBLE AT _____ OR _____. IF YOU
ARE NOT AVAILABLE, I WILL ALSO CALL _____
AND/OR _____ FOR ASSISTANCE.

School Personnel

Student Name

Date

Sample Statement for Initial Announcement of Crisis Event

TO:

FROM:

"We have just been advised of a tragedy involving a member(s) of our school. I am sad to announce that _____ has died/has been in a serious accident. As soon as we have more information, we will pass it on to you. People will be available in the building to help those of you who need extra support in dealing with this situation. Your teachers will advise you of the location and times available for this support.

"As soon as we know the family's/families' wishes regarding _____, we will share that information with you. We ask that all students remain in their classrooms and adhere to their regular schedules."

*THE POSTVENTION PROCESS *

Student Response	Staff Response
1) <u>SHOCK</u> Students may initially appear remarkably unreactive. In fact, they are in a state of shock and not yet able to accept the reality of the suicide.	1. Staff should assume a stance of anticipatory waiting, acknowledging the shock and showing a willingness to talk about suicide when the students are ready. It is best to wait 24 to 48 hours before initiating direct action.
2) <u>ANGER AND PROJECTION</u> Students will look for someone to blame initially, this may be directed at important adults in the victim's life, including school staff. "Why did they let it happen?"	2. Some expressions of anger must be allowed. Staff members may share the same or similar feelings they have had. However, at the same time reality must be introduced. There are limits on how much one can be responsible for actions of another.
3) <u>GUILT</u> Typically, students who knew the victim may move from blaming others to blaming themselves. "if only I had talked to him more."	3. Here, particularly, staff members can be helpful by sharing their own similar reactions. Again, the reality principle is also introduced.
4) <u>ANGER AT VICTIM</u> This is a common reaction by students, even those not closely connected to the victim. "How could he do this to us?".	4. Staff needs to give permission for such expressions by normalizing them, perhaps tempered by questioning if the victim fully realizes the impact of his act.
5) <u>ANXIETY</u> Students will begin worrying about themselves. "If he could kill himself because he was upset, maybe I (or my friends) could, too."	5. Discussion should be guided towards helping students differentiate between themselves and the victim and towards constructive options for problem solving.
6) <u>RELIEF</u> Once the normal distortions of feelings are resolved, students can allow themselves to feel the sadness or the loss and begin the healing, process.	6. Staff must guard against hurrying a pseudo-mourning process before students have worked at resolving their conflicts over suicide.

* Developed by: Lamb, Fredrick and Maxim-Dunne, Karen "Postvention in Schools: Policy and Process" Chapter in Dunne, Edward, McIntosh, John and Maxim-Dunne, Karen. Eds. (1987) "Suicide and it's Aftermath: Understanding and Counseling the Survivors". W.W. Norton & Co. New York.

Classroom Discussion Guidelines

The following list provides guidelines for classroom discussions related to a school crisis. Teachers may want to use the open-ended questions provided at the bottom of the page to help them structure discussion following the announcement of a crisis situation.

1. Review the facts and dispel rumors.
2. If a suicide occurs, discuss myths and facts about suicide (pp.61 - 62).
3. Inform students of locations for grief support.
4. Encourage students to express their reactions in a way that is appropriate for them, and affirm the appropriateness of all responses from severe upset to no visible reaction whatsoever.
5. Discuss possible guilt feelings or feelings of responsibility.
6. Discuss students' possible fears for their safety and that of their peers and siblings.
7. Ask students to support one another and to escort any friend who needs additional help to one of the designated locations for grief support.
8. Reassure students that any adult in the building is available to help.
9. Allow students to discuss other losses they have experienced. Help them understand this loss often brings up past losses; this is a normal occurrence.
10. Encourage students to discuss their feelings with their parents/families.

Suggested Questions

1. What was it like for you when you heard the news?
2. Did/will you discuss it at home? How did it go?/How do you think it will go?
3. If you were a member of' _____s family, what do you think you would want at a time like this?
4. How can you students help each other through this?
5. What other losses have you experienced?
6. What thoughts and feelings does this bring up for you?

Guidelines for Responding to a Student's Death

1. React to the student's death. Share your reactions with the class.
2. Let the students talk and write about their feelings.
3. Listen to what students have to say. It is important not to shut off discussion.
4. If the student died of an illness and it is appropriate to do so, discuss the illness. This is especially useful for younger children who may need to separate the illness of the child who died from any medical problems his or her classmates experience.
5. Never tell young children, "God took Sally away because He loves her," because children will wonder if it's a good idea to be loved by God. Likewise, don't say, "Sally went to sleep." You may create a class of children afraid to go to sleep.
6. A "regular" day may be too hard for grieving students. Offer choices of activities, such as letters, journals, and discussions.
7. If the students want to, let them write sympathy notes to the parents or to a student who has suffered a loss. Provide an address or offer to deliver them.
8. If acceptable to the affected family, make sure that funeral times are well publicized, perhaps including ideas on funeral etiquette.
9. If applicable, share any cultural information related to the meaning of death and death observances that will help students understand and respond comfortably to affected family members.
10. Talk with students about their concerns regarding "what to say" to other bereaved students and the family of the deceased. Emphasize that trying to avoid grieving individuals or being overly solicitous to them will not help. Students should be themselves and share their caring feelings and support. Point out the need to resume normal relationships.
11. Remember that your class may remain quiet and depressed for some time after the death (*perhaps even a month*), and that some students may begin to act out noisily and physically as a method of dealing with their feelings.

Adapted with permission from the Los Angeles Unified School District

After the Disaster

Having just experienced the shock and pain of the disaster, you will be busy for the next few days or weeks. Caring for your immediate needs, perhaps finding a new place to stay, planning for cleanup and repairs, and filing claim forms may occupy the majority of your time. As the immediate shock wears off, you will start to rebuild and put your life back together. We may all experience some normal reactions as a result of the disaster. Generally, these feelings don't last long, but it is common to feel let down and resentful many months after the event. Some feelings or responses may not appear until weeks or months after the disaster. Common responses are:

Irritability/anger
Fatigue
Loss of appetite
Inability to sleep
Nightmares

Sadness
Headaches or nausea
Hyperactivity
Lack of concentration
Increased alcohol or other drug consumption

Many victims of disaster will have at least one of these responses. Acknowledging your feelings and stress is the first step in feeling better. Other helpful things to do include:

Talk about your disaster experiences. Sharing your feelings will help you feel better about what happened.

Take time off from cares, worries, and home repairs. Take time for recreation, relaxation, or a favorite hobby. Getting away from home for a day or spending a few hours with close friends can help.

Pay attention to your health, to a good diet, and adequate sleep. Relaxation exercises may help if you have difficulty sleeping.

Prepare for possible emergencies to help lessen feelings of helplessness and bring peace of mind.

Rebuild personal relationships in addition to repairing other aspects of your life. Couples should make time to be alone together, both to talk and to have fun.

If stress, anxiety, depression, or physical problems continue, you may wish to contact the postdisaster services provided by the local mental health center.

Please take this sheet with you today and reread it over the next few weeks and months. Being aware of your feelings and sharing them with others is an important part of recovery and feeling normal again soon.

Reprinted with permission from the California Department of Mental Health

Emotional First Aid in Times of Disaster

As an outgrowth of almost any disaster, individuals who experienced a crisis are likely to present a variety of psychological reactions. Once the major crisis has subsided and the immediate physical safety needs have been met, the psychological needs of these persons must be addressed.

It is the school staff and CRT who may be left alone to handle a disastrous situation for the first 72 hours before additional help arrives. Due to the nature of disastrous situations, disaster workers have noted that individuals who live in areas frequently hit by earthquakes, tornadoes or floods, and who have made preparations for impending danger suffer the same initial reactions as others. However, they adjust better in a problem-solving way to the recovery needs.

The following descriptions of children's basic needs, as well as suggestions for meeting them, will help school personnel deal with children's reactions to a natural disaster.

Children and adults need facts.

Explain the disaster: what it is, and how and when it happens. Prepare students for aftershocks or other after effects. Remind students that only certain areas may have been affected.

Children and adults need opportunities to share feelings and experiences.

Children and adults need opportunities to talk and share their feelings and experiences; talking helps diminish anxieties. Adults need to admit to their own feelings so children will have "permission" to share theirs. Drawing what the earthquake or other event looks like and describing the pictures may help get at unexpressed feelings.

Children need to be together with adults and family members.

Children are not as fearful of their own safety as they are of being separated from their parents and not knowing if they are safe or if they will see them again. Let students know that parents will get to them as soon as possible. In the meantime, assure students they will be cared for. Implement a buddy system with classmates. DO NOT LEAVE CHILDREN ALONE.

Children need to be engaged in activities.

Activities are important to help gain some control over the situation. For example, encourage students to straighten up the room, arrange tables, etc., for greater safety during aftershocks. Use classroom materials and recreational games to structure time.

Adapted with permission from the Los Angeles Unified School District Psychological Services

HANDOUTS FOR FAMILIES

Supporting Families in Times of Crisis

Families, like schools, often are unprepared to deal effectively with a crisis. Supportive informational exchanges between a school and its families can lessen the disruptive effect of a crisis on students. It is important to remember, too, that parents and other adults are not inured to the effects of a catastrophe. Schools can provide support to the parents in their own coping processes, and parents in turn can better support their children.

The following handouts will help adult family members respond more sensitively to children experiencing the emotional effects of a crisis and will provide some reminders on self-care for the adult recipients. Your local emergency response organizations will have additional handouts or brochures full of hints for coping with traumatic deaths and other disasters. The References also includes other resources you may wish to obtain.

Family Grief

Parents would like to protect their children from the hard facts of life, but they cannot. When a family death occurs, the children are affected and may react in different ways depending upon their age and experience. Adults should remember the following points:

1. Children need to be allowed to respond to the death of a family member in their own way. Each family member's relationship with the deceased is unique, and their response to the loss may vary from one person to another. Children must be allowed to respond in a way that is right for them even if they act as though nothing is wrong following a death.
2. It is important not to exclude the children when grieving. Parents need to talk about their sadness with their children. Often children will blame themselves for their parents' sadness if the subject is not discussed openly. Very young children especially will view adults' anger, frustration, or sadness as being something for which they are responsible.
3. Young children do not perceive that death is permanent. Children may see death as a bogey-man or as an invader who is coming to get them. Children over age 12 can understand death as adults do. The issue of death may become religious or philosophical, and they may question the justice of God who allowed the death to happen. It is not uncommon for adolescents and teens to have difficulty expressing their emotions regarding death and loss.
4. Grief can be a critical problem for children. If a parent sees major changes in a child--such as a change in sleeping and eating habits, a drop in grades, or talk of suicide--within 18 months after a significant death, the family should seek professional counseling.

Adapted with permission from Los Angeles Unified School District

Helping Your Child After a Disaster

Children may be especially upset and express feelings about the disaster. These reactions are normal and usually will not last long.

Listed below are some problems you may see in your children:

1. Excessive fear of darkness, separation, or being alone;
2. Clinging to parents, fear of strangers;
3. Worry;
4. Increase in immature behaviors;
5. Not wanting to go to school;
6. Changes in eating/sleeping behaviors;
7. Increase in either aggressive behavior or shyness;
8. Bedwetting or thumbsucking;
9. Persistent nightmares; and/or
10. Headaches or other physical complaints.

The following will help your child:

1. Talk with your child about his/her feelings about the disaster. Share your feelings, too.
2. Talk about what happened. Give your child information he/she can understand.
3. Reassure your child that you are safe and together. You may need to repeat this reassurance often.
4. Hold and touch your child often.
5. Spend extra time with your child at bedtime.
6. Allow your child to mourn or grieve over a lost toy, a lost blanket, a lost home.
7. If you feel your child is having problems at school, talk to his/her teacher so you can work together to help your child.

Please reread this sheet from time to time in the coming months. Usually a child's emotional response to a disaster will not last long, but some problems may be present or recur for many months afterward. Your community mental health center is staffed by counselors skilled in talking with people experiencing disaster-related problems.

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How Parents Can Help

Much of the recovery work involving a crisis can best be facilitated by parents.

The school may meet with parents in small groups and provide information as to what to look for and how they can help their children.

Some parents may need individual help before they are ready to help their children.

The school may provide opportunities for parents to discuss, in groups, their own responses and worries.

Crisis and Children

When people experience a crisis, family routines often are disrupted, and parents often face additional tasks and demands on their time. A crisis can effect the members of a family or of an entire community. Often it is hard for young children to understand what has happened during times of crisis. Some children may have completely confused views of the situation and may need your continued guidance and understanding through the experience. How you help your own children work through their difficult times may have a lasting effect.

Children can experience the same intense feelings that adults feel about a crisis. This is a normal reaction. Some children may show their feelings in a direct and immediate fashion, while others will wait until a later time. Most children will be confused by any sudden interruptions to their routines. Crisis situations are difficult for both children and adults.

Each child in a family may react differently to crises.

Following a crisis, some children may:

1. Become more active and restless;
2. Worry where they will live, and what will happen to them if homes have been damaged;
3. Become upset easily--crying and whining;
4. Become withdrawn or depressed; and/or
5. Feel afraid at night or when alone.

Adapted with permission from the Los Angeles Unified School District

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Inability to sleep
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Sadness
Headaches or nausea
Hyperactivity
Lack of concentration
Increased alcohol or other drug consumption

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Take time off from cares, worries, and home repairs. Take time for recreation, relaxation, or a favorite hobby. Getting away from home for a day or spending a few hours with close friends can help.

Pay attention to your health, to a good diet, and adequate sleep. Relaxation exercises may help if you have difficulty sleeping.

Prepare for possible emergencies to help lessen feelings of helplessness and bring peace of mind.

Rebuild personal relationships in addition to repairing other aspects of your life. Couples should make time to be alone together, both to talk and to have fun.

If stress, anxiety, depression, or physical problems continue, you may wish to contact the postdisaster services provided by the local mental health center.

Please take this sheet with you today and reread it over the next few weeks and months. Being aware of your feelings and sharing them with others is an important part of recovery and feeling normal again soon.

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APPENDIX

Crisis Response Team Assignments and Phone Tree

Master Schedule for current year

Fire Drill Procedures

Severe Weather Procedures

Form A - Sample Statement for Initial Announcement of Crisis Event

Form B - Students Receiving Counseling Support Log

Form C - Open-Ended Questions for Classroom Discussion

Form D - CRT Community Support Services Record Sheet

Crisis Management Planning Checklist

General Crisis Intervention Checklist

Checklist For Long-Term Follow-up

Emergency Parent Conference Form

Emergency Crisis Team Leader Information Sheet

Emergency Crisis Response Checklist

Natural Disaster Checklist

Off-Track/Summer Crisis Intervention Checklist

Suicide Attempt Checklist

Suicidal Risk Checklist

Suicide Prevention Assessment/Response (SPAR) Form

Stay Alive Contract

Suicide Emergency Parent Conference Form

Homicide Checklist

References for families, teachers and staff

Chemistry Lab Chemical Inventory

Electrical, Gas, and Water shut-off locations

Trauma Kit inventory

CRISIS RESPONSE TEAM

Conway High School West -2001-2002

Preventing Chaos In Times Of Crisis!

CRISIS

A sudden, generally unanticipated event that profoundly and negatively affects a significant segment of the school population and often involves serious injury or death.

Types of Crisis Situations

- Natural disaster
- Fire
- Student or staff injury or death
- Suicide
- Drive-by shooting
- Homicide
- Hostage or terrorist situation
- Vehicle accident
- Falling aircraft

Responding to Crisis - Intervening during a crisis to ensure safety and welfare

- Lockdown
 - » Special code - "*Teachers the faculty social for tonight has been canceled!*"
- Evacuation
 - » Fire drill plan

Responding in the aftermath of tragedy to provide care and security

- Debriefing
- Grief counseling
- Short-term and/or long-term mental health counseling for P.T.S.D

CRISIS RESPONSE TEAM

- Building Administrators
- Secretaries
- Counselors
- Nurse
- Teachers
- Custodian
- Community Resources
 - Counselors
 - Clergy

CRT Objectives:

1. To provide for the safety, welfare, security and care of the students and staff.
2. To provide order out of chaos.
3. To be prepared and professional.
4. To minimize liability by having a plan and following it.

Considerations in Preparing the Crisis Plan

- Communications
- Traffic control
- Fire, Police and/or Medical liaison
- Medical care of injured
- Evacuation or containment
- Damage control and assessment
- Follow-up

Crisis Plan

- ◇ Assess life/safety issues immediately
- ◇ Provide immediate emergency medical care
- ◇ Call 911 or notify police, and/or fire department if needed
- ◇ Call Superintendent's office
- ◇ Call for CR Team with a coded message announcement
- ◇ Assess the situation and follow the plan
- ◇ Call parent/guardian of student(s) involved
- ◇ Prepare written statement for the press
- ◇ Prepare written announcement to be made to students
- ◇ Make arrangements for follow-up counseling
- ◇ Convene end of day faculty meeting
- ◇ Keep a log of who, what, when, and where

CRT Members Responsibilities

1. Quickly and effectively respond to crisis situations
2. Provide structure during times of extreme stress

CRT Leader - Principal, Johnny Tyler

- ◇ Assess situation as to what happened, who is involved, and what is to be done
- ◇ Inform the Superintendent's office
- ◇ Make announcement and inform teachers to evacuate or lockdown
- ◇ Announce for the CR Team to report and designate a CR Team headquarters
- ◇ Media spokesperson
- ◇ Develop fact sheet for press release
- ◇ Identify suitable facilities or area for media representatives
- ◇ Supply a written statement of information to be given over the phone
- ◇ Supply teachers with a written statement to inform students
- ◇ Schedule emergency faculty meeting for information and follow-up plan

CRT Member - Assist. Principal,(Backup leader) Mickey Siler, Sro Eric King

- ◇ Police, Fire and Rescue liaison
- ◇ Assist with the evacuation or lockdown of facility
- ◇ Report names and status of all involved to Mr. Tyler
- ◇ Assist with parents arriving on campus
- ◇ Accompany injured to hospital if parents are not on the scene
- ◇ Continue to up-date Mr. Tyler on status of all involved
- ◇ Schedule a debriefing of CR Team at conclusion of event
- ◇ Coordinate follow-up crisis center with counselors

CRT Member - Dean of Girls Connie Westbrook

- ◇ Contact parents of students involved
- ◇ Provide medical personnel with medical information forms of all injured students
- ◇ Contact school psychologists and appropriate support staff
- ◇ Assign available faculty members to assist substitute teachers if necessary
- ◇ Provide information and assist office staff with the time and event log
- ◇ Assist where needed

CRT Member - Dean of Boys Ed Franklin, SRO Eric King

- ◇ Assist with evacuation or lockdown
- ◇ Supervise security of campus
- ◇ Keep driveways open for emergency vehicles
- ◇ Restrict entrance to authorized personnel only
- ◇ Provide ID badge for authorized personnel not in uniform
- ◇ Direct emergency personnel to area needed
- ◇ Refer all press and media representatives to designated areas
- ◇ Make a list of names of all students who leave

CRT Member - Career Center Supervisor, Nick Stroman

- ◇ Assist with evacuation or lockdown
- ◇ Assist nurses with injured if needed
- ◇ Assist with security of campus
- ◇ Keep driveway open for emergency vehicles
- ◇ Restrict entrance to authorized personnel
- ◇ Direct emergency personnel to area needed
- ◇ Refer all press and media representatives to designated area
- ◇ Make a list of names of any students who leave

CRT Members - Counselors, Theresa Allred, Kathie Houston, Linda Hamontree

- ◇ Compile information about student(s) involved
- ◇ Make a list of siblings and/or closest friends on campus
- ◇ Call for additional community resources if needed
- ◇ Notify school psychologist
- ◇ If SpEd student is involved, contact program supervisor
- ◇ Set-up Crisis Center for students who need counseling
- ◇ Provide sign-in logs for a record of students seen by a counselor
- ◇ Inform administrators of any student(s) severely emotionally distressed
- ◇ Make arrangements to keep crisis center open the following day if needed
- ◇ Inform teachers to refer students to the crisis center
- ◇ Make crisis counseling available for staff members

CRT Member - Nurses, Cheryl Bramlett, Melissa Castleberry, Connie Friant

- ◇ Provide emergency medical care to injured until Paramedics arrive
- ◇ Assist paramedics as needed
- ◇ Report medical conditions of injured to administrators
- ◇ Accompany injured to hospital if needed
- ◇ Assist with the physical side effects of emotional trauma
- ◇ Supervise safe clean up of trauma scene

CRT Members - Secretaries, Katie Gardner, Bettye Shaptner, Willie Jones

- ◇ Keep log of events, contacts, and actions
- ◇ Assemble all student information records for easy access
- ◇ Answer phone and give only information from prepared statement
- ◇ Assist making phone contact of community resources
- ◇ Take student health information forms out if evacuated
- ◇ Inform administrators of any changes in the situation or event
- ◇ Monitor the intercom for calls from individual rooms
- ◇ Relay administrator's messages to individual rooms or all-call
- ◇ Keep accurate list of any students who leave

CRT Members - Teachers, Doyle Jackson, Richard Isaacs, Gary White

- ◇ Assist with campus security
- ◇ Restrict entrance to authorized personnel only
- ◇ Keep driveways open for emergency vehicles
- ◇ Refer all press and media representatives to designated area
- ◇ Make a list of names of any students who leave campus
- ◇ Assist with other duties as assigned

CRT Member - Custodian, Columbus Tuggle

- ◇ Assist with evacuation or lockdown
- ◇ Natural Disaster -check buildings and ground for damages, gas leaks or down electrical lines
- ◇ Notify administrators of damages
- ◇ Turn off gas main if leaks are suspected
- ◇ Turn off water main if major leaks are found

Custodian, Columbus Tuggle (Cont.)

- ◇ Secure broken window and/or door glass
- ◇ Clear driveways for emergency vehicles
- ◇ If evacuated, due to damage, secure building until cleared by maintenance
- ◇ Clean-up any trauma scene as instructed and supervised by the nurse
- ◇ Keep Administrators informed of any changes in the safety or condition of the buildings and grounds

Non CRT Member - Teacher/Staff Responsibilities

- ◇ Stay calm
- ◇ Keep students calm and under control
- ◇ Give clear simple instructions
- ◇ Do not send a student to find out what is going on
- ◇ Do not allow a student to leave for any reason unless instructed to
- ◇ Safely evacuate or lockdown according to announcement or alarm
- ◇ If evacuated, take class roster and account for every student
- ◇ Keep students together in designated area
- ◇ Do not guess, or allow rumors to get started
- ◇ Tell students you will tell them as soon as you know
- ◇ Wait for instructions or prepared announcement before telling anything

What to offer kids in a crisis

1. Safety and security
2. Opportunity to vent (fears and frustrations)
3. Opportunity to validate (why did it happen)
4. Time and attention
5. Debriefing
6. Closure