



Excerpt From

*From the Center's Clearinghouse ...**

A Resource Aid:

Responding to Crisis at a School

This document is a hard copy version of a resource that can be downloaded at no cost from the Center's website (<http://smhp.psych.ucla.edu>).

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Some Key Considerations in Establishing a System for School-Based Crisis Response

The following nine points provide answers to some basic concerns that arise during discussions of school-based crisis response.

(1) Scope of events

All schools require a clear set of emergency procedures for dealing with major, school-wide crises (e.g., earthquake, fire, snipers) when they occur and in the immediate aftermath.

Decisions have to be made about whether the scope of crisis response will include specified procedures for any of the following:

- crises that affect smaller segments of the student body
- crises experienced by individual students (e.g., drug overdose, suicide attempt)
- community events that produce strong reactions among students at school (e.g., earthquakes that occur during nonschool hours, a neighborhood shooting of a gang member who is student)
- planning responses (e.g., psychological support) for helping (treating/referring) traumatized students (staff?) in the days and weeks following an event
- preventive procedures

(2) Crisis criteria

When should an event be seen as requiring a crisis response?

With the exception of most major, school wide crises, crises tend to be in the eye of the beholder. Thus, some school personnel are quite liberal and others are quite conservative in labeling events as crises.

After deciding on the scope of events to be treated as crisis, the dilemma of the planners and ultimately of the decision makers is that of establishing a set of checks and balances to ensure potential crises are not ignored *and* that there is not an overreaction to events that should not be treated as crises. Given the inevitability of differences regarding how an event is perceived, efforts to formulate crisis criteria probably should focus on delineating an expedient *process* for deciding rather than the more difficult task of detailing what is and isn't a crisis.

For example, one school developed a process whereby each member of its crisis team was encouraged to take the initiative of contacting another team member whenever s/he felt an event might warrant a crisis response. If the contacted team member agreed that the event should be seen as a crisis, the rest of the crisis team were contacted immediately for a quick meeting and vote. If the majority concurred, the event was defined as a crisis and appropriate crisis responses were implemented.

(3) Who needs aftermath help?

Again, there will be inevitable differences in perception. It is clear, however, that plans must be in place to provide help and/or referral whenever staff, parents, or students themselves indicate that a student is experiencing significant emotional reactions to a crisis. Usually, all that is needed is a procedure for alerting everyone to the possibility of emotional reactions and who on the staff will be providing support and counseling and/or referrals.

Planners also may want to consider what types of general responses may be appropriate with regard to specific types of events. Should there be a "debriefing" meeting for the entire school? for specific subgroups?

And decisions will have to be made about whether there will be support/counseling/referrals for emotional reactions of school staff.

(4) Types of responses

Planning focuses on delineating, establishing, and maintaining procedures and equipment and assigning responsibilities for (1) communication, (2) direction and coordination, and (3) health and safety during each of the four phases specified in the accompanying Figure. It encompasses every major detail related to who, what, where, when, and how.

Other handouts in this section provide examples of the types of activities to be considered in such planning.

A special need arises with respect to handling the media. It has become increasingly evident that each school should identify and train a specific person to act as a spokesperson in order to minimize the ways media reports can exacerbate difficult situations.

(5) Providing for Language and Cultural Differences

The influx of immigrants has increased the necessity of identifying individuals who speak the language and are aware of relevant cultural considerations that may arise during a crisis response. If one is fortunate enough to have such individuals on the school staff (in professional or nonprofessional positions), then planning involves delineating their roles during the crisis, clarifying how they can be freed from other responsibilities, and how they can be trained to carry out their special roles. If such persons are not readily available, then planning also must address how to recruit such help. Possible sources include mature students, parents, staff from nearby community agencies, other community volunteers.

For **Scope of Crisis Events and Intervention Phases** see Figure 1, page 8.

(6) *Which School Staff Respond to Crises*

Obviously, there are some staff who because of their role are critical to the success of crisis response (e.g., school nurses, psychologists, specific administrators, office staff, plant manager). In addition, there are others who have relevant interests and special abilities (e.g., first aid and counseling skills). To provide a comprehensive and coordinated response, plans should focus on ways to establish, train, and maintain a Crisis Intervention Team consisting of a combination of both types of staff (i.e., role-relevant and interested individuals). In all likelihood, there will be considerable overlap between the Crisis Planning Committee and the Crisis Intervention Team. Plans also must be made to identify, train, and maintain a number of individuals who will play supplementary roles when there are major disasters such as fires, earthquakes, and large-scale violence on campus (e.g., all school personnel, designated students, parent liaisons).

(7) *Other District and Community Resources*

Some crises require mobilization of off-campus resources. Planning involves identifying available resources and clarifying steps by which they will be mobilized when needed.

(8) *Crisis Debriefing*

At an appropriate time after a crisis response, an analysis of the quality of the response should be made to identify the need for improved procedures and additional training. For this to occur, a planning committee must designate who will organize the debriefing and who will be responsible for following through with developing improved procedures and organizing training sessions.

(9) *Inservice Training*

In addition to training needs that emerge from debriefing analyses, plans should be made for ongoing staff development based on requests from staff involved in crisis planning and intervention.

Major Facets of Crises Response

During the emergency

- communication (e.g., sounding the alarm if necessary; clarifying additional steps and providing information about the event, location of first aid stations if needed, etc.; rumor control; dealing with the media; keeping track of students and staff; responding to parents; interfacing with rest of the district and community)
- direction and coordination (e.g., running an emergency operations center; monitoring problems; problem solving)
- health and safety (e.g., mitigating hazards to protect students and staff; providing them with medical and psychological first aid; providing for search and rescue, security, evacuation)

Immediate aftermath

- communication (e.g., clarifying causes and impact and debunking rumors; providing information about available resources for medical and psychological help)
- direction and coordination (e.g., determining need to maintain emergency operations center; continuing to monitor problems and problem solve)
- health and safety (e.g., continuing with activities initiated during the event)

Days/weeks following

- communication (e.g., providing closure to students, staff, parents, district, community)
- direction and coordination (e.g., continuing to monitor problems and problem solve)
- health and safety (e.g., providing for those in need of longer-term treatment either through provision of direct services or referral; case management)

Prevention

- communication (e.g., holding debriefing meetings to clarify deficiencies in response to the crisis)
- direction and coordination (e.g., using debriefing analyses to plan ways to prevent, if feasible, similar events from occurring, to minimize the impact of unavoidable events, to improve crisis response procedures, to enhance resources)
- health and safety (e.g., providing education for students, staff, parents)

Responding to Crises: A Few General Principles

Immediate Response -- Focused on Restoring Equilibrium

In responding:

- Be calm, direct, informative, authoritative, nurturing, and problem-solving oriented.
- Counter denial, by encouraging students to deal with facts of the event; give accurate information and explanations of what happened and what to expect -- never give unrealistic or false assurances.
- Talk with students about their emotional reactions and encourage them to deal with such reactions as another facet of countering denial and other defenses that interfere with restoring equilibrium.
- Convey a sense hope and positive expectation -- that while crises change things, there are ways to deal with the impact.

Move the Student from Victim to Actor

- Plan with the student promising, realistic, and appropriate actions they will pursue when they leave you.
- Build on coping strategies the student has displayed.
- If feasible, involve the student in assisting with efforts to restore equilibrium.

Connect the Student with Immediate Social Support

- Peer buddies, other staff, family -- to provide immediate support, guidance, and other forms of immediate assistance.

Take Care of the Caretakers

- Be certain that support systems are in place for staff in general
- Be certain that support (debriefing) systems are in place for all crisis response personnel.

Provide for Aftermath Interventions

- Be certain that individuals needing follow-up assistance receive it.

Crisis Response Checklist

In the midst of a crisis, it is hard to remember all the specific steps and preparatory plans that have been discussed. Each site and each person responsible for crisis response needs to have a checklist that provides a ready and visible reference guide for use during a crisis. Such a checklist is also an important training tool. The following is an outline of what such a checklist might cover.

I. Immediate Response

Check to be certain that

___ appropriate "alarms" have been sounded

___ all persons with a crisis role are mobilized and informed as to who is coordinating the response and where the coordination/emergency operation center and medical and psychological first aid centers are located

This may include coordinators for

___ overall crisis response

___ first aid (medical, psychological)

___ media

___ communications

___ crowd management

___ transportation

___ phone trees are activated

___ team leader and others clarify whether additional resources should be called in (from the District or community -- such as additional medical and psychological assistance, police, fire)

___ all assignments are being carried out (including provisions for classroom coverage for crisis response team members and for any instances of a staff death)

___ corrective steps are being taken when the response is inadequate

___ all communication needs are addressed by implementing planned means for information sharing and rumor control (e.g. Public Address announcements, circulation of written statements, presentations to staff/students/ parents in classes or in special assemblies);

This includes communications with

___ staff

___ students

___ crisis team

___ media

___ home

___ district offices and other schools

___ community

___ fire, police

- _____ plans for locating individuals are implemented (e.g., message center, sign-in and sign-out lists for staff and students)
- _____ specific intervention and referral activity are implemented (e.g., triage, first-aid, search, rescue, security, evacuation, counseling, distribution of information about resources and referral processes -- including teentalk and suicide prevention lines and interviews to assess need for individual counseling)
- _____ support and time out breaks for crisis workers are implemented
- _____ informal debriefings of crisis workers are done to assess how things are going and what will be required in the way of follow-up activity.

II. Follow-up Activity

In the **aftermath**, check to be certain that

- _____ continuing communication needs are addressed (clarifying causes and impact; debunking rumors, updating facts, providing closure; updating information on available resources)
- _____ if relevant, family contacts are made to learn funeral and memorial service arrangements, and to determine if there is additional assistance the school can provide (School-related memorial services for gang members, suicides, etc. are controversial; clear policies should be established in discussing crisis response plans.)
- _____ crisis-related problems continue to be monitored and dealt with (including case management of referrals and extended treatment)
- _____ facets of crisis response that are no longer needed are brought to an appropriate conclusion
- _____ debriefing meetings are held (to appreciate all who helped, clarify deficiencies in crisis response, and make revisions for the next time)
- _____ crisis response plans are revised and resources enhanced for dealing with the next crisis
- _____ additional training is planned and implemented
- _____ appropriate prevention planning is incorporated (e.g., at least to minimize the impact of such events)

Example of one District's Crisis Checklist

I. ASSESSMENT

- A. Identify problem and determine degree of impact on school.
- B. Take steps to secure the safety and security of the site as needed.
(see Emergency Disasters Procedures Manual, Sept. 1994)
- C. Make incident report to district administrator.
- D. Determine if additional support is needed.
 - 1. Call school police and/or city police
 - 2. Call Cluster Crisis Team
 - 3. Call other district crisis personnel
- E. Alter daily/weekly schedule as needed.

II. INTERVENTION: COMMUNICATION

- A. Set up a Command Center
- B. Establish Sign-In Procedures at ALL campus entry sites*
- C. Administrator/designee/crisis manager should:
 - 1. Review facts/determine what information should be shared
 - 2. Consider police investigation parameters
 - 3. Notify family with sensitivity and dispatch. (Consider a personal contact with family.)
- D. Develop and disseminate bilingual FACT SHEET (written bulletin)
 - 1. Faculty
 - 2. Students
 - 3. Parents/Community
- E. Begin media interactions.
 - 1. Identify a media spokesperson (Office of Communications may be utilized)
 - 2. Designate a location for media representatives.*
- F. Contact neighboring schools
- G. Contact schools of affected students siblings.
- H. Other communication activities
 - 1. Classroom presentations/discussions
 - 2. Parent/community meetings
 - 3. School staff meeting
- I. Provide for RUMOR CONTROL
 - 1. Keep a TV set or radio tuned to a news station
 - 2. Verify ALL facts heard
 - 3. Update Fact Sheet as needed
 - 4. Utilize student leaders:
 - a) As sources knowledgeable of rumors among students
 - b) As peer leaders to convey factual information
 - c) As runners (written bulletins should be sealed when necessary)

III. INTERVENTION: FIRST AID AND EMERGENCY RELEASE PLAN

- ___A. Initiate First Aid Team procedures
- ___B. Designate Emergency Health Office location*
- ___C. Initiate Emergency Release Plan procedures
- ___D. Designate student check-out location*

IV. INTERVENTION: PSYCHOLOGICAL FIRST AID/COUNSELING

- ___A. Logistics: Designate rooms/locations/areas**
 - ___1. Individual counseling -- Location: _____**
 - ___2. Group counseling -- Location: _____**
 - ___3. Parents -- Location: _____**
 - ___4. Staff (certificated and classified) -- Location: _____**
 - ___5. Sign-In for Support Services -- Location: _____
- ___B. Initiate the referral process, including procedures for self-referral.
 - ___1. Identify a crisis team member to staff all locations.**
 - ___2. Provide bilingual services as needed.
 - ___3. Distribute appropriate forms for student counseling referrals to staff.
 - ___4. Disseminate student referral information to teachers and other staff.
- ___C. Identify and contact high risk students.
- ___D. Identify and contact other affected students, staff, and personnel.
- ___E. Initiate appropriate interventions:
 - Individual counseling
 - Group counseling
 - Parent/community meetings
 - Staff meetings (ALL staff)
 - Classroom activities, presentations
 - Referrals to community agencies

IV. INTERVENTION: DISSEMINATE APPROPRIATE HANDOUTS TO STAFF/PARENTS

V. INTERVENTION: DEBRIEFING

- ___A. Daily and mandatory
- ___B. Crisis intervention activities
 - ___1. Review the actions of the day
 - ___2. Identify weaknesses and strengths of crisis interventions
 - ___3. Review status of referred students
 - ___4. Prioritize needs/personnel needed the next day
 - ___5. Plan follow-up actions
- ___C. Allow time for emotional debriefing

* Logistics/room designations/space allocations

** Support personnel needed for these locations

Developed by the Los Angeles Unified School District

Excerpted From The National Institute of Mental Health.....

Helping Children Cope With Violence and Disasters

The National Institute of Mental Health has joined with other Federal agencies to address the issue of reducing school violence and assisting children who have been victims of or witnesses to violent events. Recent nationally reported school shootings such as those that occurred in Bethel, Alaska; Pearl, Mississippi; West Paducah, Kentucky; Jonesboro, Arkansas; Edinboro, Pennsylvania; Springfield, Oregon; and Littleton, Colorado have shocked the country. Many questions are being asked about how these tragedies could have been prevented, how those directly involved can be helped, and how we can avoid such events in the future.

Research has shown that both adults and children who experience catastrophic events show a wide range of reactions. Some suffer only worries and bad memories that fade with emotional support and the passage of time. Others are more deeply affected and experience long-term problems. Research on post-traumatic stress disorder (PTSD) shows that some soldiers, survivors of criminal victimization, torture and other violence, and survivors of natural and man-made catastrophes suffer long-term effects from their experiences. Children who have witnessed violence in their families, schools, or communities are also vulnerable to serious long-term problems. Their emotional reactions, including fear, depression, withdrawal or anger, can occur immediately or some time after the tragic event. Youngsters who have experienced a catastrophic event often need support from parents and teachers to avoid long-term emotional harm. Most will recover in a short time, but the minority who develop PTSD or other persistent problems need treatment.

The school shootings caught the Nations attention, but these events are only a small fraction of the many tragic episodes that affect children's lives. Each year many children and adolescents sustain injuries from violence, lose friends or family members, or are adversely affected by witnessing a violent or catastrophic event. Each situation is unique, whether it centers upon a plane crash where many people are killed, automobile accidents involving friends or family members, or natural disasters such as Hurricane Andrew where deaths occur and homes are lost-but these events have similarities as well, and cause similar reactions in children. Helping young people avoid or overcome emotional problems in the wake of violence or disaster is one of the most important challenges a parent, teacher, or mental health professional can face. The purpose of this fact sheet is to tell what is known about the impact of violence and disasters on children and suggest steps to minimize long-term emotional harm.

For more information visit <http://www.nimh.gov/publicat/violence.cfm>

NIMH, 2000.

After a Disaster: How to Help Child Victims

Children who experience an initial traumatic event before they are 11 years old are three times more likely to develop psychological symptoms than those who experience their first trauma as a teenager or later. But children are able to cope better with a traumatic event if parents, friends, family, teachers and other adults support and help them with their experiences. Help should start as soon as possible after the event.

It's important to remember that some children may never show distress because they don't feel upset, while others may not give evidence of being upset for several weeks or even months. Other children may not show a change in behavior, but may still need your help.

Children may exhibit these behaviors after a disaster:

- # Be upset over the loss of a favorite toy, blanket, teddy bear or other items that adults might consider insignificant, but which are unimportant to the child.
- # Change from being quiet, obedient and caring to loud, noisy and aggressive or may change from being outgoing to shy and afraid.
- # Develop nighttime fears. They may be afraid to sleep alone at night, with the light off, to sleep in their own room, or have nightmares or bad dreams.
- # Be afraid the event will reoccur.
- # Become easily upset, crying and whining.
- # Lose trust in adults. After all, their adults' were not able to control the disaster.
- # Revert to younger behavior such as bed wetting and thumb sucking.
- # Not want parents out of their sight and refuse to go to school or childcare.
- # Feel guilty that they caused the disaster because of something they had said or done.
- # Become afraid of wind, rain, or sudden loud noises
- # Have symptoms of illness, such as headaches, vomiting or fever.
- # Worry about where they and their family will live.