

# **Somerset Pupil Service PLC Crisis Plan**

## **Introduction**

Somerset School District Mental Health Team/Pupil Service PLC have created this document to provide for the well-being of our students, staff and community during and after a crisis. In today's society, educators are continually faced with situations that can cause education to come to a complete standstill. When a young person dies, whether from an accident, suicide, or violence, the school community is left in turmoil.

This handbook is a collection of materials and suggestions, adopted in part from the Missouri School Counseling Association, the American Foundation for Suicide Prevention-After a Suicide Toolkit, National Association of School Psychologist-PRPaRE training.

The Pupil Services PLC team members include: Julie Fretz, Bobby Hurt, Kate Rorabeck, Amy Young, Katie Francis, Jenna Evenson, Jessie Thorson, and Alyssa Martinson.

## **Statement of Purpose**

The leading causes of death for teenagers are accidents and suicides. In the State of Wisconsin, accidents are the leading cause of death among teenagers, and suicide remains the third leading cause of death. In addition, many young people are now involved in violent deaths. Schools are committed to providing support for the emotional well-being of students. During a crisis, a team can further this emotional well-being of students in several ways:

1. Local staff members may be in need of personal support during a crisis.
2. The crisis team functions, as the local school needs it to; with services that include individual counseling with students, to meeting with entire classes, to consulting with local staff and community members. The team members are flexible enough to meet the needs of the particular school within the framework of that school's crisis plan.
3. A crisis team member can serve as a consultant to an administrator or counselor, rather than having an entire team travel to the school.

It will be the goal of the crisis team to help schools return to normal relatively soon while caring for the emotional needs of the school community. The team will help schools with the initial crisis, leaving them to better care for students in the following days.

## **TABLE OF CONTENTS**

<b><u>PREAMBLE/PREPAREDNESS</u></b>	<b>4-5</b>
<b><u>SECTION 1</u></b>	<b>6</b>
STAFF RESPONSIBILITIES	6
ADMINISTRATION CHECKLIST FOR RESPONDING TO AN EMERGENCY/CRISIS	6
FACULTY RESPONSIBILITIES	8
TEAM RESPONSIBILITIES	8
RESPONDING TO THE MEDIA	9
RESPONDING TO PARENTS/COMMUNITY-RESPONDING TO INCOMING CALLS	9
FOLLOW-THROUGH	9
<b><u>SECTION 2</u></b>	<b>10</b>
CRISIS RESPONSE	10
GUIDELINES FOR UNDERSTANDING AND RESPONDING TO A CRISIS	10
CRISIS TEAM MEMBERS PLAN OF ACTION	11
CRISIS INTERVENTION WORKSHEET	13
PLAN FOR NOTIFYING FACULTY	14
<b><u>SECTION 3</u></b>	<b>15</b>
CRISIS INTERVENTION	15
TIPS FOR CRISIS TEAM MEMBERS	16
SUGGESTIONS FOR VISITS TO CLASSROOMS	16
CRISIS TEAM MEMBERS DO'S AND DON'T'S	17
TOPICS FOR DISCUSSION AT TEACHER MEETING (CRISIS TEAM)	18
CRISIS TEAM GROUP TIPS	20
<b><u>SECTION 4</u></b>	<b>21</b>
SPECIAL CIRCUMSTANCES	21
KEY CONSIDERATIONS, MEMORIALIZATION, AND SOCIAL MEDIA	21
<b><u>APPENDIX/HANDOUTS</u></b>	<b>24</b>
A. CRISIS SAMPLE SCRIPTS/LETTERS	24
B. SAMPLE AGENDA FOR PARENT MEETING	26
C. HANDOUT FOR ADDRESSING THE MEDIA	29
D. HANDLING SOCIAL MEDIA	31
E. TALKING ABOUT SUICIDE	35
F. TIPS FOR TEACHERS FOR STUDENT SUPPORT	36
F.1 YOUNG PEOPLE AND GRIEF	39
F.2 TIPS FOR STUDENTS IN CRISIS	41
F.3 TIPS FOR PARENTS OF STUDENTS WHO ARE EXPERIENCING CRISIS	42
G. SAMPLE DEATH NOTIFICATION STATEMENTS FOR STUDENTS	43
H. PREPARE DOCUMENTS/HANDOUTS	44
I. EMERGENCY MANAGEMENT CONTACTS	49
J. MENTAL HEALTH RESOURCES	52

# **Preparedness**

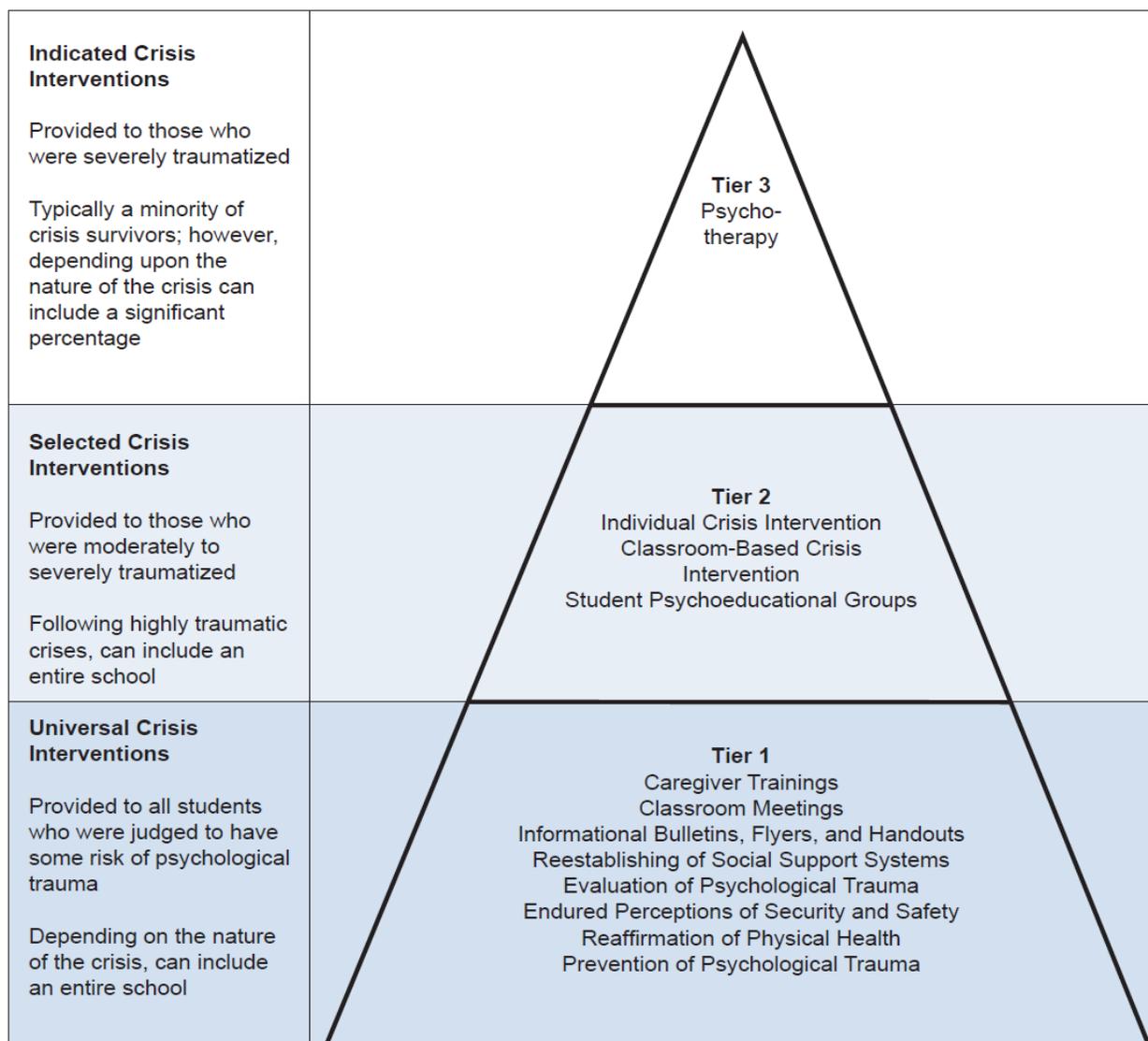
## **District Responsibilities**

Somerset School District has a board adopted Emergency Management Plan. This plan has been divided into a Steering Committee, Building Emergency Teams and an Emergency Management Coordinator. Somerset School District has adopted the FEMA Incident Command Protocol, team members have been trained in the FEMA Preparedness Model, DPI Suicide Prevention, QPR and PREPaRE, (School Crisis Intervention).

Upcoming trainings include; Zero Suicide, Solution Focused and Brief mental health intervention models. All of these trainings combined provide the crisis mental health team outlined procedures and protocol to follow in the event of a crisis.

In addition to these trainings, we offer support through grief groups. These groups allow students to feel supported as they handle a loss. We are also aware of the sensitivity of anniversaries and are prepared to address the needs of students as they arise. Anniversary dates can be found in the H Drive: School Counseling: Confidential: Crisis Management: Anniversary Dates.

## WS2 Handout 18 (Slide 86): Levels of School Crisis Interventions From Least (Tier 1) to Most (Tier 3) Restrictive



*Note.* Adapted from "Best Practices for School Psychologists as Members of Crisis Teams: The PREP<sub>a</sub>RE Model" (p. 1495), by S. E. Brock, A. B. Nickerson, M. A. Reeves, and S. R. Jimerson. In A. Thomas and J. Grimes (Eds.), *Best Practices in School Psychology V*, 2008, Bethesda, MD: National Association of School Psychologists. Adapted with permission.

## Section 1

### Staff Responsibilities

#### Administration Checklist for Responding to an Emergency/Crisis

These guidelines have been written to help those involved to think ahead and plan for situations. The suggestions below are designed to be thorough, as well as flexible and adaptable. Discretion and judgment will determine their use.

##### 1. Immediate Actions to be Taken

- Principal or designated individual will verify information regarding emergency/crisis
- Notify affected buildings where siblings are enrolled or other family members are employed. Confirm family information from them if necessary.
- Activate building intervention team.
- In the event of death, remove the name from the class roll and other forms of communication. Intercept any disciplinary, scholarship, testing, or special placement notifications that may be sent to the family. Remove personal items of the deceased from lockers, desk, etc. Put personal items of the deceased in a safe place to be returned to the family at an appropriate time.
- Secure the building. Activate plan for determining who is in the building.
- Distribute badges to incoming personnel or visitors.

##### 2. Contact Family

- Communicate with the family involved to express condolences and to check fact from rumor. Designate appropriate team member (discuss relationship to family, services provided, etc...) First point of contact is crucial to the success of maintaining communication and managing the crisis.
- Explain school procedure to the family with regard to meeting with the staff in order to insure that the family's situation is handled with utmost respect and to discuss the family's wishes in handling the situation. [See Appendix A]
- Ask what facts the family would allow to be discussed. Make sure notes are taken and verified with family.
- Confirm information shared with you from the contact person for the family to insure accuracy.

##### 3. School Plan of Action

###### A. Administrator's Responsibilities:

*Any or all of the responsibilities below may be delegated to the building team coordinator.*

1. Use telephone tree or Infinite Campus Messenger to notify faculty regarding email notification (email will include statement of incident and designated meetings as they apply). Designated building team leader will coordinate a meeting with crisis team members prior to faculty meeting.

2. Meet with faculty as soon as possible after the event if emergency/crisis occurs during the school day. **Contact Health Partners and/or Family Means regarding available support services for staff.**
3. Include in the faculty meeting agenda (secretary takes attendance to be given to runners to distribute information regarding the incident to non-attendees):
  - a. A printed statement approved by the family to be read verbatim by the classroom teacher. Decide the hard facts to reduce rumors and fantasies. If family has not been reached, reassure faculty/staff that further information will be forthcoming.
  - b. A handout review covering recommendations for dealing with a loss in the classroom. **[See Appendix F]**
  - c. An announced plan for disseminating further information during the day, e.g. notes in boxes, runners, further faculty meetings. **[See Section 2]**
  - d. The name and location of person in the building who can be called upon for accurate and current information.

**Name of contact:** \_\_\_\_\_ **Contact Number** \_\_\_\_\_

- e. An assessment of the individual faculty members' comfort level in reading the prepared statement and discussing the situation with students.
  - f. An evaluation of the need for substitute personnel from other building teams.
  - g. A schedule of times and location for faculty to process loss, to share their experiences and offer suggestions. (Prior to this, building teams will have determined who will work with students and who will work with faculty.)
  - h. This area will be designated as a workroom for the team:
    - i. **ES: Counseling Offices (C119 and C106)**
    - ii. **MS: SPED Conference Room (C152)**
    - iii. **HS: Conference Room Ext. 205**
  - i. This space will be available for small group counseling sessions:
    - i. **ES: Fourth Grade Pod Room (F104)**
    - ii. **MS: Counseling Office (135), EBD Resource (153), FACE (130)**
    - iii. **HS: Eichten (187) Bohatta (188)**
  - j. The plan for handling the media including the name of the spokesperson.  
**(SUPERINTENDENT OR DESIGNEE IS RESPONSIBLE FOR HANDLING THE MEDIA.)**
  - k. Any other pertinent information.
4. Keep all parents informed of school's activities in connection with the emergency/crisis, i.e., letters to parents, parent meetings, school website, Facebook, Infinite Campus messenger, etc.**[See Section 4][Appendix C & D]**

## **B. Faculty Responsibilities**

1. Read prepared statement at the designated time. (This statement will be provided by the designated building team leader.) **[See Appendix G]**
2. Provide an opportunity for students to discuss the incident and express their feelings. **[See Appendix F & F.1]**
3. Acknowledge emotions through discussion and involvement in constructive activities in the classroom. **[See Appendix F]**
4. Discuss strategies for students dealing with the media. Tell them the media may approach them but they do not have to talk to them. **[See Appendix D]**
5. Identify those who were close friends or who have suffered a similar loss and would like an opportunity to attend a group or individual meeting. Write names of students struggling to be referred. (Review anniversary list)
6. Identify students obviously in distress and talk with them or have another student help escort them to a group or individual counseling activity.
7. Request assistance from the building coordinator if a class has a large number of distressed students.
8. Shorten and re-structure assignments when appropriate. Postpone and reschedule tests as needed.

## **B. Team Responsibilities**

1. Building Emergency Management Team works in coordination with the Crisis Team Members (works with the principal to establish and define tasks)
  - a. Consults with principal when a possible crisis or emergency situation occurs.
  - b. Coordinates Plan:
    - \*Use of assistance from other buildings
    - \*Substitute Personnel
    - \*Room Assignments
    - \*Meeting Times
    - \*Notification
    - \*Media Coordinator and Staff Communications
    - \*Phone Chain and Other Communication
  - c. Manages monitoring and documentation process.
  - d. Organizes daily debriefing session.
  - e. Verifies the distribution of identification badges to all incoming personnel
  - f. Delegates any of the above responsibilities
2. Crisis Team Members

- a. Assists the principal and /or coordinator with developing specific plan for responding to the crisis.
- b. Accepts the responsibilities delegated by the building coordinator or principal.
- c. Consults with and supports (on an as needed basis) the affected building's staff in reacting to and dealing with the crisis.
- d. Provides direct support services to staff and students in distress.
- e. Makes referrals to building coordinator for those needing follow-up support from outside resources.
- f. Monitors the situation after the crisis has subsided and provides other follow-up services, logs pertinent information and data, debriefing.
- g. Assists with update notifications.
- h. Relays confidential information to applicable district personnel
- i. Anticipates building, family and community needs
- j. Assists other buildings when appropriate

**D. Responding to the Media:** (all media communication MUST come from the district superintendent or designee)

- 1. Prepare a plan for communicating with the media before an emergency/crisis occurs, which includes:
  - a. Building principal or designee works with superintendent on media plan and relays this plan to building team.
  - b. Where the media will be located?
  - c. Who will be responsible for the building security with respect to the media?

**E. Responding to Parents/Community-responding to incoming calls-**

- 1. Communication will come through the district messaging system.
- 2. Calmly reassure parents and other callers that the emergency/crisis management team is at work to keep your children safe.

**F. Follow Through**

- 1. Ongoing monitoring:
  - a. Building team should monitor, for as long as needed, all students and staff for distress
  - b. Documentation.
  - c. Evaluation/debrief

*\*\*If a situation occurs outside of our district that may have an effect on our school and community, the crisis team will also meet as soon as possible to create a plan per this handbook.*

## Section 2

### Crisis Response

#### Guidelines for Understanding and Responding to a Crisis

1. **Some of the emotions you may observe in your students (or in yourself) following a tragedy:**
  - Numbness, shock, denial – After a sudden death, you don't want to believe it has happened; you had no preparation for its occurrence.
  - Confusion – Why did this happen? I don't understand the circumstances. How could this happen to someone I know?
  - Fear – Could something like this happen again? Will something like this happen again?
  - Grief – Sadness, crying, a deep sense of personal loss.
  - Anxiety – A Difficulty in explaining or understanding the tragedy; things are not the same at school or in my class.
  - Depression – Emptiness, unhappiness.
  - Guilt – An irrational feeling of responsibility for the event. What could I have done to prevent it?
  - Anger – Why did someone do a violent, senseless thing? Why did others let it happen? Anger can be directed toward a specific person or persons or be a more general feeling of anger.
2. **Here are some of the changes in behavior that you may see. Most, if not all of these changes, will be temporary. Children are resilient and do bounce back.**
  - Lack of concentration – inability to focus on schoolwork, household chores, or other leisure activities.
  - Lack of interest in usual activities – Their mind is preoccupied with other thoughts and feelings and what would usually be very enjoyable may not have much appeal.
  - Greater dependency – A need to feel protected may result in their wanting to do more with you or not have you away from them for long periods of time; some kids may not want to be alone.
  - Problems with sleeping and eating – Difficulty going to sleep, occasional bad dreams or a decreased or increased appetite are common physical reactions to a stressful situation.
  - Quiet or overly talkative or a combination – may need to talk about a tragic incident over and over again, asking questions that may be unanswerable but needing to ask them anyway. This repetition is often a healthy way of working through the grief process; on the other hand, a student may not want to talk about it much with you, preferring to discuss it with friends, classmates, parents – those who may have been closer to the tragedy; or the student may not want to talk with anyone about it.

## **Crisis Team Members Plan of Action**

**Personal Possession Plan** – As soon as possible, a member of the Crisis Team goes to the student’s locker and other areas where he/she may have possessions to empty the contents. This keeps a mass of students from witnessing removal of the possessions and prevents students from memorializing the locker or other occupied area.

**Follow Student Schedule** – Purpose: To talk specifically with the class members of the classes shared with the deceased, provide factual information, answer questions, clarify any misinformation, provide support, and identify students who may need individual or group support.

**Runners**-Will be designated to distribute information and also to monitor social media.

**Mechanics:** Two people, preferably the student’s counselor and another member of the Crisis Team, will follow the deceased student’s, or the student involved, schedule hour by hour. One person should talk and explain, and one person will identify students who are not coping well and escort them to the group support room.

**What to say:** Review the facts of the death or situation (per district announcement). Answer any questions to dispel any rumors or misinformation. Provide information on funeral and visitation arrangements if available. Explain what funerals and visitations are like and what to expect. Suggest what type of things they can say to the family members. Explain that a wide range of emotions are involved and how each person may be feeling differently. All feelings are OK. Encourage them to express their feelings. Encourage students to talk about the deceased and the memories they have of him/her.

- If there is a seating assignment, deal with the “empty chair.” Provide alternatives such as a new seating chart, removing the chair, or leaving the chair alone. The students need to make a decision but can be allowed to decide at a later time with the classroom teacher.
- Remind students of the group support room and other areas of support and the procedures involved.

**Hall Monitoring** – Purpose: To keep students in the building and to seek out those who may be in need of support.

**Mechanics:** Hall monitors will check out the “nooks and crannies” in the building, bathrooms, hallways, etc., to locate students who may be seeking refuge away from the mainstream. If students are interacting in groups, it may be necessary to approach the group and encourage them to use the group room. This will aid in monitoring class attendance.

**Group Support** – Purpose: 1) To provide one specific area for students to receive support, comfort and express feelings, all under the supervision of trained Crisis Team members, 2) To keep grieving and upset students in the building, and 3) To identify students who may need attention and support beyond what is provided by the Crisis Team.

**Mechanics:** One room is designated as the “group support room” and staffed with at least one or more Crisis Team members (depending on the number of students utilizing the service). Kleenex, water, and plenty of chairs with room to move around are necessary when setting up the room. Crisis team members aid to make sure of water and food and supplies. Sign-in and sign-out forms are to be placed on a table near the door so students’ absences from class can be monitored. This information is given to teachers at the end of the day or the next morning.

**What to say:** The role of the Crisis Team member assigned in the group support room is dependent on the make-up of the students present. Some students share, talk, and comfort each other without

much encouragement from the Crisis Team members. Others will need some direction. Encourage students to express and talk about their feelings. Ask students to talk about memories they have of the deceased. Encourage students to ask questions and talk to each other.

**Evening Follow-Up** – Purpose: To follow up on those students and staff who were identified as most affected by the traumatic event or those who are not coping well. Teachers will be given a sheet to identify students of concern. Crisis team member will utilize this list and other referrals for follow up phone calls.

**Mechanics:** During the school day a list is compiled of students and staff described above. The list is divided among Crisis Team members and follow-up calls are made in the evening.

**What to say:** Advise the parent/guardian of their child's situation. Check on current functioning, refer on to an outside counselor if necessary, or refer for further intervention by school counselor or Crisis Team member for the next day. A Crisis Team member will need to follow through with this procedure.

## Crisis Intervention Worksheet

*Crisis Team meets as soon as possible to mobilize a plan.*

This document is designed to organize personnel prior to, during, and after a crisis to minimize the trauma and focus resources.

Date \_\_\_\_\_

School \_\_\_\_\_ Phone \_\_\_\_\_

Principal \_\_\_\_\_ Cell Phone \_\_\_\_\_

Crisis Team Members

Phone


Designated building team leader \_\_\_\_\_

Building security; plan for monitoring entrances to building

Entrance Location

Who Will Monitor Entrance


## Plan for Notifying Faculty

★ Faculty Meeting

- Possible Times for Meeting \_\_\_\_\_
- Activate phone tree to all buildings indicating email notification regarding incident*
- Superintendent or administrator to send memo to each faculty member-explaining crisis

★ Plan for notifying students that a crisis has occurred

- Create written notification
- 
- 

★ Plan for informing parents

- Create letter for home
- Parent meeting
- How to notify of meeting

★ Arrangements for group counseling

Location Room #	Person Responsible for Group

★ Follow up activities

- Crisis Response and Recovery Evaluation [**See Appendix I**]
- Crisis Team Members complete Psychological Triage Summary [**See Appendix H**]

## Section 3

### Crisis Intervention

#### Tips for Crisis Team Members

1. Keep your life in balance:
  - Eat well and get plenty of exercise. A good diet and exercise is important when under stress.
  - Balance work and rest.
  - Stick to a schedule as much as you can. It provides stability and the comfort of a normal routine when your feelings are out of control.
  - Avoid new major projects or decisions.
2. Be realistic about what you can do.
3. Recognize and acknowledge your own feelings of loss and grief.
4. Give yourself permission to mourn. No matter what the nature of your relationship, there is loss. Give yourself the same latitude you give your students.
5. Meet with fellow Crisis Team members and be supportive of each other or form a support group with fellow counselors or staff members.
6. Be kind to yourself. You don't have to "get it all together" right away. You don't have to do it all, be strong for everyone, or take care of everything. Treat yourself with the same gentleness and understanding you would anybody else.
7. Debrief with the Crisis Team members and/or administration before going home.
8. Set date to reconvene (within one week) to go over data and evaluation process.
  - Crisis Response and Recovery Evaluation [**See Appendix I**]

## Suggestions for Visits to Classrooms

1. **EXPLANATION:** Briefly explain why you are there.... “If you are wondering why there are some other adults in the building today, it’s because we are all counselors who care and were invited here by your counselor/principal because of the death of (person’s name). We care about what you are going through and know it is tough. Because we were not as close to the person as you are, we are not suffering the way you and the teachers are – we just want to help out in any way possible.” Emphasize that the teams or individual team members are not there to take the place of local counselors, administrators or clergy, but that you are there to assist and help in any way that you can.
2. **SCHEDULE:** If you are following the schedule of the deceased, it’s important to recognize the “empty chair.”
3. **FEELINGS:** Let all students know that whatever they are feeling is okay. It may be anger, sadness, fear, confusion, guilt – anything, or even a mixture of these and/or other feelings.
  - a Help them realize that different people will express feelings in different ways and that is okay. Grieving is a personal journey; not everyone will grieve in the same manner. “Try not pass judgment because someone else does not seem to be hurting or suffering as much as you are.”
  - b Help the students understand that some people may not have “known” (use the deceased’s name) or been “close” to them but what they have heard today may bring back memories of a similar loss or recent experience. It is acceptable for them to be dealing with their own feelings of sadness.
  - c Help them understand that the intense sadness or hurt will not last forever. “Life will go on and the terrible hurt you are feeling right now will not hurt quite as much after some time passes. You won’t forget (person’s name), of course, but time will help and just because we have to go on with school, schedules, jobs and everything else, does not mean you care less for the person who died.”
  - d Encourage expression of present feelings, but accept the silence.
4. **SUPPORT:** Inform students of the opportunities to meet and share in smaller groups.
  - a Crisis team members from other buildings will provide water, food, grief support handouts, supplies, etc. [See Appendix F.1 & F.2]
  - b Help them eventually share about some of their positive experiences they have had (use the person’s name) – fun time, etc.
  - c Compliment them for being supportive of each other and really helping each other.
  - d If possible and it seems appropriate, walk around the campus with one to two students. Physical activity helps some students.
  - e Invite students to write, draw, or speak about the student who died.
5. **GROUP TIPS:** Do not be too structured. Allow students to sit close together, sit on the floor or on a desk or table if it’s safe. Sitting in a circle is a good way to draw people close together. This will develop intimacy and make members of the group feel together and equal.
  - a Let students talk to one another.
  - b Ask students to think of at least three words that would describe the victim(s) and go around the circle and share these words. Don’t force participation, most will want to share.
  - c If there is a community wide crisis let students tell what has happened at their homes and how they felt

### Crisis Team Members

## **DO's**

- Do** listen to the students and wait after you've asked a question to give them adequate time to respond.
- Do** allow students the opportunity to express any and all thoughts regarding the incident without judging or evaluating their comments.
- Do** be aware of your voice tone, keeping it low, even, and warm.
- Do** help the students see that everyone shares similar feelings (i.e., "We're – Not You're) all stunned that something like this could happen here" or "A lot of us (not you) are feeling angry."
- Do** expect tears, anger, resentment, fear, inappropriate language (often due to tension and discomfort), stoicism (apparent non-reaction).
- Do** expect some students to become phobic and have sudden overwhelming concerns that may seem illogical to you but are very real to them.
- Do** be aware that this death could bring about the resurfacing of other losses for students.
- Do** encourage students to sit in a circle, or to make a more intimate grouping in which to have this discussion.
- Do** stress the confidential nature of the feelings and thoughts expressed in the discussion.
- Do** use your own thoughts and ideas as a means to encourage discussion, not as a means for alleviating your own feelings.
- Do** expect that other feelings of loss may emerge.
- Do** give accurate information about the incident. If you don't know an answer, say so.
- Do** squelch any rumors that may exist by either giving the facts, or researching what the "facts" are and reporting back.

## **DON'T's**

- Don't** give "should, ought, or must" statements (i.e. "You shouldn't feel like that." "We mustn't dwell on this.")
- Don't** use clichés (i.e., "Be strong." "It could have been worse.")
- Don't** ask questions without being ready to listen.
- Don't** try to make them feel better; let them know that it's okay to feel what they're feeling.
- Don't** isolate anyone – each will need to feel a part of the group.
- Don't** expect the students to "get over" grief/recovery process within a certain time.
- Don't** assume a person is not grieving/reacting just because they don't look or act like it. Let them know of your availability for future support (i.e., six weeks or three months from now).
- Don't** let students interrupt each other, allow each person to finish his or her own statement.
- Don't** repeat what you have heard outside of the school setting. Stick to what has been communicated to you by the crisis team and/or administration. It is important for you to model and practice the elimination of rumors.
- Don't** share any confidential facts/information with those not involved in the crisis situation (this includes other adults and children/students).

### **Topics for Discussion at Teacher Meeting (Crisis Team)**

- Attached is a copy of “Young People and Grief.” This information may be helpful to you as you help students deal with their feelings [See Appendix F.1].
- Present facts as they are known. Stick to what the school has given you as information to present. Do not offer your opinions and/or what you may have heard from other sources.
- Discuss procedures and support that will be available.
- Discuss use of hall passes as means of student’s getting from class to support rooms. Emphasize the need for sensitivity in approaching students who may be in the hall. Emphasize the importance of monitoring exists. Be alert to students who may be in need of emotional support.
- Explain that members of the Crisis Team will follow the victim’s schedule in order to speak to classes. Explain that other team members will be available for other classes if needed.
- Go over “tips for teachers” pertaining to grief and emphasize “if kids want to talk,” be sensitive [See Appendix F].
- Go over how to take care of teacher feelings (your own) and emphasize that support rooms and support are available.
- Inform teachers of the mandatory debriefing meeting at the end of the day.
- Discuss staff and students handling of the press.
- Inform teachers to notify Crisis Team members of names of students who may be high risk.
- Inform teachers to refrain from discussing death in terms of religious beliefs.
- Reassure staff members that it is acceptable for them to have the need to grieve. If they are having a difficult time, they should ask for someone to cover their responsibilities until they are able to resume.
- Emphasize the importance of watching each other, as well as the students. Don’t be afraid to “refer” a colleague if you see that they are having a difficult time. No one will be judged for the emotions they are experiencing.
- Remind staff members that the bells may not ring as usual based upon the needs of the students. Let them know that they are to keep their students until the bells or someone directs them differently.
- A support room has been set up in **ES Room F104 MS Room 130/135/153 HS Rooms 187/188** for those students who need to and/or additional support. Members of the Crisis Team will be available for individual and group support. PLEASE LET STUDENTS KNOW WHERE THEY CAN GO FOR HELP, and follow the directions given for releasing them and monitoring their coming and going to these rooms. It is best to have students escorted to the various locations.
- Please be especially observant for those students who experience a high level of distress and/or whose behavior indicates a strong grief reaction (see “Young People and Grief”) Bring or have students escorted by a staff member to the support room. Names of students who should be monitored or seen for follow-up support should be given to counselors [See Appendix F].

- Counselors and members of the Crisis Team are available to come to classes to talk about common reactions to loss, to provide support, to answer questions – whatever you might need. Please contact your crisis team members if at any time, you would like someone to come to your class.

### **Crisis Team Group Tips**

1. If students ask questions or want to talk about their feelings, it is usually a good thing to let that happen for an appropriate period of time. During the discussion, some things you might include are:
  - a. Reinforce the idea that people grieve in different ways. All responses are OK – there is no “normal” way to feel.
  - b. Reinforce that people grieve for different reasons. It is acceptable for someone to have grief feelings even if they didn’t personally know the victim. What they are hearing may have resurfaced previous or recent experiences of their own.
  - c. Talk about what they can do with their feelings.
    - talk with people they trust
    - encourage talking with parent/guardian
    - encourage talking to school staff
    - inform them of the support room
    - let them know it is fine to seek out help
  - d. Discuss what they can do to help each other.
    - reach out to each other/listen to each other
    - accompany an upset friend to talk to someone
    - let an adult know if a friend is very upset
2. Students may be encouraged to write letters or cards or other expressions of care that can be brought to the counseling department for delivery to the family.
3. State and reinforce the stability of a routine: “School will go on.” Allow appropriate time for sharing of feelings and discussion, but return to scheduled instructional activities each day after a crisis occurs.

## **Section 4**

# Special Circumstances

## Key Considerations, Memorialization, and Social Media

### Key Considerations

Utilize any handouts/or scripts given for communication. [See Appendix A]

Reminder: While it may not always be possible to immediately ascertain all of the details about the death, confirming as much information as possible is important because speculation and rumors can exacerbate emotional upheaval within the school. If the cause of death has not been confirmed to be suicide, if there is an ongoing investigation, or if the family does not want the cause of death disclosed, it can be challenging for a school to determine how to proceed.

### Suicide Contagion

If there appears to be contagion, school administrators should consider taking additional steps beyond the basic crisis response, including stepping up efforts to identify other students who may be at heightened risk of suicide, collaborating with community partners in a coordinated suicide prevention effort, and possibly bringing in outside experts. In addition, school crisis team members should remain mindful of their own limitations and consider bringing in trained trauma responders from other school districts or local mental health centers to help them as needed.

### Funeral

- Depending on the family's wishes, help disseminate information about the funeral to students, parents and staff, including:
  - location
  - time of the funeral (keep school open if the funeral is during school hours)
  - what to expect (for example, whether there will be an open casket)
  - guidance regarding how to express condolences to the family
  - policy for releasing students during school hours to attend (i.e., students will be released only with permission of parent, guardian, or designated adult)
- Work with school counselors and community mental health professionals to arrange for counselors to attend the funeral.
- Encourage parents to accompany their child to the funeral.

### Memorialization After a Student Death Administrative Guidelines:

Somerset School District's protocol regarding memorization after a student death is based on guidelines set forth in *PREP@RE School Crisis Prevention and Intervention Training Curriculum* and *AFSP & SPRC: After a Suicide-A Toolkit for schools*.

Somerset School District's guiding principles are to provide support in a controlled, yet structured way. The guidelines on memorization center on four main principles;

- To minimize the potential for putting other students at risk (in the case of suicide)
- To respond to all deaths in a uniform manner
- To facilitate support for the process of grieving

- Memorials will reflect a desire to commemorate the life, not the death, of the deceased in personal and meaningful ways

### **What is the Purpose of a Memorial?**

Memorials are a way for students, staff, and the community to express their grief. They serve to normalize feelings. Memorials can also be learning events for children and opportunities for students to take an active role in the grieving process.

### **How to Deal with Spontaneous Memorials?**

Often times spontaneous memorials appear after a student death. Somerset school administrators will respect the need of students to express their feelings but will also balance these displays by indicating that these remembrances will be removed at the end of the day or after the funeral, in a designated area, and given to the family of the deceased student.

Somerset School District will establish a committee to review all requests for memorialization activities. This committee will consist of, but is not limited to, Building Administrator, Director of Pupil Services, school counselor(s), school psychologist, and two additional members appointed by building principal. In addition, if students would like to submit ideas to this committee, they will have the opportunity to submit their proposals in writing to building counselors. The counselors will then present these proposals to the committee. The building principal shall have final approval of all requests. Committee shall meet as needed and review and update the guidelines accordingly.

### **Memorial Activities to Consider**

- Scrapbooks/cards/posters in a monitored location for students to express condolences to family.
- Activity focused memorial which may include fundraising for prevention groups related to the cause of death (i.e. American Cancer Society), or mental health awareness programs.
- Picture in yearbook as it would be if student was still alive
- Scholarship in memory of deceased organized by family

### **Memorial Activities to Avoid**

- Flying the flag at half-mast (this is reserved for the death of a public figure)
- Posting a notice on Facebook or the district website
- Dismissing school early or cancelling school all together
- Holding student assemblies, including graduation ceremony where deceased is remembered with an empty chair, presentation of diploma to family, or presentation of item of memory of deceased
- Full page dedication in the yearbook
- Planting gardens
- Erecting plaques
- Staging large, public memorial services
- Creating a permanent part of the environment (i.e. planting trees) to add to an existing memorial site.
- Selling commemorative t-shirts

### **Memorials After a Suicide**

Memorials following a suicide are particularly important to monitor. Somerset School District recognizes that every decision made regarding memorials after a suicide is extremely important, because it may help prevent the death of another student. These decisions will be made based on best practice recommendations from the sources cited within these administrative guidelines. The Somerset School District will not establish permanent memorials after a death by suicide. Memorials following a suicide may glamorize death or communicate that suicide is an appropriate or desired response to stress. Spontaneous memorials (balloons, flowers, pictures, letters, etc.) will be allowed for the remainder of the school day in a designated area and the family of the deceased student will be given the memorial items. Somerset School District will discourage any memorialization that represents long-term commemoration following a death by suicide.

The anniversary of the death (and other significant dates, such as the deceased's birthday) may stir up emotions and can be an upsetting time for some students and staff. It is helpful to anticipate this and provide an opportunity to acknowledge the date, particularly with those students who were especially close to the student who died. These same principles will apply when addressing suicide anniversaries.

### **Working with the Community**

A coordinated approach can be especially critical when the suicide receives a great deal of media coverage and when the community is looking to the school for guidance, support, answers, and leadership.

### **Reporting on Suicide: Recommendations for the Media.**

#### **Social Media**

- Oversee school's use of **social media** as part of the crisis response.
- Consider convening a small group of the deceased's friends to work with school administration to monitor social networking sites and other social media.
- Prepare for student reactions and questions by providing handouts to staff on **Talking About Suicide.** [Appendix E]

## Appendix

### A. Crisis Sample Scripts/Letters

#### Script to Communicate with Family Members Directly Involved with Crisis

“Good (Morning/Afternoon/Evening), this is (insert name here) calling from Somerset School District. It has been brought to our attention that (insert student name) has passed away. As a district, we express our condolences to you and your family.

As part of our Crisis Plan, we connect with family members involved in order to insure that your situation is handled with respect and to have knowledge of your wishes as we move forward.

Would you please provide us with the information you feel comfortable sharing and allowing us to discuss with staff and students. (Record this information)

From what I heard you say, you are ok with us sharing the following information (repeat recorded information).

As we move forward, will you be the contact person for the family? Is there another individual who could serve as a backup person in case you are not available? (Record this information)

Again, the Somerset School District expresses our condolences during this time. Please do not hesitate to reach out to us if concerns arise or if you need our support.”

Please feel free to contact me (add name) at \_\_\_\_\_.

#### Sample Death Notification Statement for Parents of the District

To be sent by e-mail or regular mail

##### Option 1 – When the death is accidental (not suicide related)

I am writing with great sadness to inform you that one of our students, \_\_\_\_\_, has passed away in an accident. Our thoughts and sympathies are with [his/her] family and friends.

All of the students were given the news of the death by their teacher in [advisory/homeroom] this morning. I have included a copy of the announcement that was read to them.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance; we have a list of school and community mental health resources.

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please do not hesitate to contact me or one of the school counselors with any questions or concerns.

Sincerely,

[Principal]

### **Option 2 – When the death has been ruled suicide**

I am writing with great sadness to inform you that one of our students, \_\_\_\_\_, has died. Our thoughts and sympathies are with [his/her] family and friends.

All of the students were given the news of the death by their teacher in [advisory/homeroom] this morning. I have included a copy of the announcement that was read to them.

The cause of death was suicide. We want to take this opportunity to remind our community that suicide is a very complicated act. It is usually caused by a mental disorder such as depression, which can prevent a person from thinking clearly about his or her problems and how to solve them. Sometimes these disorders are not identified or noticed; other times, a person with a disorder will show obvious symptoms or signs. I am including some information that may be helpful to you in discussing suicide with your child.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance; we have a list of school and community mental health resources.

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

The school will be hosting a meeting for parents and others in the community at [date/time/location]. Members of our Crisis Response Team [or mental health professionals] will be present to provide information about common reactions following a suicide and how adults can help youths cope. They will also provide information about suicide and mental illness in adolescents, including risk factors and warning signs of suicide, and will address attendees' questions and concerns.

Please do not hesitate to contact me or one of the school counselors with any questions or concerns.

Sincerely,

[Principal]

### **Option 3 – When the cause of death is unconfirmed**

I am writing with great sadness to inform you that one of our students, \_\_\_\_\_, has died. Our thoughts and sympathies are with [his/her] family and friends.

All of the students were given the news of the death by their teacher in [advisory/homeroom] this morning. I have included a copy of the announcement that was read to them.

The cause of death has not yet been determined by the authorities. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we have asked the students not to spread rumors since they may turn out to be inaccurate and can be deeply hurtful. We'll do our best to give you accurate information as it becomes known to us.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel

your child is in need of additional assistance; we have a list of school and community mental health resources.

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please do not hesitate to contact me or one of the school counselors with any questions or concerns.

Sincerely,

[Principal]

#### **Option 4 – When the family has requested that the cause of death not be disclosed**

I am writing with great sadness to inform you that one of our students, \_\_\_\_\_, has died. Our thoughts and sympathies are with [his/her] family and friends.

All of the students were given the news of the death by their teacher in [advisory/homeroom] this morning. I have included a copy of the announcement that was read to them.

The family has requested that information about the cause of death not be shared at this time. We appreciate your understanding and willingness to respect the family's wishes during this time.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance; we have a list of additional school and community mental health resources.

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please do not hesitate to contact me or the school counselors with any questions or concerns.

Sincerely,

[Principal]

## B. Sample Agenda for Parent Meeting

Meetings with parents can provide a helpful forum for disseminating information and answering questions. The Crisis Response Team, the Superintendent, and the School Principal should attend. Representatives from community resources such as mental health providers, county crisis services, and clergy may also be invited to be present and provide materials. This is a good time to acknowledge that suicide can be a difficult subject to talk about and to distribute the handout on **Talking About Suicide**. [See Appendix E]

*A word of caution: Large, open-microphone meetings are not advised, since they can result in an unwieldy, unproductive session focused on scapegoating and blaming. Instead, the meeting should ideally be broken into two parts. During the first part, presented by school staff, the focus should be on dissemination of general information to parents, without opening the meeting to discussion. During the second part, have parents meet in small groups with trained crisis counselors for questions and discussion. The following is a sample meeting agenda.*

### **First Part: General Information (45 to 50 minutes)**

#### **Crisis Response Team Leader or School Superintendent**

- Welcomes all and expresses sympathy
- Introduces the principal and members of the Crisis Response Team
- Expresses confidence in the staff's ability to assist the students
- Encourages parent and school collaboration during this difficult time
- Reassures attendees that there will be an opportunity for questions and discussion
- States school's goal of treating this death as it would any other death, regardless of cause, while remaining aware that adolescents can be vulnerable to risk of imitative suicidal behavior
- States importance of balancing need to grieve with not inadvertently oversimplifying, glamorizing, or romanticizing suicide

#### **Principal**

- Outlines the purpose and structure of the meeting
- Verifies the death (**Sample Notification Announcements for Parents in Appendix A**)
- Discourages the spread of rumors
- Informs parents about the school's response activities including media requests
- Informs parents about student release policy for funerals

#### **Crisis Response Team Leader (or other appropriate Crisis Team member)**

- Discusses how school will **help students cope**.
- Mentions that more information about bereavement after suicide is available at **<http://www.afsp.org/survivingsuicideloss>**.
- Shares handouts, Crisis Team brochures
- Reminds parents that help is available for any student who may be struggling
- Provides contact information (names, telephone numbers, and e-mail addresses) for mental health resources at school and in the community, such as:
  - School counselors
  - Community mental health agencies
  - Emergency psychiatric screening centers

- Children's mobile response programs
- National Suicide Prevention Lifeline 1-800-273-TALK

### **Some Additional Considerations**

- Since some parents may arrive with young children, provide onsite childcare.
- Provide separate discussion groups for students who may accompany parents.
- Media should not be permitted access to the small groups; arrange for the media spokesperson to meet with any media.
- In some cases (for example, when the death has received a great deal of sensationalized media attention), it may be necessary to arrange for security to assist with the flow of traffic and with media and crowd control.

## C. Handout on Addressing Media

# RECOMMENDATIONS FOR REPORTING ON SUICIDE

## IMPORTANT POINTS FOR COVERING SUICIDE

- More than 50 research studies worldwide have found that certain types of news coverage can increase the likelihood of suicide in vulnerable individuals. The magnitude of the increase is related to the amount, duration and prominence of coverage.
- Risk of additional suicides increases when the story explicitly describes the suicide method, uses dramatic/graphic headlines or images, and repeated/extensive coverage sensationalizes or glamorizes a death.
- Covering suicide carefully, even briefly, can change public misperceptions and correct myths, which can encourage those who are vulnerable or at risk to seek help.

Suicide is a public health issue. Media and online coverage of suicide should be informed by using best practices. Some suicide deaths may be newsworthy. However, the way media cover suicide can influence behavior negatively by contributing to contagion or positively by encouraging help-seeking.

**Suicide Contagion or "Copycat Suicide"** occurs when one or more suicides are reported in a way that contributes to another suicide.

References and additional information can be found at: [www.ReportingOnSuicide.org](http://www.ReportingOnSuicide.org).

### INSTEAD OF THIS:

- Big or sensationalistic headlines, or prominent placement (e.g., "Kurt Cobain Used Shotgun to Commit Suicide").
- Including photos/videos of the location or method of death, grieving family, friends, memorials or funerals.
- Describing recent suicides as an "epidemic," "skyrocketing," or other strong terms.
- Describing a suicide as inexplicable or "without warning."
- "John Doe left a suicide note saying..."
- Investigating and reporting on suicide similar to reporting on crimes.
- Quoting/interviewing police or first responders about the causes of suicide.
- Referring to suicide as "successful," "unsuccessful" or a "failed attempt."

### DO THIS:

- Inform the audience without sensationalizing the suicide and minimize prominence (e.g., "Kurt Cobain Dead at 27").
- Use school/work or family photo; include hotline logo or local crisis phone numbers.
- Carefully investigate the most recent CDC data and use non-sensational words like "rise" or "higher."
- Most, but not all, people who die by suicide exhibit warning signs. Include the "Warning Signs" and "What to Do" sidebar (from p. 2) in your article if possible.
- "A note from the deceased was found and is being reviewed by the medical examiner."
- Report on suicide as a public health issue.
- Seek advice from suicide prevention experts.
- Describe as "died by suicide" or "completed" or "killed him/herself."



## AVOID MISINFORMATION AND OFFER HOPE

- Suicide is complex. There are almost always multiple causes, including psychiatric illnesses, that may not have been recognized or treated. However, these illnesses are treatable.
- Refer to research findings that mental disorders and/or substance abuse have been found in 90% of people who have died by suicide.
- Avoid reporting that death by suicide was preceded by a single event, such as a recent job loss, divorce or bad grades. Reporting like this leaves the public with an overly simplistic and misleading understanding of suicide.
- Consider quoting a suicide prevention expert on causes and treatments. Avoid putting expert opinions in a sensationalistic context.
- Use your story to inform readers about the causes of suicide, its warning signs, trends in rates and recent treatment advances.
- Add statement(s) about the many treatment options available, stories of those who overcame a suicidal crisis and resources for help.
- Include up-to-date local/national resources where readers/viewers can find treatment, information and advice that promotes help-seeking.



## SUGGESTIONS FOR ONLINE MEDIA, MESSAGE BOARDS, BLOGGERS & CITIZEN JOURNALISTS

- Bloggers, citizen journalists and public commentators can help reduce risk of contagion with posts or links to treatment services, warning signs and suicide hotlines.
- Include stories of hope and recovery, information on how to overcome suicidal thinking and increase coping skills.
- The potential for online reports, photos/videos and stories to go viral makes it vital that online coverage of suicide follow site or industry safety recommendations.
- Social networking sites often become memorials to the deceased and should be monitored for hurtful comments and for statements that others are considering suicide. Message board guidelines, policies and procedures could support removal of inappropriate and/or insensitive posts.

### MORE INFORMATION AND RESOURCES AT:

[www.ReportingOnSuicide.org](http://www.ReportingOnSuicide.org)

## HELPFUL SIDE-BAR FOR STORIES



### WARNING SIGNS OF SUICIDE

- Talking about wanting to die
- Looking for a way to kill oneself
- Talking about feeling hopeless or having no purpose
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious, agitated or recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

The more of these signs a person shows, the greater the risk. Warning signs are associated with suicide but may not be what causes a suicide.



### WHAT TO DO

If someone you know exhibits warning signs of suicide:

- Do not leave the person alone
- Remove any firearms, alcohol, drugs or sharp objects that could be used in a suicide attempt
- Call the U.S. National Suicide Prevention Lifeline at 800-273-TALK (8255)
- Take the person to an emergency room or seek help from a medical or mental health professional

## THE NATIONAL SUICIDE PREVENTION LIFELINE 800-273-TALK (8255)

A free, 24/7 service that can provide suicidal persons or those around them with support, information and local resources.



## **D. Handling Social Media**

### **Social Media**

The term *Social Media* refers to the various Internet and mobile communications tools (such as texting, Facebook, Twitter, YouTube, Myspace and others) that may be used to communicate information extremely rapidly, often to large numbers of people. In the emotionally charged atmosphere that can follow a suicide death, schools may be inclined to try to control or stifle such communications by students—a task that is virtually impossible in any event, since they generally take place outside of school hours and property. Schools can, however, utilize social media effectively to disseminate information and promote suicide prevention efforts.

### **Key Considerations**

Following a suicide death, students may immediately turn to social media for a variety of purposes, including transmitting news about the death (both accurate and rumored), calling for impromptu gatherings (both safe and unsafe), creating online memorials (both moving and risky), and posting messages (both appropriate and hostile) about the deceased.

Although schools may initially consider social media to be outside of its traditional jurisdiction, they can in fact collaborate with students and utilize these tools to disseminate important and accurate information to the school community, identify students who may be in need of additional support or further intervention, share resources for grief support and mental health care, and promote safe messages that emphasize suicide prevention and minimize the risk of suicide contagion.

### **Involve Students**

It can be very beneficial for a designated member of the Crisis Response Team (ideally someone from the school's information technology department) to reach out to friends of the deceased and other key students to work collaboratively in this area. Working in partnership with student leaders will enhance the credibility and effectiveness of social media efforts, since the students themselves are in the best position to help identify the particular media favored by the student body, engage their peers in honoring their friend's life appropriately and safely, and inform school staff about online communications that may be worrisome.

Students who are recruited to help should be reassured that school staff are only interested in supporting a healthy response to their peer's death, not in thwarting communication. They should also be made aware that staff are available and prepared to intervene if any communications reveal cause for concern.

### **Disseminate Information**

Schools may already have a website and/or an online presence (or page) on one or more social media sites; students can help identify others that are currently popular. These can be used to proactively communicate with students, teachers, and parents about:

- the funeral or memorial service (schools should of course check with the student's family before sharing information about the funeral)
- where students can go for help or meet with counselors
- mental illness and the causes of suicide
- local mental health resources
- the National Suicide Prevention Lifeline number: 800-273-TALK (8255)
- national suicide prevention organizations such as the National Suicide Prevention Lifeline (<http://www.suicidepreventionlifeline.org>), the American Foundation for Suicide Prevention

(<http://www.afsp.org>), and the Suicide Prevention Resource Center (<http://www.sprc.org>). Schools should emphasize help-seeking and suicide prevention. More specific guidance for safe message content may be found at <http://www.sprc.org/library/SafeMessaging.nal.pdf>. Students can also be enlisted to post this information on their own online pages.

### **Online Memorial Pages**

Online memorial pages and message boards have become common practice in the aftermath of a death. Some schools (with the permission and support of the deceased student's family) may choose to establish a memorial page on the school website or on a social networking site. As with all memorialization following a suicide death, such pages should take care not to glamorize the death in ways that may lead other at-risk students to identify with the person who died. It is therefore vital that memorial pages utilize safe messaging, include resources, be monitored by an adult, and be time-limited.

It is recommended that online memorial pages remain active for up to 30 to 60 days after the death, at which time they should be taken down and replaced with a statement acknowledging the caring and supportive messages that had been posted and encouraging students who wish to further honor their friend to consider other creative suggestions.

If the student's friends create a memorial page of their own, it is important that school personnel communicate with the students to ensure that the page includes safe messaging and accurate information. School personnel should also join any student-initiated memorial pages so that they can monitor and respond as appropriate.

### **Monitor and Respond**

To the extent possible, social media sites (including the deceased's wall or personal profile pages) should be monitored for:

- Rumors
- Information about upcoming or impromptu gatherings
- Derogatory messages about the deceased
- Messages that bully or victimize current students
- Comments indicating students who may themselves be at risk

Responses may include posting comments that dispel rumors, reinforce the connection between mental illness and suicide, and other resources for mental health care. In some cases, the appropriate response may go beyond simply posting a comment, safe message, or resource information. It may extend to notifying parents and local law enforcement about the need for security at a late-night student gathering, for example.

In some cases it may be necessary to take action against so-called trolls who may seek out memorial pages on social media sites and post deliberately offensive messages and pictures. Most sites have a report mechanism or comparable feature, which enables users to notify the site of the offensive material and request that it be removed. The administrator of the memorial page may also be able to block particular individuals from accessing the site. Because the available options vary from site to site and can evolve over time, schools are advised to contact the particular site for instructions.

The National Suicide Prevention Lifeline has developed an in-depth online postvention manual that details how to find various social media sites and other online groups, post resources, and reach out to parents. It also includes case examples and resource links and is available at <http://www.sprc.org/library/LifelineOnlinePostventionManual.pdf>.

On occasion, schools may become aware of posted messages indicating that another student may be at risk of suicide. Messages of greatest concern may suggest hopelessness or refer to plans to join the deceased student. In those instances, it may be necessary to alert the student's family and/or contact the National Suicide Prevention Lifeline to request that a crisis center follow up with the student.

### **Additional Information**

National Suicide Prevention Lifeline

Lifeline online postvention manual <http://www.sprc.org/library/LifelineOnlinePostventionManual.pdf>.

Suicide Prevention Resource Center (SPRC) Safe and effective messaging for suicide prevention (2006).

<http://www.sprc.org/library/SafeMessaging.pdf>

## **E. Talking About Suicide**

### **After a Suicide: A Toolkit for Schools (AFSP)**

#### **Give accurate information about suicide.**

Suicide is a complicated behavior. It is *not* caused by a single event such as a bad grade, an argument with parents, or the breakup of a relationship.

In most cases, suicide is caused by an underlying mental disorder like depression or substance abuse. Mental disorders affect the way people feel and prevent them from thinking clearly and rationally. Having a mental disorder is nothing to be ashamed of, and help is available.

Talking about suicide in a calm, straightforward manner does not put ideas into kids' minds.

#### **Address blaming and scapegoating.**

It is common to try to answer the question "why?" after a suicide death. Sometimes this turns into blaming others for the death.

#### **Do not focus on the method or graphic details.**

Talking in graphic detail about the method can create images that are upsetting and can increase the risk of imitative behavior by vulnerable youth.

If asked, it is okay to give basic facts about the method, but don't give graphic details or talk at length about it. The focus should be not on *how* someone killed themselves but rather on how to cope with feelings of sadness, loss, anger, etc.

"The cause of \_\_\_\_\_'s death was suicide. Suicide is most often caused by serious mental disorders like depression, combined with other complications."

"\_\_\_\_\_ was likely struggling with a mental health issue like depression or anxiety, even though it may not have been obvious to other people."

"There are treatments to help people who are having suicidal thoughts."

"Since 90 percent of people who die by suicide have a mental disorder at the time of their death, it is likely that \_\_\_\_\_ suffered from a mental disorder that affected [his/her] feelings, thoughts, and ability to think clearly and solve problems in a better way."

"Mental disorders are not something to be ashamed of, and there are very good treatments to help the symptoms go away." "The reasons that someone dies by suicide are not simple, and are related to mental disorders that get in the way of the person thinking clearly. Blaming others—or blaming the person who died—does not acknowledge the reality that the person was battling a mental disorder."

"It is tragic that he died by hanging. Let's talk about how \_\_\_\_\_'s death has affected you and ways for you to handle it."

"How can we figure out the best ways to deal with our loss and grief?"

#### **Address anger.**

Accept expressions of anger at the deceased and explain that these feelings are normal.

#### **Address feelings of responsibility.**

Reassure those who feel responsible or think they could have done something to save the deceased.

**Encourage help-seeking.**

Encourage students to seek help from a trusted adult if they or a friend are feeling depressed or suicidal.

“It is okay to feel angry. These feelings are normal and it doesn’t mean that you didn’t care about \_\_\_\_\_. You can be angry at someone’s behavior and still care deeply about that person.”

“This death is not your fault.”

“We can’t always predict someone else’s behavior.”

“We can’t control someone else’s behavior.”

“We are always here to help you through any problem, no matter what. Who are the people you would go to if you or a friend were feeling worried or depressed or had thoughts of suicide?”

“There are effective treatments to help people who have mental disorders or substance abuse problems. Suicide is never an answer.”

“This is an important time for all in our [school, team, etc.] community to support and look out for one another. If you are concerned about a friend, you need to be sure to tell a trusted adult.”

## **F. Tips For Teachers for Student Support**

1. Be honest. Before classes find out all the information you can and, according to the instructions from administration, share facts with students.
2. Give as much information as the students need to know. Cognitive and emotional development will determine how much and in what manner to share.
3. Allow time for students to express feelings, thoughts, and to ask questions. The amount of time will vary with the situation, age groups, and individual group concerns.
4. Look for signs of distress in individual students use your school's process to refer students who are of concern. It might be in small groups or individual counseling, but be sure concerned students get attention.
5. Allow time for a break or recess after discussing and sharing. In cases of a continuing crisis, remember to allow times for breaks.
6. Listen to your students' feelings.
7. Remember that everyone experiences and reacts to grief and crisis in a different way. There is no one-way to act.
8. Some students may express various religious beliefs about the death. Remind students that this is a time to honor the deceased and not a time to pass judgment. If a student seems to have a need to discuss a specific religious belief, encourage them to talk with a parent, family member, or member of the clergy.
9. In case of death, discuss ways to express sympathy with the class. This is often a first time experience for young people, and ways to express sympathy and the funeral process can be confusing. Death and crisis are a part of living, and this can be a valuable learning experience.
10. In case of the death of a classmate or teacher, it is best if the desk can be left empty to help students acknowledge the death. The same is true for a student's locker. Sometimes students are more angry if they are not given time to grieve. Removing the contents of a desk and/or locker should be left to the family. This should be arranged by the school's administrator.
11. Keep students informed. If it is an ongoing situation, let your class know any relevant information as soon as you receive it, even if it means interrupting the class occasionally.
12. In the case of the student's death, remove their name from your roster to prevent accidentally calling out their name during upcoming roll calls by you or a substitute.

### **Discussion Suggestions**

It's hard to say what we feel, but it's important to do so.

Is it OK to feel \_\_\_\_\_, since I didn't even know them?

What do I tell outsiders when they ask me, "How can you stand to go to the school?"

Is it OK for me to cry? Why are things back to normal?

Is it OK for me to be happy – I don't have strong feelings, didn't know the victims, was absent..."

**Discussion suggestions for teachers post announcement.**

I know this is very shocking to all of us. Would anyone like to share/talk about what they are feeling?

**Possible activity:** Not everyone (teachers and/or students) will be comfortable leading a discussion; if help is needed, contact your building coordinator. Direct students in distress to designated counseling room.

**CHOOSE ONE OR TWO OF THE FOLLOWING STATEMENTS. COMPLETE THE STATEMENTS BY SHARING YOUR THOUGHTS ABOUT WHAT HAPPENED. YOU MAY WRITE OR DRAW.**

**I remember when...**

**Sometimes I wanted...**

**Happy times I remember**

**I wish I told you...**

**My thoughts today are...**

**My memories are...**

**You are/were...**

**1. Options for dealing with student/class reactions.**

Allow for discussion, i.e., say “how do you feel about what I just read?”. What other concerns/needs do you have?

• **Points to consider in discussion:**

- Don't be flippant.
- Don't be excitable; emotional control is an important behavior to model.
- Don't preach; preaching can produce anger.
- Don't minimize students' reactions.
- Don't use jargon; talk in language the students understand.
- Don't expect to have all the answers to students' questions and concerns.
- Don't dramatize death.

**2. How to respond to feelings students might experience.** Take every complaint and feeling the person expresses seriously. Do not dismiss or discount the person's concerns; however, reassure the person that all perspectives need to be considered.

**3. Look for signs of emotional reactions over several days that may need attention and then refer to counselors or designated crisis center:**

- Crying/lingering sadness

- Major change in student's behavior
- Withdrawal from normal class participation
- Change in student's work/study habits
- Excessive daydreaming
- Increased absences
- Passivity in class
- Defiance, especially if this was not a problem before

**4. Some things that teachers and parents can do to help a child through.**

- Listen – Don't interrupt, he/she needs to be heard.
- Accept feelings – They are valid feelings for this student, even though your feelings may not be similar ones.
- Empathize – Let the child know that you recognize his/her sadness, confusion, anger, or whatever feelings he/she has about the tragedy.
- Reassure – The student is not responsible for what happened.
- Accept – The student may not want to talk about the trauma right away. Let him/her know you are willing to listen whenever he/she wants or needs to talk about it.
- Be tolerant of temporary changes.
- Maintain as much of a sense of routine as possible.
- Provide additional activities if the students seem to have excess energy.
- Don't hesitate to ask for help. This help can be sought from other parents, the school staff, or an outside professional.

## **F.1 Young People and Grief**

The grieving process is a normal, natural, and healing result of loss and pain is to be expected. Young people of all ages exhibit grief and reactions to grief. Guilt, anxiety, anger, fear and sadness may be universal, and the expressions of these emotions may vary from day to day. Helping a young person and yourself through this difficult time may often feel overwhelming; however, knowledge of common reactions to loss may help you recognize behavior for what it is – grieving.

### **Possible Grief Reactions:**

- Anger
- Aggression/acting out: starting fights, outbursts of temper, drop in grades, change of peer affiliation
- Explosive emotions: gentle tears, wrenching sobs, extremes in behavior
- Physiological changes: fatigue, trouble sleeping, lack of appetite, headaches, and stomach pains
- Idealization of the deceased
- Sadness/emptiness/withdrawal: overwhelmed by feelings of loss when realizes person is not coming back; feels extremely vulnerable
- Guilt/self-blame: “If only...” “Why didn’t I...?” Feels responsible for the loss; seeks self-punishment
- Disorganization: restless, unable to concentrate, uncontrollable tears, difficulty focusing
- Lack of feelings: denial; protection from pain; can be a form of numbness; may be difficult to admit and may generate guilt

### **How to Help a Young Person Experiencing Grief:**

- Use the terms “died/dead/death: rather than phrases like “passed away,” or “taken from us.” Give an honest age appropriate explanation for the person’s death, avoiding clichés or easy answers. Straightforward, gentle use of the words helps a person confront the reality of the death.
- Explain and accept that everyone has different reactions to death at different times. The reaction might not hit until the funeral or weeks later.
- Reassure the young person that his/her grief feelings are normal. There is no “right” way to react to a loss. Give permission to cry. Let them know it’s OK not to cry if the young person does not typically react in that way.
- Permit or encourage the young person to talk about the person who has died. This is a vital part of the healing process, both at the moment of loss, but especially after the funeral.
- Do not attempt to minimize the loss or take the pain away. Phrases like “Don’t worry, it will be OK,” “He/she had a good life,” or “He/she is out of pain.” are not helpful. Grief is painful. There

must be pain before there can be acceptance and healing. It is very difficult to do, but most helpful to acknowledge the person's pain and permit them to live with it without trying to take it away or make it "better."

- Encourage the young person to talk about his or her feelings. Encourage communication first with family, but also be aware of other support people such as clergy, trusted adult friends, and trusted peers. Acknowledge there are times when people need more professional help.
- LISTEN. Listen with your heart. Listening to the feelings of the young person is most important. Listen through the silences. Just being present, showing you care by your listening is more important than knowing what to say or even saying anything at all.
- Help the young person decide about attending the funeral. The funeral can be a way to say goodbye, but abide by the young person's wish and express understanding if he/she chooses not to go.

#### A Grieving Person's Needs:

- To cry
- To be held
- To talk
- To be listened to
- To feel caring around them, to be with people they care about
- To understand how others may react

## **F.2 Tips for Students in Crisis**

Remember that everyone reacts to pain and stress in different ways. Don't expect everyone to act or feel the same. Also, don't expect the pain to last the same amount of time for everyone. In the case of death, remember that friends and family will need your care and concern long after the funeral is over. Don't be afraid to ask for help if you aren't sure if you can cope. Take care of yourself. Eat well; get plenty of sleep and exercise. Try some of these ideas to help you handle stress and grief:

Talk to someone	Dance	Create something
Cry	Help someone else	Go for a walk
Write a letter	Listen to music	Draw
Ride a bike	Run	Plant something
Keep a journal	Rearrange your room	Dig in the dirt
Clean your room	Read a book	Yell at your pillow

### **Tips for Working with Upper Elementary Students in Crisis**

All of us, at some time in our lives, experience a trauma or crisis. It may occur in various forms: an earthquake, a tornado, a fire, a car accident, severe physical injury, assault, or the death of a friend or love ones. When events of this nature happen, we have what is called a grief response. No two people grieve in the same way, but the emotions or feelings are similar in everyone. Each of us grieves differently and at our own individual pace. Grieving is hard work. You may feel sad, hurt and cry a lot. Crying is okay. Your behavior may be influenced by your feelings. Here are some emotional responses that are expected and normal.

Self-pity	Easily excitable
Hostility/on edge	Fears of going crazy
Sorrow	Increased substance use
Self-doubt	Life seems out of balance
Anger/resentment	Withdrawing from friends and/or family
Numbness or shock	Nervousness, anxiety: "What will I do now?"
Tears – Lots of tears	Loneliness/depression
Disbelief	Nightmares, sleep disturbance/bad dreams
Sadness	Denial – "No...no, it can't be."
Feeling deserted	
Forgetfulness	
Asking questions – the same questions – over and over.	
Guilt – "It must be my fault. If only I hadn't said what I said. I never said, 'I love you'."	

### **F.3 Tips for Parents of Students Who Are Experiencing Crisis**

1. Keep your child informed and updated, keeping in mind the developmental and cognitive level of the child. Children need to feel involved and as in control as much as possible.
2. Watch for signs of distress. Loss of appetite, aggression, acting out, being withdrawn, sleeping disorders, and other behavior changes can indicate problems.
3. Send your child to school if possible. The stability and routine of a familiar situation will help young people feel more secure.
4. Remember that everyone reacts to stress and/or grief in different ways. There is no one way to act in a crisis situation.
5. Allow children the opportunity to express feelings. It is important to validate these feelings.
6. A good diet and plenty of exercise are important for children who are under stress. Encourage your child to eat well and get plenty of exercise.
7. Be honest about your own concerns, but stress your and your child's ability to cope with the situation.
8. Respect a child's need to grieve.
9. Provide somewhere private and quiet for your child to go.
10. Be available and listen to your child.
11. Remember to take care yourself.
12. Obtain outside help if necessary. **[See Appendix J]**

## **G. Sample Death Notification Statement for Students**

Use in small groups such as homerooms or advisories, not in assemblies or over loudspeakers.

### **Option 1-When the death is accidental (not suicide related)**

It is with great sadness that I have to tell you that one of our students, \_\_\_\_\_, passed away in an accident.

We'll do our best to give you accurate information as it becomes known to us. {Insert known details here}. We will update you with funeral arrangement information as we know more.

Each of us will react to \_\_\_\_\_'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known \_\_\_\_\_ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction.

We have counselors available to help our school community deal with this sad loss and to enable us to understand more about suicide. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.

### **Option 2 – When the death has been ruled a suicide**

It is with great sadness that I have to tell you that one of our students, \_\_\_\_\_, has taken [his/her] own life. All of us want you to know that we are here to help you in any way we can.

A suicide death presents us with many questions that we may not be able to answer right away. Rumors may begin to circulate, and we ask that you not spread rumors you may hear. We'll do our best to give you accurate information as it becomes known to us.

Suicide is a very complicated act. It is usually caused by a mental disorder such as depression, which can prevent a person from thinking clearly about his or her problems and how to solve them. Sometimes these disorders are not identified or noticed; in other cases, a person with a disorder will show obvious symptoms or signs. One thing is certain: there are treatments that can help. Suicide should never, ever be an option.

Each of us will react to \_\_\_\_\_'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known \_\_\_\_\_ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction.

We have counselors available to help our school community deal with this sad loss and to enable us to understand more about suicide. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.

### **Option 3 – When the cause of death is unconfirmed**

It is with great sadness that I have to tell you that one of our students, \_\_\_\_\_, has died. All of us want you to know that we are here to help you in any way we can.

The cause of death has not yet been determined by the authorities. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we ask

that you not spread rumors since they may turn out to be inaccurate and can be deeply hurtful and unfair to \_\_\_\_\_ as well as [his/her] family and friends. We'll do our best to give you accurate information as it becomes known to us.

Each of us will react to \_\_\_\_\_'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known \_\_\_\_\_ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction. We have counselors available to help our school community deal with this sad loss. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.

# H. PREPaRE Handouts

## WS2 Handout 15 (Slide 77): Psychological Triage Summary Sheet

(Confidential, for School Crisis Team use only)



School Crisis  
Prevention and  
Intervention  
Training  
Curriculum



Date	Name	Teacher	Risk Rating <sup>a</sup>	Risk Category <sup>b</sup>	Crisis Intervener	Parental Contact <sup>c</sup>	Status <sup>d</sup>
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							

Note. Adapted from *Preparing for Crises in the Schools* (2nd ed., p. 168), by S. E. Brock et al., 2001, New York, NY: Wiley. Adapted with permission.  
<sup>a</sup>Record initial risk screening rating from the *Primary Risk Screening* form.  
<sup>b</sup>Record the risk category or categories that are likely to have caused psychological trauma. Category codes: V = victim; I = directly involved; W = witness; F = familiarity with victim(s); MI = preexisting mental illness; Dim = developmental immaturity; TH = trauma history; R = lack of resources; Em = severe emotional reactions; PT = perceived threat.  
<sup>c</sup>Record information regarding parental contact. Parental contact codes: SM = attended school meeting; HV = home visit; Ph = phone contact.  
<sup>d</sup>Record information regarding the current need for crisis intervention services and support. Status codes: A = active (currently being seen); W/C = watch and consult (not currently being seen); F1 = needs follow-up; I/A = inactive (not being seen and no follow-up is judged to be needed); PT = community-based psychotherapeutic treatment referral (immediate crisis intervention not sufficient).

## H.



School Crisis  
Prevention and  
Intervention  
Training  
Curriculum



## WS2 Handout 19 (Slide 100): Sample Psychoeducational Informational Document

### Identifying Severely Traumatized Children: Tips for Parents and Educators

Following exposure to crisis events (such as natural disasters, acts of violence, and the death of a friend or family member), it is not unusual for children to display symptoms of acute distress, such as shock, crying, anger, confusion, fear, sadness, grief, and pessimism. In most cases these reactions are temporary and gradually lessen in the days and weeks following the event. However, there are instances where these reactions are part of more severe emotional trauma. How adults react to a crisis can have a significant effect on how traumatized children become. It is very important that adults remain calm and reassuring to the extent possible. This handout describes how to identify severely traumatized children so as to better ensure they get timely access to the professional counseling they will require.

Exposure to a traumatic event alone is not necessarily sufficient to seriously traumatize a child. Rather, it is a consequence of *how* the child experienced the crisis that results in severe emotional distress. It is helpful for adults to understand both the risk factors involved and the specific reactions to the traumatic event that signal the need for referral to a mental health professional.

### The Child's Trauma Experience

How traumatic an event is for a given child is the result of an interaction between the event and the child's personal crisis experiences. Quite simply, if a child views the event as threatening, then the greater is the likelihood that the child will be traumatized. These threat perceptions are determined and influenced by (1) the nature of the crisis event itself, (2) crisis exposure, (3) relationships with crisis victims, (4) adult reactions to the trauma, and (5) a variety of individual vulnerability factors.

1. **Crisis event.** Some traumatic events are more threatening than others. Severe emotional trauma is more likely to occur following events that are intentional human-caused acts of aggression (vs. accidents or natural disasters) and those that occur suddenly and unexpectedly, have particularly devastating consequences (e.g., involve fatalities), have relatively long durations, and are intense.
2. **Exposure.** The closer a child is to the location of a crisis event, and the longer his or her exposure, the greater the likelihood of the child viewing the event as personally threatening. Thus, children who are physically closer to a terrorist attack, a school shooting, or a natural disaster are at greater risk than children who were far away during the traumatic event.
3. **Relationships.** Having relationships with the victims of a crisis (i.e., those who were killed, injured, and/or threatened) is associated with an increased chance of viewing the event as threatening. The stronger the child's relationships with the victims, the greater the likelihood of severe distress. Children who lost a caregiver or immediate family member are most at risk.
4. **Adult reactions.** Particularly among younger children, threat perceptions are influenced by adult behaviors and reactions to the crisis event. Events that initially are not viewed as threatening or frightening may become so after the child observes the panic reactions of parents or teachers. Sensationalized media reports can also influence how frightening a child views an event to be.
5. **Individual vulnerability.** Personal experiences and characteristics can also influence perceptions of a crisis event threat. These include the following:
  - a. **Family factors.** Children who are not living with their families, have been exposed to family violence, have a family history of mental illness, or have caregivers who are severely distressed by the disaster are more likely themselves to be severely distressed.

4340 East West Highway, Suite 402, Bethesda, MD 20814, (301) 657-0270, [www.nasponline.org](http://www.nasponline.org)

- b. **Social factors.** Children who must face a disaster without supportive and nurturing friends or relatives suffer more than those who have at least one source of such support.
- c. **Mental health.** The child who had mental health problems (such as depression or anxiety disorders) before experiencing a traumatic event will be more likely to be severely distressed by a traumatic event.
- d. **Developmental level.** Although young children, in some respects, may be protected from the emotional impact of traumatic events (because they don't recognize the threat), once they perceive a situation as threatening, younger children are more likely to experience severe stress reactions than older children and adolescents.
- e. **Previous trauma experience.** Children who have experienced previous threatening or frightening events are more likely to experience severe reactions to a subsequent disaster event, such as severe psychological distress.

### Symptoms of Severe Emotional Trauma

The presence of the risk factors described above will signal the need to be more vigilant for the symptoms of severe emotional trauma. While some initial symptoms are to be expected following a crisis event, several reactions signal the need for referral to a mental health professional:

1. **Acute initial reactions.** Severe reactions during the crisis (e.g., becoming hysterical or panicking).
2. **Increased arousal.** Difficulty falling or staying asleep, being irritable or quick to anger, having difficulty concentrating, and easily startling.
3. **Avoidance of crisis reminders and a lack of emotion.** Avoiding all activities that serve as reminders of the trauma, withdrawal from other people, difficulty feeling positive emotions.
4. **Maladaptive coping.** Potentially harmful coping behaviors (e.g., drug or alcohol use, severe aggression).

These reactions are especially concerning if they interfere with daily functioning (for example, they result in the child not being able to play with friends or go to school) and if they are long lasting (that is, they do not begin to lessen a week or more following the event).

It is important to note that symptoms can be delayed, particularly in the case of ongoing or extended trauma experiences such as war or loss of home and community as the result of a disaster. Additionally, experiencing a traumatic event can put children at higher risk for severe trauma reaction to a future crisis event.

### The Signs That Help Is Needed

Parents and other significant adults can help reduce potentially severe psychological effects of a traumatic event by being observant of children who might be at greater risk and getting them help immediately. The mental health service providers who are part of the school system—school psychologists, social workers, and counselors—can help teachers, administrators, and parents identify children in need of extra help and can also help identify appropriate referral resources in the community. Distinguishing “normal” from extreme reactions to trauma requires training, and any concern about a child should be referred to a mental health professional.

For additional information about the signs and symptoms of severe emotional trauma in children and adolescents, please refer to the National Center for PTSD at the following website: [http://www.ncptsd.org/facts/specific/fs\\_children.html](http://www.ncptsd.org/facts/specific/fs_children.html) or the National Association of School Psychologists [www.nasponline.org](http://www.nasponline.org).

*Note.* Adapted from *School Crisis Prevention and Intervention: The PREP@RE Model* (pp. 127–148), by S. E. Brock et al., 2009, Bethesda, MD: National Association of School Psychologists. Adapted with permission.

I.



School Crisis  
Prevention and  
Intervention  
Training  
Curriculum



## WS2 Handout 34 (Slide 161): Interview or Focus Group Questions Used to Evaluate the Process of Crisis Response and Recovery Implementation

1. Which interventions were the most successful and why?
2. What were the positive aspects of staff crisis response debriefings and why?
3. What immediate response and longer-term recovery strategies would you change and why?
4. Do other professionals need to help with future crises?
5. What additional training is necessary to prepare for future crises?
6. What additional equipment is needed to support immediate response and longer-term recovery efforts?
7. What other planning actions will facilitate future immediate response and longer-term recovery efforts?

*Note.* From *School Crisis Prevention and Intervention: The PREP&RE Model* (pp. 263), by S. E. Brock et al., 2009, Bethesda, MD: National Association of School Psychologists. Reprinted with permission.

4340 East West Highway, Suite 402, Bethesda, MD 20814, (301) 657-0270, [www.nasponline.org](http://www.nasponline.org)

**J. District Emergency Contacts (by building)**

**Building Response Team: 2015-2016**

**Building:** Elementary

The Building Response Team will be chaired by the Principal of the building at which the incident occurs, his/her designee, or the designated Incident Commander.

**Team members:**

\_\_\_\_\_

Chairperson:

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Name:** \_\_\_\_\_

School Phone ext. \_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Building Response Team: 2015-2016**

**Building: Middle School**

The Building Response Team will be chaired by the Principal of the building at which the incident occurs, his/her designee, or the designated Incident Commander.

**Team members:**

**Name:** \_\_\_\_\_

Home phone: \_\_\_\_\_

Chairperson: \_\_\_\_\_

School Phone ext. \_\_\_\_\_

Cell phone: \_\_\_\_\_

**Building Response Team: 2015-2016**

**Building: Somerset High School**

The Building Response Team will be chaired by the Principal of the building at which the incident occurs, his/her designee, or the designated Incident Commander.

**Team members:**

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

Chairperson:  
School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

**Name:** \_\_\_\_\_  
Home phone: \_\_\_\_\_

School Phone ext.  
Cell phone:

K.

**Local Mental Health Services and Resources**

**Advocacy and Support Groups and Classes Re: Mental Illness**

- NAMI- National Alliance for Mental Illness
- St. Croix Affiliate (Contact: Denise Hackel) (FREE) 715-639-2078
- Pierce County Human Services (Ellsworth)(IS, MA, MC,SF) 715-273-6766
- St. Croix County Human Services 715-246-8445  
(New Richmond) (IS, MA, MC, SF)

**Alcohol, Drugs & Other Addictions (AODA)**

- Alano Society of New Richmond (New Richmond) (Free) 715-246-4912
- Burkwood, Inc. (Burkhardt) (IS, MA) 715-386-6125
- Hudson Alano Club (Hudson) (Free) 715-386-2932
- Hudson Hospital & Clinic Programs for Change 715-531-6755  
(Hudson/New Richmond)(IS, MA, MC, FA)
- Kinnic Falls Alcohol & Drug Abuse Services (River Falls) (IS,MA) 715-426-5950
- Midwest Psychological Services (Hudson) (IS,MA,MC,SF,SA) 715-381-1980
- Pierce County Human Services (Ellsworth)(IS, MA, MC, SF) 715-273-6766
- St. Croix County Human Services 715-246-8445  
(New Richmond) (IS, MA, MC, SF)

**Mental Health Counseling Services**

- Adulteen Counseling, (River Falls) (IS,SF) 715-410-5822
- Boorman Counseling (Baldwin) (IS) 715-977-2441
- Catherine C. Olson Counseling (Hammond) (IS, MA, SF) 651-269-0924
- Couples and Family Therapy Clinic (Hudson) (IS, SF) 715-441-1828
- Family Innovations (Balsam Lake/Hudson) (Most Insurances, MA,SF) 715-808-0607
- Family Means (Hudson) (IS, MA, MC, SF) 715-386-2066
- Family Therapy Associates (New Richmond) (IS, MA, AF) 715-246-4840
- Hudson Counseling Services (Hudson) (Most Insurances, IS, MA, C) 715-531-6760
- Loretta Henson (River Falls) (IS, MA, MC) 715-426-4967
- Living Hope Christian Counseling (Baldwin) (FA) 715-688-3333
- Marriage and Family Health Services (Hudson) (IS) 715-381-5437
- Michael J. Moller (Hudson) (IS) 715-386-0856
- Midwest Psychological Services (Hudson) (IS, MA, MC, SF, FA) 715-381-1980
- Northwest Counseling Services-Baldwin Medical Center 715-684-6777  
(Baldwin) (IS, MA, MC, SF, FA)
- Pierce County Human Services (Ellsworth) (IS, MA, MC, SF) 715-273-6766
- Riverside Clinic & Consulting Psychology (Prescott) (IS, MN, MA, MC) 715- 262-5559
- St. Croix County Human Services (New Richmond) (IS, MA, MC, SF) 715-246-8445
- Valley Counseling & Clinical Psychology (Hudson) (IS, MA, SF) 715-386-0320
- Youth Service Bureau (Hudson) (IS, MA, SF) 715-781-0490

**Psychiatric Services**

- Hudson Hospital Specialty Clinics (Hudson)(IS,MA,MC, FA) 715-531-6700  
(Referrals from Hudson Physicians, Programs for Change and Hudson Hospital Speciality Clinics Only)
- Midwest Psychological Services (Hudson)(IS,MA, MC, SF, FA) 715-381-1980
- Northwest Counseling Services-Baldwin Area Medical Center 715-684-6777  
(Baldwin) (IS, MA, MC, SF, FA)

- Pierce County Human Services (Ellsworth) (IS, MA, MC, FA) 715-273-6766
- River Falls Medical Clinic (River Falls) (IS, MA, MC,) 715-425-6701

**Local Mental Health Services and Resources**

- St. Croix County Human Services (New Richmond) (IS, MA, MC, SF) 715-246-8445

**Psychological Testing**

- Croix Counseling & Psychology (Hudson) (IS, MA, SF) C, P 715-377-0000
- Family Therapy Associates (New Richmond) (IS, MA, SF) C, P 715-246-4840
- Michael J. Moller (Hudson) (IS) P 715-386-0856
- Midwest Psychological Services (Hudson) (IS, MA, MC, SF) N, C, P 715-381-1980
- Northwest Counseling Services - Baldwin Area Medical Center (Baldwin) (IS, MA, MC, SF, FA) N, C, P 715-684-6777
- Riverside Clinic & Consulting Psychology (Prescott) (IS, MA, MC, SF) P 715-262-5559
- St. Croix County Human Services (New Richmond) (IS, MA, MC, SF) C, P 715-246-8445

**Veterans Mental Health Services**

- Call your Veterans' Service Officer for referral

**Payment Source Key:**

- IS Private insurance and/or self pay
- MA Medical Assistance (Badger Care, Medicaid, Benchmark)
- MC Medicare
- SF Sliding fee
- FA Financial Assistance

**Assessment Key:**

- N Neuropsychological
- C Court ordered
- P Psychological

**Crisis Services**

- For those that are not connected to a Mental Health provider dial 911, ask to speak with a Behavioral Health on-call worker and dispatch will connect you with a telephone crisis worker.
- For those connected with a Mental Health provider, each provider is responsible for providing their own crisis services to the clients they serve. Please contact your provider.
- National Suicide Lifeline 800-273-8255
- St. Croix Valley Sexual Assault Response Team (SART) (River Falls) 715-425-6443
- (SART Toll Free) 877-572-6313