



COLORADO

School Safety Resource Center

Department of Public Safety

CSSRC Crisis Response Guidelines for K-12 Schools and Institutions of Higher Education (IHEs)

March 2022

INTRODUCTION

Before the COVID-19 epidemic hit the country in 2020, John McDonald from Jeffco Public Schools and the DeAngelis Foundation and Chris Harms, Director of the Colorado School Safety Resource Center (CSSRC) met and discussed the need to capture lessons learned from Colorado school tragedies in an effort to prepare others for the possibility of one of these events.

The CSSRC then recruited K-12 school security experts, mental health providers, and experienced crisis responders to create the Statewide Crisis Response Working Group. The Working Group then created two committees. The first committee reviewed training models and the second committee gathered materials on lessons learned from previous events. Unfortunately, the COVID-19 pandemic slowed the progress of this group but by December of 2021 a draft of the Crisis Guidelines for K-12 Schools was well underway.

Then Greg Busch, Emergency Manager for the Colorado Community College System and Brad Stiles, Emergency Management Outreach Consultant for CSSRC realized that Mr. Busch was considering a similar project for institutions of higher education. It was decided to combine efforts and recruit professionals from Colorado colleges and universities to the Working Group.

In February 2022, the Working Group reviewed and approved the Guidelines for Crisis Response for K-12 and Institutions of Higher Education.

These Guidelines do not replace district and IHE's Emergency Operations Plans (EOPs) but are an effort to help K-12 and institutions of higher education prepare for such large-scale emergencies, assist during the events, and provide suggestions to help in the aftermath.

No two crises are the same and therefore it is impossible to anticipate all situations. However, knowing what worked previously and what educators had wished were in place before an emergency, can help others before tragedy strikes.

The Colorado School Safety Resource Center wants to thank members of the Working Group for their time and expertise in creating these Guidelines. We hope that Colorado schools and institutions of higher education will find them helpful. This is a living document and the CSSRC will continue to add and refine the information.

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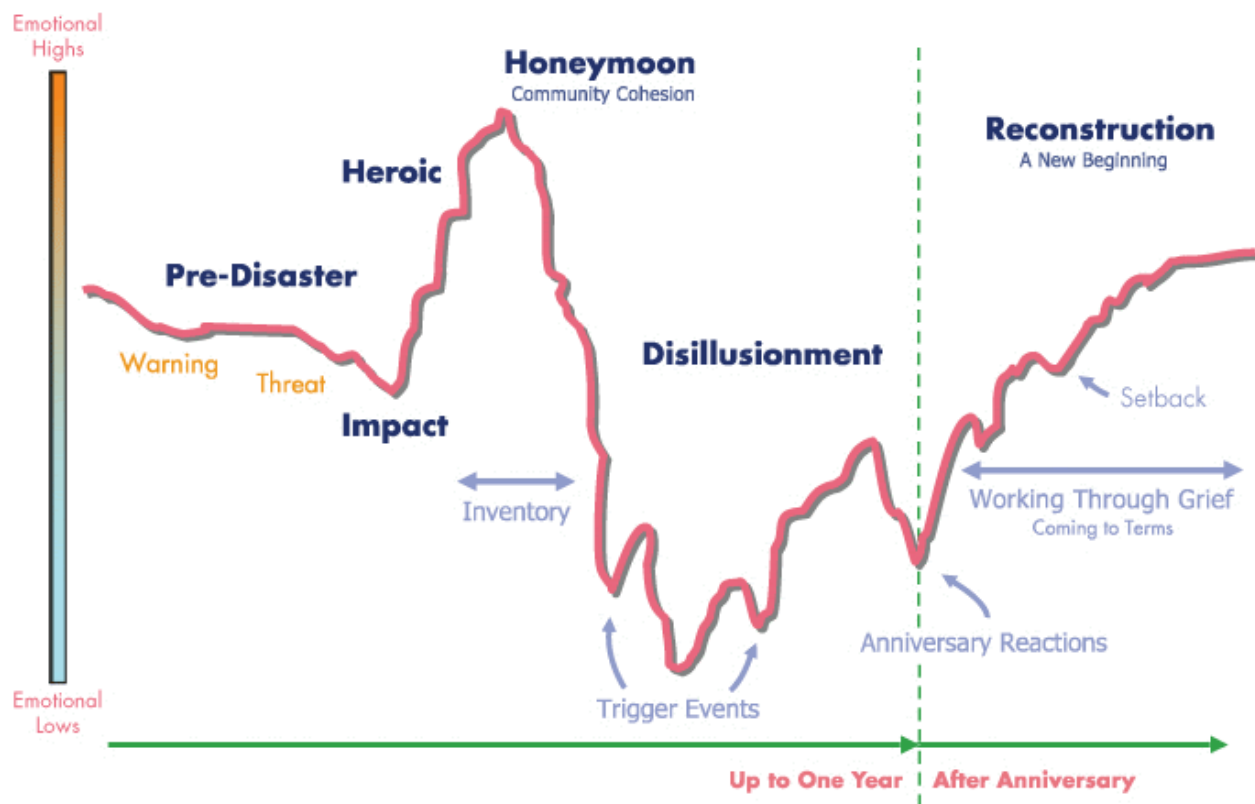
We gratefully acknowledge the following documents, which contributed to these Guidelines:

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- Idaho State Board of Education School Safety And Security Program, September 9, 2021. [Rigby Middle School Post-Incident Review Report](#).
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Life Cycle of a Disaster



Phase 1, the **pre-disaster phase**, is characterized by fear and uncertainty. The specific reactions a community experiences depend on the type of disaster. Disasters with no warning can cause feelings of vulnerability and lack of security; fears of future, unpredicted tragedies; and a sense of loss of control or the loss of the ability to protect yourself and your family. On the other hand, disasters with warnings can cause guilt or self-blame for failure to heed the warnings. The pre-disaster phase may be as short as hours, or even minutes, such as during a terrorist attack, or it may be as long as several months, such as during a hurricane season.

Phase 2, the **impact phase**, is characterized by a range of intense emotional reactions. As with the pre-disaster phase, the specific reactions also depend on the type of disaster that is occurring. Slow, low threat disasters have psychological effects that are different from those of rapid, dangerous disasters. As a result, these reactions can range from shock to overt panic. Initial confusion and disbelief typically are followed by a focus on self-preservation and family protection. The impact phase is usually the shortest of the six phases of disaster.

Phase 3, the **heroic phase**, is characterized by a high level of activity with a low level of productivity. During this phase, there is a sense of altruism, and many community members exhibit adrenaline-induced rescue behavior. As a result, risk assessment may be impaired. The heroic phase often passes quickly into phase

Phase 4, the **honeymoon phase**, is characterized by a dramatic shift in emotion. During the honeymoon phase, disaster assistance is readily available. Community bonding occurs. Optimism exists that everything will return to normal quickly. As a result, numerous opportunities are available for providers and organizations to establish and build rapport with affected people and groups, and for them to build relationships with stakeholders. The honeymoon phase typically lasts only a few weeks.

Phase 5, the **disillusionment phase**, is a stark contrast to the honeymoon phase. During the disillusionment phase, communities and individuals realize the limits of disaster assistance. As optimism turns to discouragement and stress continues to take a toll, negative reactions, such as physical exhaustion or substance use, may begin to surface. The increasing gap between need and assistance leads to feelings of abandonment. Especially as the larger community returns to business as usual, there may be an increased demand for services, as individuals and communities become ready to accept support. The disillusionment phase can last months and even years. It is often extended by one or more trigger events, usually including the anniversary of the disaster.

Phase 6, the **reconstruction phase**, is characterized by an overall feeling of recovery. Individuals and communities begin to assume responsibility for rebuilding their lives, and people adjust to a new “normal” while continuing to grieve losses. The reconstruction phase often begins around the anniversary of the disaster and may continue for some time beyond that. Following catastrophic events, the reconstruction phase may last for years.

The image and the explanation are adapted from Zunin & Myers as cited in DeWolf (2000), Training Manual for Mental Health and Human Service Workers in Major Disasters (2nd ed., HHS Publication No. ADM 90-538), Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services. This image is in the public domain and was retrieved from the Substance Abuse and Mental Health Services Administration.

Figure 1

Preparing for a Crisis

All K-12 districts and university campuses must have updated Emergency Operations Plans (EOPs). Best practice is to update your EOPs annually and include items not found in these Guidelines such as additional prevention strategies to avoid any large-scale emergencies.

It is important to coordinate between district and school safety teams to determine how district incident response plans intersect with school-specific plans. District and school administrators should work together to review and exercise response procedures to clarify roles and means of communication during and after a response.

Review and Update your EOP including Threat Annexes on a Yearly Basis

The following documents are recommended for a complete description of the purpose and structure of K-12 Schools and IHE EOPs.

K-12 Schools: Guide to Developing High-Quality School Emergency Operations Plans

<https://www.fema.gov/sites/default/files/2020-07/guide-developing-school-emergency-operations-plans.pdf>

IHEs: Guide to Developing High-Quality Emergency Operations Plans for Institutions of Higher Education

https://rems.ed.gov/docs/IHE_Guide_508C.pdf

- Under the Clery Act, Institutions of Higher Education have the following mandates: “(g) Emergency response and evacuation procedures. An institution must include a statement of policy regarding its emergency response and evacuation procedures in the annual security report.”
- The Guide to Developing High Quality EOPs also suggests campuses: “Post key information throughout the campus such as evacuation routes and shelter-in-place procedures and locations. Be sure information concerning evacuation routes and shelter-in place procedures and locations is effectively communicated to students and staff such as by distributing materials by email in an accessible format.”

Identify and Train Your Safety Teams

K-12 Schools

- Identify School Safety Team Members & School Crisis Team Members (and alternates). These should include administrators, mental health professionals, facility personnel, nurses and anyone else with emergency expertise or responsibility.
 - School & District Safety/ICS Team: Leadership groups that manage the overall incident logistics, interagency partnerships, communications, budget decisions, etc.
 - Mental Health Crisis Responders: Trained mental health responders who provide psychological triage, mental health interventions, family support, groups, etc.
 - Multiagency Crisis Planning Team: Local emergency manager, law enforcement, fire and EMS representatives, human resources, victim's advocates, health professionals, etc.

FEMA minimum courses (more suggested courses are listed in the Appendix)

- ICS 100.C – Introduction to Incident Command System
<https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c>
- ICS 362.A – Multi-Hazard Emergency Planning for Schools
<https://training.fema.gov/is/courseoverview.aspx?code=IS-362.a>

- School staff and local emergency responders should meet and train in the Incident Command System before a crisis occurs. Include victim advocates as part of this training.
- Identify and train the K-12 school psychological crisis team members. For small K-12 districts, consider training with neighboring districts, BOCES members and community mental health providers.

- PREPaRE Training for K-12 mental health staff
 - Published and trained by the National Association of School Psychologists. The Colorado School Safety Resource Center (CSSRC) can assist any district in getting their mental health providers trained in PREPaRE.
 - Workshop One, Comprehensive School Safety Planning Prevention Through Recovery: This one-day workshop addresses critical components needed to develop, exercise and evaluate safety and crisis teams and plans and conduct building vulnerability assessments.
 - Workshop Two, Mental Health Crisis Interventions. Responding to an Acute Traumatic Stressor in Schools: This two- day workshop develops the knowledge and skills required to provide immediate mental health crisis interventions to the students, staff, and school community members who have been exposed to an acute traumatic stressor.
 - Train the Trainer Workshop 1: This 1.5 day workshop provides participants with the information and practice needed to become a trainer of PREPaRE Workshop One.
 - Train the Trainer Workshop 2: This two- day workshop provides participants with the information and practice needed to become a trainer of PREPaRE Workshop Two.
- The Working Group advises that school mental health providers receive this training and that the individual tasked with leading the psychological response (Mental Health Incident Commander or MHIC) to an event **always** be PREPaRE trained.
- Previous events suggest that the mental health response during and following an incident is more effective when led by a trained school/district mental health provider rather than relying on an outside professional to lead the response. School and district staff know the culture, know and are known by students and staff, and are aware of the resources available. Certainly trained professionals from outside the district can be called upon for additional support but should take direction from the local leaders in charge of the mental health response.
- If school mental health staff have not yet had the opportunity to be PREPaRE trained, the CSSRC has an online course, [Preparing for an Off-Campus Event](#), which would prove helpful until staff complete a PREPaRE training.

All K-12 School Staff Training

- Prior to an event:
 - [Psychological First Aid for Educators \(PFA/Educators\)](#) – The Colorado Department of Public Health and Environment (CDPHE) conducts these classes for any schools in Colorado
 - 2.5 Hours
 - Provided free from CDPHE
- Prior to returning to classes teachers should be trained to support traumatized students. This workshop and materials from CDPHE would provide that knowledge for staff:
 - [Engage-Calm-Distract](#)
 - 90 minutes
 - Provides school staff with skills and strategies to calm students.
 - CDPHE staff can train any school staff at no-charge.

Additionally, mental health staff should be trained in suicide assessment models such as Livingworks' [ASIST](#). All staff training in gatekeeper suicide workshops are also recommended such as Livingworks' [SafeTALK](#) and [QPR](#).

IHEs

Identify core planning teams for IHE, which should include representatives from across the college/university including individuals from: academic affairs, business office, central administration, counseling and mental health services, environmental health & safety, facilities & operations, food services, health services, human resources, information technology, legal counsel, public information office, public safety, residential life, student affairs, transportation and the international student services office.

FEMA minimum courses (more suggested courses are listed in the Appendix)

- ICS 100.C – Introduction to Incident Command System
<https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c>
- ICS 363 - Introduction to Emergency Management for Higher Education
<https://training.fema.gov/is/courseoverview.aspx?code=IS-363>

College/university staff and local emergency responders should meet and understand how the Incident Command System will inform their roles as well as the roles of their partners during a critical incident or large event including victim advocates. Here is one possible [Sample organizational chart for an emergency management team in higher ed vs. an incident command team, although this is not the only model for how this type of event may be organized.](#) Train in the Incident Command System before a crisis occurs.

- Identify and train staff in a crisis response model. The mental health lead for the campus should definitely be trained in a model that gives them the tools to create the recovery strategy for the campus and to lead the psychological recovery team.
Some suggested crisis response models:
 - *International Critical Incident Stress Foundation (ICISF)*. “Certification in CISM: The CCISM Certification, offered by UMBC’s (University of Maryland, Baltimore County) Department of Emergency Health Services through its Professional and Continuing Education (PACE) program, is the world’s first university-based certification in the field of Critical Incident Stress Management (CISM) and psychological crisis intervention.”
<https://icisf.org/>
 - *NOVA: Crisis Response Program*. “A NOVA Crisis Response Team is a group of individuals specifically trained to provide trauma mitigation, education and emotional first aid in the aftermath of a critical incident, either small-scale or mass-casualty. NOVA CRT™ members each have a minimum of twenty-four hours of skill-based, field-tested training. Most teams have extensive training and experience in the widest range of traumatic events, from mass shootings to natural disasters.
<https://www.trynova.org/crisis-response-program/overview/>
- Identify and train staff in a Psychological First Aid (PFA) model. PFA is designed to mitigate acute psychological distress and assess the need for continued care.
Some suggested PFA models:
 - *National Child Traumatic Stress Network & the National Center for PTSD - Psychological First Aid (PFA) and Skills for Psychological Recovery (SPR)*. “While grounded in the same foundations of disaster response and recovery, there are several differences between PFA and SPR. PFA is a supportive intervention for use in the immediate aftermath of disasters and terrorism. SPR is used in the weeks and months following disaster and trauma, after the period where PFA has been utilized or when more intensive intervention is needed.”
<https://www.nctsn.org/treatments-and-practices/psychological-first-aid-and-skills-for-psychological-recovery>

- *Johns Hopkins' RAPID model.* "PFA is a learned skill, and now health care professionals, educators, employee assistance professionals, first responders, and lay people can attend a 2-day training workshop to learn the Johns Hopkins RAPID model of Psychological First Aid. The RAPID model is unique in that it consists of a platform solidly grounded in evidence-informed and empirically-based components designed to address the needs of individuals in acute distress, while at the same time enhancing organizational and community resilience."
<https://publichealth.jhu.edu/academics/johns-hopkins-rapid-psychological-first-aid>
- *International Center for Functional Resilience's Six C's Model of PFA.* "The Six Cs model was developed by ICFR co-founder, Dr. Moshe Farchi. The Six Cs is an acronym that represents the model's six intervention principles: Communication, Commitment, Cognition, Continuity, Control and Challenge. Each principle offers several behavioral and verbal techniques to reduce stress responses, restore self-efficacy and return the person's ability to function during emergency situations and times of heightened stress."
<https://www.icfr.co.il/the-six-cs-model#:~:text=Moshe%20Farchi.,%2C%20Continuity%2C%20Control%20and%20Challenge>
- *Gerard Jacob's Community-Based Psychological First Aid Model.* "Gerard Jacobs has developed this community-based method of delivering PFA over 20 years and has taught it in over 30 countries. Along with the easy-to-follow method, Jacobs includes examples of how this works in action in different situations, and presents scenarios to practice. Unique in its approach of community engagement to train community members to help each other, this guide is an excellent resource for local emergency managers to engage in whole community emergency management."
<https://www.elsevier.com/books/community-based-psychological-first-aid/jacobs/978-0-12-804292-2>

Create MOUs that Comply with FERPA

K-12 Schools

Create MOUs with surrounding districts that would offer assistance and with community partners – law enforcement, EMS, community mental health agencies, potential evacuation and reunification sites. For more information on [FERPA please use this link.](#)

IHEs

Create MOUs with local and state emergency management agencies, emergency responders, community mental health services and campus personnel.

[Please find sample MOUs here.](#)

Law Enforcement Interviews of Minor Students

- One challenging aspect of a response is balancing the intersection of a criminal investigation and the mental health recovery. Districts will want to have clear guidelines about this before an event occurs. Please check with your legal counsel on students and parents' rights when police are conducting an investigation. Law enforcement agencies often seek access to interview students and staff as soon as possible, including at a reunification or crisis counseling center or on the first day of return to the building, or at other school activities.
- It is important to provide balance and allow those impacted to have an opportunity to connect, receive mental health support and re-enter a building without having to immediately answer questions from investigators. It can be helpful to create a "flow" in which students and staff can have time to receive support, connect with others and then those who need to be interviewed can be referred to investigators.

- It is also critical to give students, staff and parents the opportunity to consider how and what they want to share with investigators and to have a parent present when a juvenile is interviewed. (In some incidents, parents and students have expressed that they were told parent permission was not needed to be interviewed as a “witness” but then the questioning felt like they were being interviewed as a possible “suspect” or “accomplice”.)
- If an investigator comes to the school to interview someone in the weeks and months after an incident, it is important to have plans for supporting them (and notifying parents) as it may bring up strong emotional reactions.
- Victim’s advocates often also want lists of victims and even a list of all students and staff in the school. It is important for agencies to communicate closely throughout this process, considering carefully how contact lists might be shared and to coordinate ongoing response and outreach to individuals and families.

Conduct Drills & Exercises Based on Identified Threats & Hazards

K-12 Schools:

- Schedule and practice all response actions (NOTE: Schools in Colorado are required to have their first fire drill within 10 days of the start of school and one every 30 days thereafter.)
- Create and drill individual plans for each student or staff with special emergency procedure needs (e.g., evacuation, lockdown, shelter, reunification, etc.).
- Review & practice communication and reunification plans
- Involve emergency responders when and where possible in exercises
- Utilize tabletop exercises to verify plans and train staff
- Team with school district administrators to execute unified command exercises with schools and community partners (first responders)
- Conduct after-action reviews and make changes based on results

IHEs:

- Schedule and practice all exercise types (NOTE: IHE’s that are subject to the Clery Act are required to test their “emergency response and evacuation procedures” on at least an annual basis.)
- Create and drill individual plans for each student or staff with special emergency procedure needs (e.g., evacuation, lockdown, shelter, reunification, etc.)
- Review and practice communication plans
- Include emergency responders
- Include K-12 school staff with concurrently enrolled students on campus
- Train students and staff in an agreed upon response method (e.g. Run, Hide, Fight)
- Include additional stakeholders such as community organizations
- Communicate information in advance to avoid concern and confusion
- Exercise under both ideal and non-ideal circumstances
- Be consistent with terminology
- Conduct after-action reviews and make changes as necessary

Communication Plan

In many of the school and campus tragedies, communication is cited most often as the component that needed improvement. This might have been communication with emergency responders, staff and students and sometimes parents/guardians and families. Be sure communications' systems before, during and after the event are well-tuned and well-trained.

K-12 Schools

- Have a communications plan to contact emergency responders and authorize appropriate staff to do so including calling 911.
 - Keep all contact information up to date and staff trained in how to use the system.
 - The plan will address before, during and after an emergency to notify staff, faculty, students, families and the media using multiple modalities, and in consideration of different language needs or accommodations, including effective communication with individuals with disabilities and others with access and functional needs, such as those who may have hearing or vision impairments.
 - Include consideration of any language differences in the school community. Identify potential interpreters and have written communications translated ahead of time as appropriate.
 - Identify the Public Information Officer and train others as to what information they can/cannot share with the media.
 - Have a plan to track students, faculty, staff, or visitors transported to another location for care or shelter, including hospitals.
 - Be sure all staff/faculty know who is authorized to speak for the district.
 - Be prepared for the rapid spread of information and misinformation.
 - Have someone sending out messages approved by Incident Command via social media including Twitter, SnapChat and the school/district website.

IHEs

- Know how the IHE's communications system integrates into the local disaster response communications network (e.g., fire department, law enforcement agency). Also, know how the IHE will communicate with community partners in accordance with pre-established agreements (e.g., memoranda of understanding).
 - Have a communications plan to contact emergency responders and authorize appropriate staff to do so.
 - Keep all contact information up to date and staff trained in how to use the system.
 - Identify the Public Information Officer and train others as to what information they can/cannot share with the media.
 - The plan will address before, during and after an emergency to notify staff, faculty, students, families and the media using multiple modalities, and in consideration of different language needs or accommodations, including effective communication with individuals with disabilities and others with access and functional needs, such as those who may have hearing or vision impairments.
 - Include consideration of any language differences in the school community. Identify potential interpreters and have written communications translated ahead of time as appropriate.
 - Have a plan to track students, faculty, staff, or visitors transported to another location for care or shelter, including hospitals.
 - Be sure all staff/faculty know who is authorized to speak for the university.
 - Include plans for notifications to families of international students.
 - Be prepared for the rapid spread of information and misinformation.

- Have someone sending out messages approved by Incident Command via social media including Twitter, SnapChat and the school/district website.

Continuity of Operations Plan

All operational functions (e.g. payroll, classes, stipends, transportation, food service) should have a plan in the event their normal operations/services are interrupted. This includes backing up all computer systems at alternate locations - if this is not possible consider other methods of maintaining/accessing important records.

- Develop a Continuity of Operations Plan (COOP) for all operational functions (e.g. payroll, classes, stipends, transportation, food service). Backup all computer systems at alternate locations - if this is not possible consider other methods of maintaining/accessing important records.

Incident Facilities/Alternate Sites

K-12 Schools

- Identify:
 - Incident Command Post
 - Parent reunification sites
 - Media staging area
 - Evacuation sites - Be sure external evacuation/reunification sites comply with fire codes and that staff at those sites are aware of your needs
 - Safe Haven/Psychological Recovery Drop-In Center
 - Community centers for ongoing community support
 - Alternate sites for educational activities if the building(s) are uninhabitable

IHEs

- Identify:
 - Incident Command Post
 - Concurrently enrolled students' reunification site
 - Family reunification sites
 - Media staging area
 - Evacuation sites - Be sure external evacuation/reunification sites comply with fire codes and that staff at those sites are aware of your needs
 - Safe Haven/Psychological Recovery Drop-In Center
 - Community centers for ongoing community support
 - Alternate facilities where institutional activities can be conducted if the building(s) are uninhabitable or lack of access to existing facilities

School Community Considerations for EOP Planning

Student, Faculty and Staff Considerations

K-12

- All school staff are given permission to initiate emergency response actions. Additionally, give staff permission to contact emergency responders.
- Be sure all students, faculty and staff are aware of emergency procedures including substitutes that might be in the building.

- Consider specific messaging to concurrently enrolled students and staff in the event of an emergency while on the college campus. Consider providing these students and their parents with an information sheet, detailing what is expected of them and what this process will look like when they are not at their K-12 school during an emergency.
- Consider having classroom teachers paired for support. This will allow you to utilize staff members in response activities, such as accompanying injured students to the hospital or setting up the reunification process.
- Consider training bus drivers about evacuation/reunification sites. Explain how they will know when to take students there instead of to the usual drop-off sites.
- Compile a list of staff members trained in first aid, CPR, AED usage, [Stop the Bleed](#) and other medical experience.

IHEs

- All faculty and staff are given permission to initiate emergency response actions. Additionally, give staff permission to contact emergency responders.
- Be sure all students, faculty and staff are aware of emergency procedures including adjunct staff not on campus full-time.
- Develop plans for concurrently enrolled students.
 - Coordination on returning concurrently enrolled students to their K-12 district is vital. Specific plans regarding evacuation, assembly, accounting for and transporting these students should be a priority.
 - Consider providing these students and their parents with an information sheet, detailing what is expected of them and what this process will look like.
- Coordination on returning concurrently enrolled students to their K-12 district is vital. Specific plans regarding evacuation, assembly, accounting for and transporting these students should be a priority.
- Compile a list of staff members trained in first aid, CPR, AED usage, [Stop the Bleed](#) and other medical experience.

Parent, Guardian and Family Considerations

K-12

- Have parents/guardians complete emergency contact information on at least a yearly basis. Encourage parents to include numerous contacts who can pick up their student during an emergency.
- Alert parents/guardians as to emergency procedures. Be prepared to communicate in multiple ways during an emergency (via email, text, phone, mass media, etc.)
- If possible, conduct a reunification practice session with parents/guardians
- Ensure effective communication with those that have language barriers or need other accommodations, such as sign language interpreters for family members who have a hearing impairment.
- Consider the cultural and ethnic backgrounds of families in your community when planning for emergency communications and utilizing places of worship. Some faiths prohibit followers from entering other houses of worship so discuss these issues with representatives from the faith communities and utilize alternatives, if necessary.

IHEs

- Inform families of the emergency procedures
- Have a designated family reception and assistance area
- Have a system for quick notification of families of international students

- Ensure effective communication with those that have language barriers or need other accommodations, such as sign language interpreters for family members who have a hearing impairment.
- Consider emergency actions if your institution has onsite daycare facilities, summer camps on campus or concurrently enrolled students on campus.
- Consider utilizing a hotline system for all students (especially concurrently enrolled students) to contact and provide identifying information and their location, in the event of self-evaluation.
- Consider adding risk & safety information to student/family contracts and agreements.
- Consider evaluating if K-12 school/districts have adequate reunification processes viable enough to support the institution's process.

Impromptu Memorial Sites' Considerations

K-12 Schools

- Having a policy approved by the school board prior to any critical event is preferable.
- Permanent memorials on school grounds are discouraged as they may cause ongoing trauma reactions from students and staff and/or contagion effects.
- Memorials should be comparable no matter who the student or staff member is who has died or what the circumstances are of the death.
- Often prevention programs, scholarships or other positive campaigns make suitable memorials.

IHEs

- Campus authorities should create policies as to how to handle commemorations, memorial activities, or permanent markers and/or memorial structures (if any will be allowed).
- This should include decisions as to when a commemoration site will be closed, what will be done with notes and tributes, and how students will be informed in advance.
- Memorials should strike a balance among honoring the loss, resuming IHE and class routines and schedules, and maintaining hope for the future.
- Often prevention programs, scholarships or other positive campaigns make suitable memorials.

Resources to Prepare Ahead of Time

K-12

- Method to designate volunteers: vests, name tags or other – having the role the volunteer will perform on the identification item will be most useful
- Signs for locating Incident Command Post, Parent/Guardian Reunification Center and any other designated areas
 - Materials for parent/guardian reunification: <https://iloveguys.org/>
- Schools should have a method for identifying and referring students of concern. If using the PREPaRE curriculum, a copy of the Risk Screening Form (Brock, 2016) will be available to those schools.
- [After a Suicide: A Toolkit for Schools](#) by the American Association of Suicide Prevention.
- Create a resource list of mental health services within your community and across the state. In rural communities, it will be necessary to think outside the box for mental health resources. Inventory what services are available in the community:
 - Colorado Crisis Services – <https://coloradocrisisservices.org/>
 - Safe2Tell – <https://safe2tell.org/>
 - Your community mental health center. A list can be found here: <https://cdhs.colorado.gov/behavioral-health/find-behavioral-health-help>

- Trevor Project - <https://www.thetrevorproject.org/explore/>
- Trans Lifeline - <https://translifeline.org/about/>
- Disaster Distress Helpline - <https://www.samhsa.gov/find-help/disaster-distress-helpline>
- Victim services through local law enforcement
- Community nonprofit organizations
- Private providers
- State agencies: [Colorado Crisis Education and Response Network](#) at the Colorado Department of Public Health & Environment. They can contact the [Colorado Society of School Psychologist Crisis Response Team](#) as well.
- School- and Community-based counselors from neighboring communities
- State and national victim assistance programs including the [Colorado Organization for Victim Assistance](#). They can help with recruiting assistance outside of Colorado, if necessary.
- National experts – The [National Center for School Crisis and Bereavement](#) have assisted Colorado schools and agencies in the past.
- Specialists in post-traumatic stress such as the [National Child Traumatic Stress Network](#).
- Create a file of handouts for parents and other caregivers to help their children through crisis. NASP has many of these publicly available on their website. (<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/>). Some examples are linked below. Have these available in the languages necessary for the school population.
 - **Talking to Children About Violence**
<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/school-violence-resources/talking-to-children-about-violence-tips-for-parents-and-teachers>
 - **Supporting Students Experiencing Childhood Trauma**
<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/mental-health-resources/trauma/supporting-students-experiencing-childhood-trauma-tips-for-parents-and-educators>
 - **Addressing Grief**
<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/mental-health-resources/addressing-grief>
 - **Supporting Children’s Mental Health**
<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/mental-health/prevention-and-wellness-promotion/supporting-childrens-mental-health-tips-for-parents-and-educators>

IHEs

- Method to designate volunteers: vests, name tags or other – having the role the volunteer will perform on the identification item will be most useful
- Signs for locating Incident Command Post, Family Reception & Assistance Area and any other designated areas
- Campuses should have a method for identifying and referring students of concern.
- [Postvention: A Guide for Suicide Response on College Campuses](#)
- Create a resource list of mental health services within your community and across the state. In rural communities, it will be necessary to think outside the box for mental health resources. Inventory what services are available in the community
 - Colorado Crisis Services – <https://coloradocrisiservices.org/>

- Safe2Tell – <https://safe2tell.org/>
- Your community mental health center. A list can be found here: <https://cdhs.colorado.gov/behavioral-health/find-behavioral-health-help>
- Trevor Project - <https://www.thetrevorproject.org/explore/>
- Trans Lifeline - <https://translifeline.org/about/>
- Disaster Distress Helpline - <https://www.samhsa.gov/find-help/disaster-distress-helpline>
- JED Foundation - <https://jedfoundation.org/>
- Victim services through local law enforcement
- Community nonprofit organizations
- Private providers
- State agencies: [Colorado Crisis Education and Response Network](#) at the Colorado Department of Public Health & Environment. They can contact the [Colorado Society of School Psychologist crisis response team](#) as well.
- School- and Community-based counselors from neighboring communities
- State and national victim assistance programs including the [Colorado Office for Victim Assistance](#). They can help with recruiting assistance outside of Colorado, if necessary.
- National experts – The [National Center for School Crisis and Bereavement](#) have assisted Colorado schools and agencies in the past.
- Specialists in post-traumatic stress such as the [National Child Traumatic Stress Network](#).
- Create a file of handouts for students, families and other caregivers to help survivors through crisis. Some examples are linked below. Have these available in the languages necessary for the school population.
- Student assistance - <https://store.samhsa.gov/product/tips-college-students-after-disaster-or-other-trauma-r-u-survivor-disaster-or-other-trauma>
- Other SAMHSA resources - <https://store.samhsa.gov/sites/default/files/d7/priv/dtac11-catalog.pdf>
- National Center for School Mental Health: <https://www.schoolmentalhealth.org/media/SOM/Microsites/NCSMH/Documents/Resources/Natural-Disasters-Resource-Doc-9.11.20.pdf>
- American Counseling Association: <https://www.counseling.org/knowledge-center/mental-health-resources/trauma-disaster>
- Tips for Talking with Survivors of Sexual Assault [RAINN](#)

During an Emergency

Rely on the Incident Command System

Emergency responders will utilize the Incident Command Structure during a large event. The following suggestions will underscore steps that should be considered in your EOP.

Once the **Incident Commander** becomes aware of an emergency and they accept command, they should establish an Incident Command Post. Determine the best way to maintain connectivity with the Incident Commander. In some situations, the school or university may share unified command during the emergency. The Incident Commander decides on necessary response procedures, if actions have not already been undertaken or are being completed including but not limited to evacuation, shelter in place, and/or reunification.

K-12 Schools

- First witnesses or impacted staff initiate emergency response actions.
- Contact emergency responders when safe to do so.
- Decide if outside assistance is needed and if so, instruct the Communications **Coordinator** to accomplish this task.
- Decide on the need to secure any crime scene until law enforcement arrives.
- If there is a need to perform reunification, assign a location for reunification and notify the **Reunification & Transportation Coordinators** to begin their processes.
- **Logistics Team Leader** and designated team members secure the building(s) and coordinate supplies and equipment.
- **Operations Team Leader** and designated team members notify the following Coordinators to initiate their tasks or activities as needed:
 - **Medical Coordinator**
 - Secures all necessary medications for students, if evacuated
 - Sets up medical staging area and/or triage areas as needed
 - **Transportation Coordinator** and designated team members coordinate the assembly and transport of students as necessary
 - **Student/Staff Communications Coordinator**
 - Notifies central administration and feeder/surrounding schools as needed
 - Contacts District PIO to coordinate family/community communications
 - Mobilizes resources for spoken language and ASL translation - as well as written emergency signs - as needed for non-English speaking and hard of hearing staff and families
 - **Student Care and Recovery Coordinator**
 - Confirms that all students have been accounted for
 - Works with the Student/Guardian Reunification Coordinator to begin the reunification process
 - **Student and Parent/Guardian Reunification Coordinator**
 - Upon notification that reunification will be needed, these team members proceed to the identified site, begin setup and prepare to receive students
 - If possible, request assistance from community law enforcement
 - Sets up a confidential space for parent notifications of student injury or death, if necessary
 - Obtains rosters of students at the reunification site
 - Documents the times that students are released and to whom

- **Recovery (Psychological Recovery Team) Coordinator** - this is the Mental Health Incident Commander (MHIC) and as stated above, should be PREPaRE trained and a strong leader to organize the psychological recovery for students and staff.
 - Creates information for parents and community via website, Twitter, emails and/or parent letters, after coordination with communications team and PIO. Ideally this communication is prepared ahead of time and is available in all necessary languages.
 - Crisis team members are available at the reunification site to provide comfort and support to students and parents.
 - Begins outreach to district level crisis team and external partners
 - Begins plans for ongoing recovery efforts as needed (see next section)
- **Special Needs Coordinator** - Establish staging areas for staff to assist emergency response plans for students with special needs, including provisions of augmentative equipment/supplies.
- **Volunteers - Operations Leader** designates a space for volunteers and decides on the roles they may/may not play in assisting. Identify volunteers as decided by the school – vests, badges, etc. Escort all others out of the area, by law enforcement if necessary.

IHEs

- First witnesses or impacted faculty/staff initiate emergency response actions.
- Contact emergency responders when safe to do so.
- Once the **Incident Commander** becomes aware of an emergency, or they accept command, they should establish an Incident Command Post.
 - Incident Commander decides on necessary response procedures, if actions have not already been undertaken or are being completed: evacuation, shelter in place, and/or reunification.
 - Implement procedures to reunite concurrently enrolled students with K-12 district personnel for reunification with parents/guardians.
- Decide if outside assistance is needed and if so, instruct the **Communications Coordinator** to accomplish this task.
- Decide on the need to secure any crime scene until law enforcement arrives.
- If there is a need to perform reunification, assign a location for reunification and notify the **Reunification & Transportation Coordinators** to begin their processes.
- **Logistics Team Leader** and designated team members secure the building(s) and coordinate supplies and equipment.
- **Operations Team Leader** and designated team members notify the following Coordinators to initiate their tasks or activities as needed:
 - **Medical Coordinator**
 - Sets up medical staging area and/or triage areas as needed
 - **Transportation Coordinator** and designated team members coordinate the assembly and transport of students.
 - **Student/Staff Communications Coordinator**
 - Notifies central administration and feeder/surrounding campuses as needed
 - Contacts university PIO to coordinate family/community communications
 - Mobilizes resources for spoken language and ASL translation - as well as written emergency signs - as needed for non-English speaking and hard of hearing students, staff, and families
 - **Student Care and Recovery Coordinator**
 - Confirms that all students have been accounted for

- Works with the Student/Family Reunification Coordinator to begin the reunification process for high school students
- **Student/Family Reunification Coordinator**
 - Upon notification that reunification will be needed, these team members proceed to the identified site, begin setup and prepare to receive students.
 - If possible, request assistance from community law enforcement.
 - The IHE is responsible for immediate lifesaving actions during an emergency, for all students and staff. The K-12 district has the responsibility to reunite high school students with parent/guardians after an emergency. Coordination on returning concurrently-enrolled students to their K12 district is vital.
 - Sets up a confidential space for parent notifications, if necessary
 - Obtains rosters of students at the reunification site
 - Documents the times that high students are released and to whom
 - Documents notifications made to families about any of their students hospitalized or fatally wounded.
- **Recovery (Psychological Recovery Team) Coordinator** - this is the Mental Health Incident Commander (MHIC) and as stated above, should be trained in crisis response and a strong leader to organize the psychological recovery for students and staff.
 - Creates information for families and community via website, Twitter, emails and/or parent letters, after coordination with communications team and PIO. Ideally this communication is prepared ahead of time and is available in all necessary languages.
 - Crisis team members are available at the reunification site to provide comfort and support to students and family members.
 - Begins outreach to university level crisis team and external partners
 - Begins plans for ongoing recovery efforts as needed (*see next section*)
- **Special Needs Coordinator**
 - Establish staging areas for staff to assist emergency response plans for students with special needs, including provisions of augmentative equipment/supplies
 - **Volunteers - Operations Leader** designates a space for volunteers and decides on the roles they may/may not play in assisting. Identify volunteers as decided by the IHE – vests, badges, etc. Escort all others out of the area, by law enforcement if necessary.

Additional Emergency Considerations for IHEs with Other Students on Campus

- Consider how emergency actions may change if your institution has onsite daycare facilities or summer camps on campus. In addition, how these actions change if concurrently enrolled students are using these facilities.
- Consider utilizing a hotline system for all students (especially concurrently enrolled students) to contact and provide identifying information and their location, in the event of self-evacuation.
- Consider adding risk & safety info to student/family contracts and agreements.
- Consider evaluating if K-12 school/district has adequate reunification processes, viable enough to support the institution's process.

Recognizing that these guidelines may be utilized by rural districts, the committee has included an organizational chart for a Smaller School Example where the roles listed above have been consolidated so that a smaller staff can carry out the functions.

School Incident Command Team (ICS) System - Smaller School Example

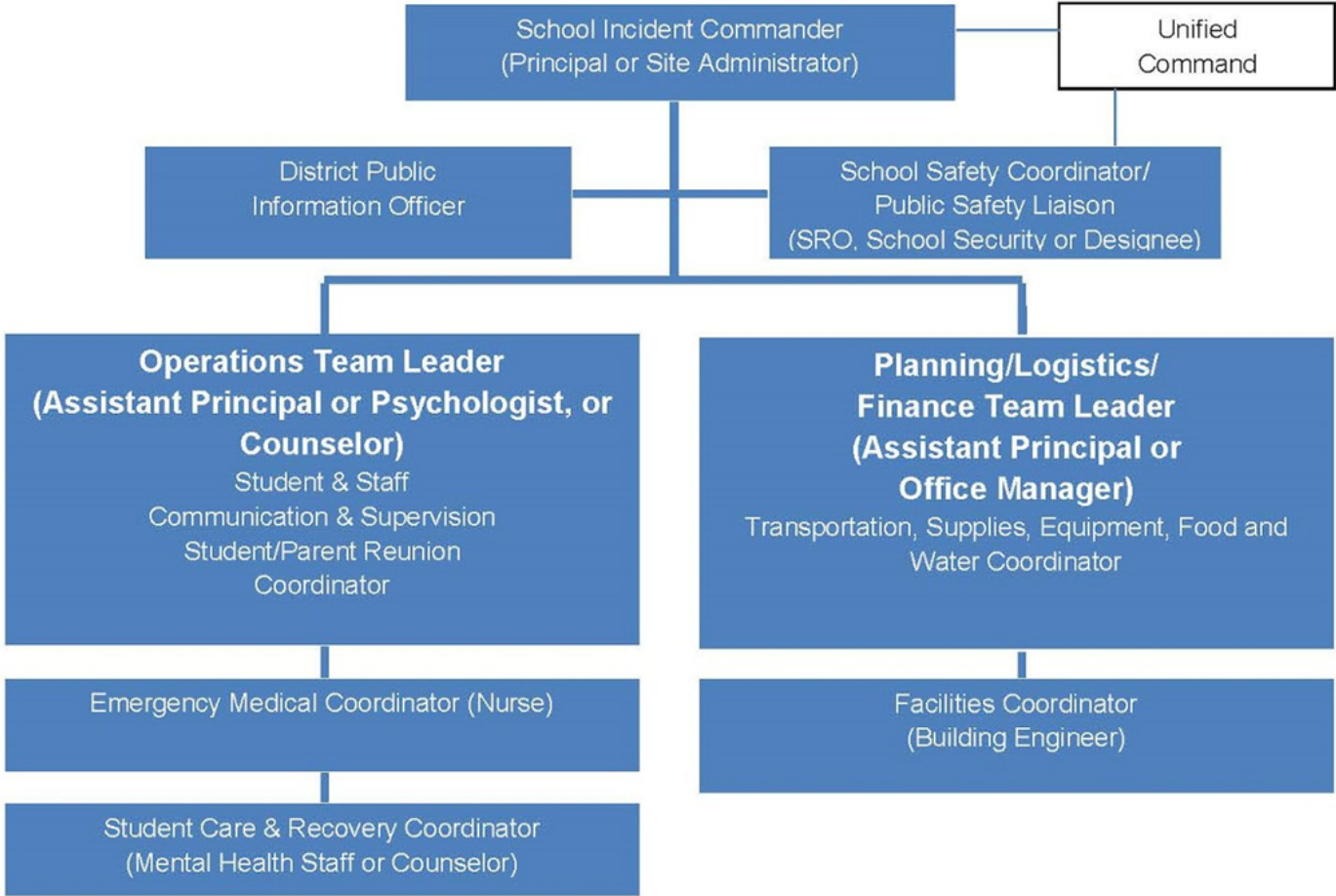


Figure 2

IHE Incident Command Sample

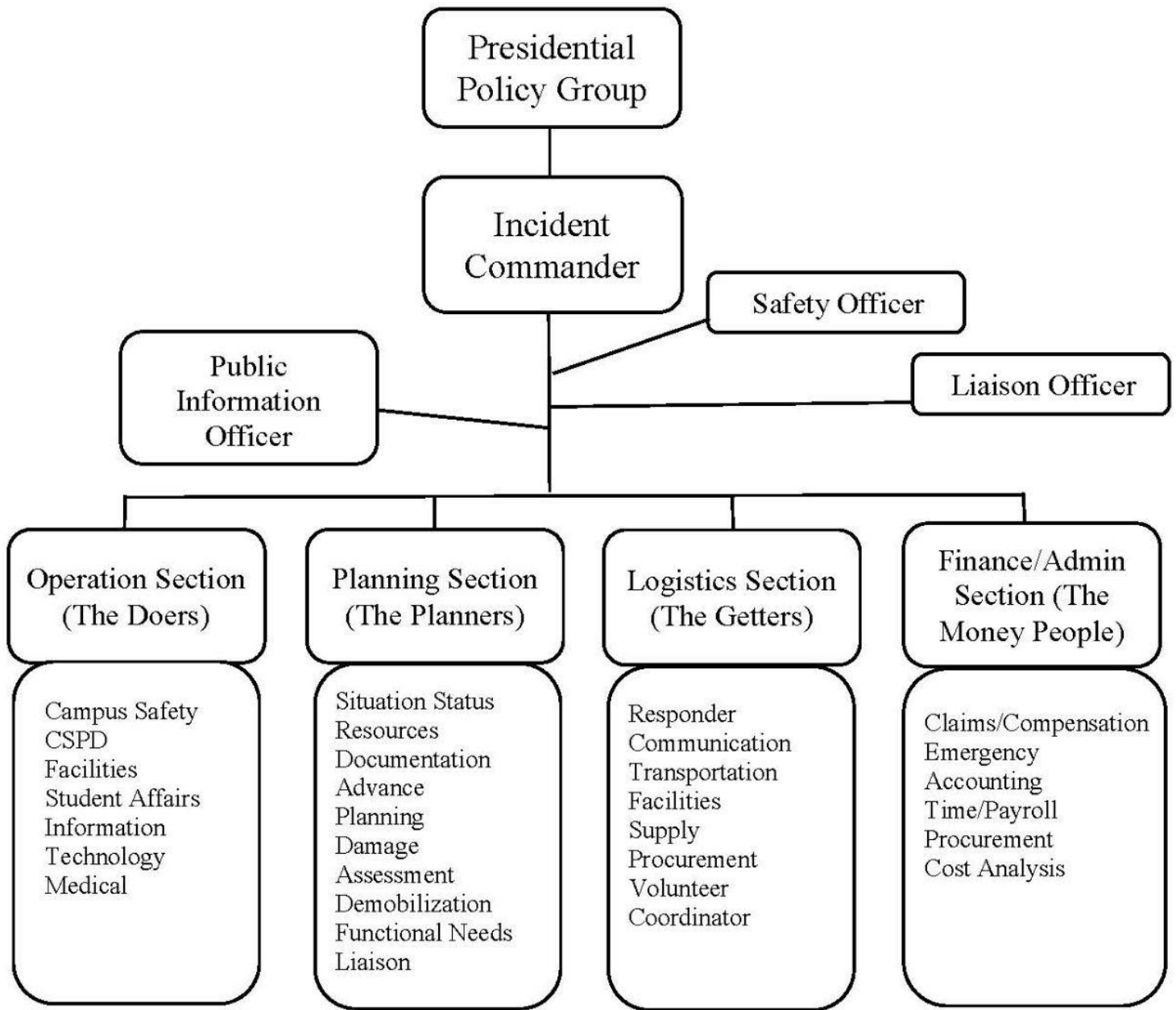


Figure 3

Santos, M., 2017-2018 p.17

Day One (Day of the Crisis)

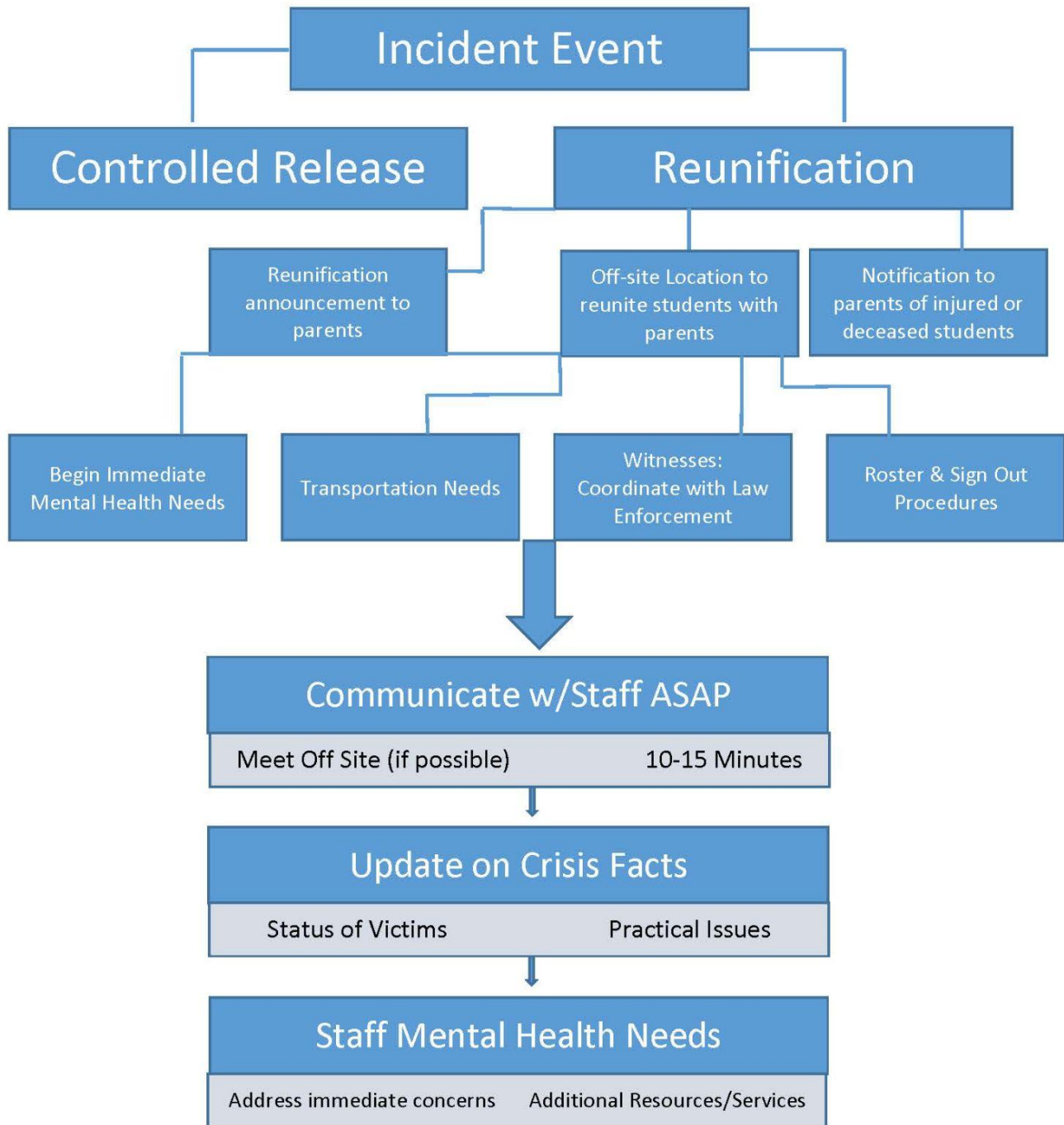


Figure 4

Crepeau-Hobson et al, 2020

After a Critical Event

Immediately

K-12

- Assuming all students have been accounted for and reunited with parents/guardians, conduct a follow-up meeting of all those that responded at the end of the first day. Be sure all staff have been accounted for as well.
 - Update the crisis response group on any new information not yet shared.
 - Report students and staff identified as at-risk to the Mental Health Incident Commander for follow-up.
 - The NOVA model purports that there are three tasks essential to restoring pre-crisis levels of functioning. “These include safety and security which involves connecting individuals with their loved ones and ensuring a sense of control (SS). Ventilation and validation which involves providing the opportunity to tell their story while validating their feelings and reactions as normal (VV). Finally, prediction and preparation which entails crisis responders anticipating future issues and reactions to help individuals and communities prepare for these (PP). The CSSP Crisis Response Team model suggests a fourth task of empathy and empowerment. This empathy can be displayed by attending to the needs of staff, students and the community. Empowerment is accomplished by promoting activities that give participants a sense of efficacy and self-worth (EE).”
 - Plan for the following day even if school will not be in-session:
 - Provide information for school staff either for the first evening or in a staff meeting prior to the opening of school the next day.
 - If there has been a death, gather the belongings and all work created by the deceased, as these will go to the family at an appropriate time.
 - Provide a script for school staff for announcements to the students. Conduct these announcements in individual classrooms and not in a large group setting.
 - Provide a brief refresher to educators as to what to expect from students and give them tools to support students from the [Engage-Calm-Distract training](#).
 - Secure substitutes for teaching staff that will be unable to complete their regular duties.
 - Provide a script for the school’s front desk, as this person will receive a plethora of calls and could easily be exhausted without a short, consistent message to anyone who calls the school including parents and the media.
 - Consider availability of additional mental health providers: district, victim advocates, community mental health center, state crisis support teams, etc.
 - Make contact with mental health providers and give assignments for the following days.
 - Plan a “safe haven/drop-in center” for either the school or the community, depending upon the scale of the event. You may need more than one location. If possible, staff this with trained mental health professionals from outside the school, as the school mental health professionals will have the task of continuing support after additional assistance is no longer present. The school’s crisis team members may also be affected by the event. Having this available the day after the event gives students and community members a place to process their feelings away from the media.
 - Determine supplies needed: water, tissues, food, name tags, stress reduction manipulatives such as squeeze balls and art supplies.
 - It is preferable to have smaller rooms within the safe haven so that mental health providers can triage those attending and separate individuals or groups of people depending upon their physical and/or emotional proximity to the event and participants’ needs.
-

- Decide upon triage procedures and triage lists immediately: those who have close proximity to the event and/or to the people involved—staff, students, family members and others. Google sheets can be very helpful but be careful to limit access only to those necessary.
- Get class lists so you know where students were during the event and who had the most exposure. Be ready to support the friends of the victim(s) and any perpetrator(s).
- If students or staff have been hospitalized, a district person should go to be a liaison and guide people to the safe haven, if needed.
- Cell service and websites may be down. Get an extra wireless booster, if possible.
- Prepare a letter for parents/guardians to include information about the incident and available support being provided to students. Send this home with a list of resources for parents. Funeral arrangements will follow when confirmed. Provide translated communications to non-English speaking families as needed.
- If the event will likely affect the community, set-up a 24-hour hotline. If necessary, one may be for people needing help and one for people offering help. Community partners could handle this for the school.
- Designate someone(s) to coordinate volunteers and donations. Both need to be documented.
- Contact parent group leaders (PTA, Accountability) to brief them on the aftercare plan.
- Prepare documents for volunteers that will be assisting the next day (s) at school: list of expectations, maps of the site, school bell schedule, food and restroom facts and other pertinent information that strangers in the building would need.
- Police can often supply a fact sheet about the incident. This is important for all those responding so they can base their responses on accurate information.
- Plan a system for documenting all services provided and those attending.
- If the school is a crime scene, staff and students may not be permitted to re-enter the building for a significant amount of time. Transportation for those unable to access their cars will be necessary.
- It is important that expenses be carefully documented with all receipts maintained, as federal and state agencies will not reimburse without receipts.

IHEs

- Assuming all students and staff have been accounted for and are safe, conduct a follow-up meeting of all those that responded at the end of the first day.
- Update the crisis response group on any new information not yet shared.
- Report students and staff identified as at-risk to the Mental Health Incident Commander for follow-up.
- The NOVA model purports that there are three tasks essential to restoring pre-crisis levels of functioning. “These include safety and security which involves connecting individuals with their loved ones and ensuring a sense of control (SS). Ventilation and validation which involves providing the opportunity to tell their story while validating their feelings and reactions as normal (VV). Finally, prediction and preparation which entails crisis responders anticipating future issues and reactions to help individuals and communities prepare for these (PP). The CSSP Crisis Response Team model suggests a fourth task of empathy and empowerment. This empathy can be displayed by attending to the needs of staff, students and the community. Empowerment is accomplished by promoting activities that give participants a sense of efficacy and self-worth (EE).”
- Plan for the following day, even if classes will not be in-session. (See chart on p. 25)
 - Provide information for faculty/staff either for the first evening or in a staff meeting prior to the opening of classes the next day.

- If there has been a death, gather the belongings and all documents created by the deceased as these will go to the family, at an appropriate time.
- Provide information to all students in a number of methods including information on how to obtain mental health support.
- Make arrangements for faculty unable to complete their regular duties.
- Provide a script for the campus information desk, as these people will receive a plethora of calls and could easily be exhausted without a short, consistent message to anyone who calls the school including families and the media.
- Consider availability of additional mental health providers: from other campuses, victim advocates, community mental health centers, state crisis support teams, etc.
- Make contact with mental health providers and give assignments for the following days.
- Plan a “safe haven/drop-in center” for either the school or the community, depending upon the scale of the event. You may need more than one location. If possible, staff this with trained mental health professionals from outside the campus, as the campus mental health professionals will have the task of continuing support after additional assistance is no longer present. The campus’ crisis team members may also be affected by the event. Having this available the day after the event gives students and community members a place to process their feelings away from the media.
- Determine supplies needed: water, tissues, food, name tags, stress reduction manipulatives such as squeeze balls and art supplies.
- It is preferable to have smaller rooms within the safe haven so that mental health providers can triage those attending and separate individuals or groups of people depending upon their physical and/or emotional proximity to the event and participants’ needs.
- Decide upon triage procedures and triage lists immediately: those who have close proximity to the event and/or to the people involved—staff, students, family members and others. Google sheets can be very helpful but be careful to limit access only to those necessary.
- Get rosters so you know where students were during the event and who had the most exposure. Be ready to support the friends of the victim(s) and any perpetrator(s).
- If students or staff have been hospitalized, a university official should go to be a liaison and guide people to the safe haven, if needed.
- Cell service and websites may be down. Get an extra wireless booster, if possible.
- Prepare a letter for students and families to include information about the incident and support being provided on campus. Mail this home with a list of resources for families. Funeral arrangements will follow when confirmed. Provide translated communications to non-English speaking families as needed.
- If the event will likely affect the community, set-up a 24-hour hotline. If necessary, one may be for people needing help and one for people offering help. Community partners could handle this for the school.
- Designate someone(s) to coordinate volunteers and donations. Both need to be documented.
- Prepare documents for volunteers that will be assisting the next day (s) on campus: list of expectations, maps of the site, class schedule, food and restroom facts and other pertinent information that strangers on campus would need.
- Police can often supply a fact sheet about the incident. This is important for all those responding so they can base their responses on accurate information.
- Plan a system for documenting all services provided and those attending.
- If the campus is a crime scene, staff and students may not be permitted to re-enter the building(s) for a significant amount of time. Transportation for those unable to access their cars will be necessary. Additional housing may be necessary as well.

- It is important that expenses be carefully documented with all receipts maintained as federal and state agencies will not reimburse without receipts.

Day One: MH Planning



Figure 5

Crepeau-Hobson et al, 2020

Ongoing Crisis Support

K-12

No two crises are the same so flexibility in responding is essential. This is one of the reasons that having an experienced Mental Health Incident Commander (MHIC) organizing the response is vital or at least advising the district's MHIC. Likewise, individuals will respond very differently and many will not need crisis support beyond reunification with family and basic psychoeducation. However, providing a multi-tiered system of supports is an effective means of meeting these varying needs. Therefore, the crisis team must be prepared to offer a continuum of support to meet the range of needs. (Crepeau-Hobson 2020).

- **Universal supports** are provided to the entire community and include safe havens, open houses, classroom discussions and activities, psychoeducation for families and school staff in the form of handouts and informational bulletins, etc.
- **Targeted supports** include individual or small group interventions led by mental health providers or trained professionals, accommodations to support individual students or staff needs, providing individual family resources/supports, etc.
- **Indicated interventions** are only for individuals who need more intensive and long-term support that cannot be provided in the school setting (Brock et al, 2016).

In previous critical events, survivors discussed a wide-range of responses. These are normal and people should be reassured that they may have no trauma reaction, feel dysregulated immediately or may not have a reaction for days, weeks or months after the initial event. Likewise, the anniversary of the event can generate a negative response. All of these reactions are “normal.” However, mental health supports need to be available for the long-term for those who need it. Services should be available with no judgment as to an individual's need for further support.

- The safe haven should remain open for as long as the school or community is utilizing the services. Ideally, the safe haven should at least remain open until any funerals resulting from the incident have concluded.
- Assessment of psychological trauma risk throughout the response is essential, as crisis intervention should only be offered when there is a demonstrated need.
- Additional resources are identified for those needing more intensive and long-term support.
- A follow-up meeting should occur at the end of each day to update responders, capture at-risk students and staff for follow-up and plan the next day.
- If the school is a crime scene, communication between law enforcement and the crisis team will allow the mental health staff to prepare the students and staff for the consequences of this. Belongings such as phones, IDs and laptops may not be available for a considerable amount of time. Property may have been damaged, and warning individuals of this ahead of time can lessen the impact.
- Alerting students and staff to upsetting messages from the event that will likely still be on cell phones will be necessary. It is advised that they listen to the messages with a trusted adult.
- The crisis team will be focused on supporting students and staff while assisting in returning the school to education. If the school was a crime scene, an open house the day before students return for education offers an opportunity for students and parents to come back to the building and regain a sense of comfort and safety. Mental health providers on hand can support the returning students and staff.
- When the students are returning for regular classes, additional mental health professionals should be on hand to support both students and staff.
- If a student has died because of the event, having a mental health provider follow that student's schedule to offer an opportunity for each class to process the event and the absence of their peer is recommended.
- Consider a website to provide immediate, up-to-date information for the short- and long-term. Perhaps a neighboring district could assist with this.

- Support for all first responders and crisis team members is also important. Care for the caregiver should be a priority.
- Ongoing communication between all the agencies involved is vital to build trust and cohesion. Initially, calls may need to happen daily and eventually weekly until it is no longer necessary.

IHEs:

No two crises are the same, so flexibility in responding is essential. This is one of the reasons that having an experienced Mental Health Incident Commander (MHIC) organizing the response is vital or at least advising the campus MHIC. Likewise, individuals will respond very differently and many will not need crisis support beyond reunification with family and basic psychoeducation. However, providing a multi-tiered system of supports is an effective means of meeting these varying needs. Therefore, the crisis team must be prepared to offer a continuum of support to meet the range of needs. (Crepeau-Hobson 2020).

- **Universal supports** are provided to the entire community and include safe havens, open houses, classroom discussions and activities, psychoeducation for students, families and faculty/staff in the form of handouts and informational bulletins, etc.
- **Targeted supports** include individual or small group interventions led by mental health providers or trained professionals, accommodations to support individual students or staff needs, providing individual family resources/supports, etc.
- **Indicated interventions** are only for individuals who need more intensive and long-term support that cannot be provided in the campus setting (Brock et al, 2016).

In previous critical events, survivors discussed a wide-range of responses, from no reaction at all to feeling upset and dysregulated right away, or having reactions emerge days or weeks after the event.. Likewise, the anniversary of the event can generate a negative response. People should be reassured that all of these reactions are “normal” and they tend to resolve with little to no intervention beyond naturally occurring social support. However, mental health supports need to be available for the long-term for those who need it. Services should be available with no judgment as to an individual’s need for further support.

- The safe haven should remain open for as long as the campus or community is utilizing the services. Ideally, the safe haven should at least remain open until any funerals resulting from the incident have concluded.
- Assessment of psychological trauma risk throughout the response is essential, as crisis intervention should only be offered when there is a demonstrated need.
- Additional resources are identified for those needing more intensive and long-term support.
- A follow-up meeting should occur at the end of each day to update responders, capture at-risk students and staff for follow-up and plan the next day.
- If the campus is a crime scene, communication between law enforcement and the crisis team will allow the mental health staff to prepare the students and staff for the consequences of this. Belongings such as phones, IDs and laptops may not be available for a considerable amount of time. Property may have been damaged, and warning individuals of this ahead of time can lessen the impact.
- Alerting students and staff to upsetting messages from the event that will likely still be on cell phones will be necessary. It is advised that they listen to the messages with a trusted friend.
- The crisis team will be focused on supporting students and staff while assisting in returning the campus to education. If the campus was a crime scene, an open house the day before students return for education offers an opportunity for students and families to come back to the building and regain a sense of comfort and safety. Mental health providers on hand can support the returning students and staff.
- When the students are returning for regular classes, additional mental health professionals should be on hand to support both students and staff.

- If a student has died because of the event, having a mental health provider follow that student's schedule to offer an opportunity for each class to process the event and the absence of their peer is recommended.
- Consider a website to provide immediate, up-to-date information for the short- and long-term. Perhaps a neighboring campus could assist with this.
- Support for all first responders and crisis team members is also important. Care for the caregiver should be a priority.
- Ongoing communication between all the agencies involved is vital to build trust and cohesion. Initially, calls may need to happen daily and eventually weekly until it is no longer necessary.

Debriefing of Responders, Crisis Team and Staff for Both K-12 & IHE

After a critical incident has occurred on your campus, having a psychoeducational protocol that mental health professionals can use to help staff process the event can be extremely helpful. In a supportive environment, where participants decide how much or how little they would like to share, they are given the opportunity to learn the details of the event, to share their reactions, and to acknowledge very normal feelings. A refresher on self-care is also a portion of the protocol. This process can go a long way to assisting staff in mitigating secondary trauma and returning to the job of education.

- Emergency responders will likely have their own debriefing by victim advocates or other professional organizations. Be sure this happens.
- School/campus crisis teams and community professionals that assist should also have the opportunity to debrief. This might be debriefed by a trained professional. Be sure the groups are homogeneously selected to prevent someone with more trauma from "infecting" someone with less.
- Other school staff should also be given the opportunity for a professional debriefing.

Lessons Learned from Past Events

- Connecting administrators and staff with other school/campus staff who have experienced a similar crisis is helpful.
- Secure volunteers to call parents/families within the affected district/campus to offer support. One superintendent solicited retired school administrators to take on this duty. The administrators recorded a one-word reaction from each family so the district knew how people were coping.
- For K-12 districts, contact the Colorado Education Association to visit staff and offer support. On university campuses, utilize any faculty associations that could provide this support.
- One district started a Random Acts of Kindness Program in memory of the student lost.
- On K-12 sites, parents and community volunteers may staff entryways, sign in visitors and provide badges. This can provide security to students but also give parents a constructive way to help.
- The business community can show their support with signs in their windows and donations of food and beverages.

Financial Resources

When tragedy struck the small community of Bailey, Colorado there were demands for additional financial resources to cover such expenses as counselors, substitute teachers, safety and security staff and hardware, communications support, special activities and financial assistance for victims. The community relied on the Colorado Department of Public Safety's Division of Criminal Justice Assistance to help with federal grant applications:

- U. S. Department of Education SERV grants
- U.S. Department of Justice, Office for Victims of Crimes
- VALE, Victim Assistance and Law Enforcement (administered by the District Attorney's offices)

- Consider including a position of grant manager in the grant application, as managing these funds can be overwhelming, especially in a small district or campus.

Also tapped:

- School & staff funding – Insurance, contingency funds, capital fund expenditures, workmen’s compensation
- Colorado Organization for Victim Assistance - COVA can help connect victims to federal funding opportunities.
- Private funding – Grants can be obtained from private foundations including the [Colorado Healing Fund](#)
- Donations – Often people within and outside the community want to donate. It is important to have good tracking procedures established immediately to ensure the funds are used appropriately with accurate accountability. School officials may work with an outside agency to determine how to collect and distribute funds. (i.e. [Community First Foundation](#) or other local non-profits)

Mental Health

- Victim services to provide mental health services to first responders
- The [National Center for School Crisis and Bereavement](#) services
- The [Depression Center at Anschutz Medical Center](#)
- Institute for Disaster Mental Health: <https://www.newpaltz.edu/idmh/resources-/organizations--agencies/>
- Plans for the first anniversary and subsequent anniversaries of the event

Safety

- Site assessment of the district and campus buildings
- Formation of a School/Campus Safety Advisory Task Force to review safety efforts and make recommendations to the superintendent/president and boards
- Use any donated funds to upgrade security measures within buildings and provide programs to support students’ mental health

Mental Health Planning for Subsequent Days

Planning After the Crisis

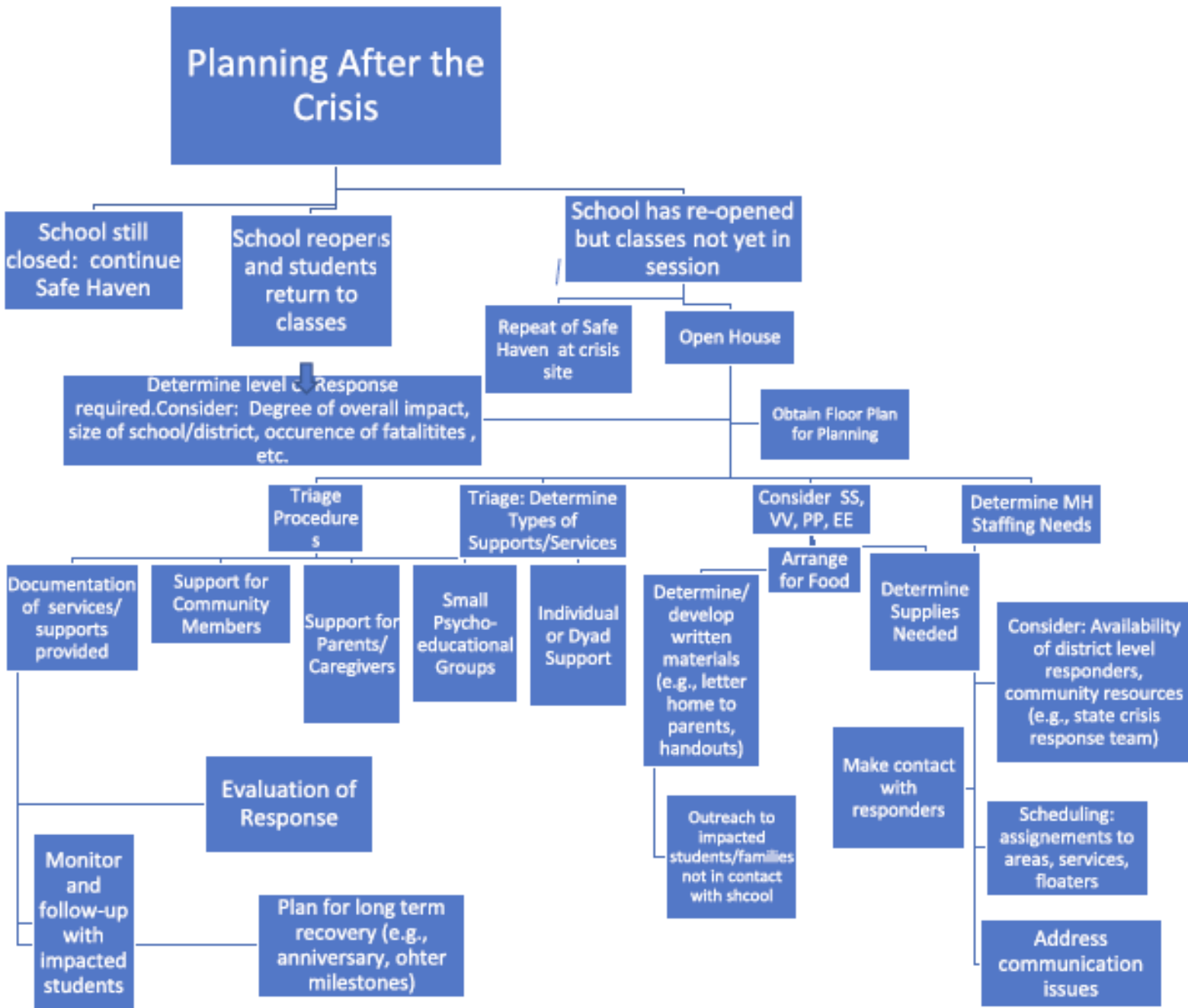


Figure 6

Crepeau-Hobson et al, 2020

Appendix

Sample Templates - These templates were developed for K-12 Schools but could easily be adapted for Institutions of Higher Education.

Announcements

[Death of a Student to Staff or Students](#)

[Death of a Student by Suicide](#)

[Sample Statement for Death of a Student by Suicide When Manner of Death Can Not be Disclosed](#)

Family gives permission to acknowledge manner of death

Family does not give permission to acknowledge manner of death or manner not yet confirmed

Death of a Staff Member

[Elementary Classroom Announcement](#)

[Secondary Classroom Announcement](#)

[Letter to Parents \(from Mesa 51\)](#)

Crisis Documents Supplied by Littleton Public Schools

For Educators:

[Acute Trauma and Post-traumatic Stress Disorder](#)

[Supporting Students & Each Other after a Sudden or Traumatic Death](#)

[Grief Support for Children with Intellectual and Neurodevelopmental Disabilities](#)

[Academic Support Planning for Students who are Struggling](#)

[When a Friend Has Died of Suicide](#)

For Mental Health Professionals

[Major Lessons for those Leading a Mental Health Response](#)

[Quick-Help Lessons from the Immediate Mental Health Response to a School Shooting](#)

[Making the Initial Call/Visit to the Parents of a Student Who has Died](#)

[Crisis Counseling Center Roles / Contacts](#)

[Crisis Counseling Documentation](#)

[School Crisis Response Plan During a Virtual Learning Model](#)

[Recommendations for Reporting on Suicide](#)

For Parents

[Helping Your Child Understand a Traumatic Event](#)

[A Letter to Parents Surviving a Child's Suicide](#)

Additional K-12 Resources:

A Framework for Safe and Successful Schools

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/systems-level-prevention/a-framework-for-safe-and-successful-schools>

Additional IHE Resources:

The Handbook for Campus Safety and Security Reporting 2016 Edition

<https://www2.ed.gov/admins/lead/safety/handbookfsa.pdf>

The Jeanne Clery Act

<https://clerycenter.org/policy/the-clery-act/>

Colorado College Emergency Management Plan 2016-2017

<https://www.coloradocollege.edu/other/preparedness/documents/EMP%202017%202018.pdf>

FEMA Training Suggestions for K12 Schools/ IHE Incident Response Personnel

General personnel:

[IS-100.c An Introduction to ICS](#)

[IS-700.b NIMS: An Introduction](#)

Critical/key personnel:

[IS-100.c: An Introduction to ICS](#)

[IS-362.A: Multi-Hazard Emergency Planning for Schools](#)

[IS-700.b NIMS: An Introduction](#)

[IS-/ICS-800.d National Response Framework, An Introduction](#)

[IS-/ICS-200.c Basic Incident Command System for Initial Response](#)

Additional NIMS-related online courses that support school emergency management for schools and IHEs:

[IS-368: Including People with Disabilities & Others with Access & Functional Needs in Disaster Operations](#)

[IS-29.a Public Information Officer Awareness](#) (recommended for school and IHE campus Public Information Officers)

[IS-360: Preparing for Mass Casualty Incidents: A Guide for Schools, Higher Education, and Houses of Worship](#)

[IS-363 Introduction to Emergency Management for Higher Education](#)

[IS-703.b NIMS Resource Management](#) (recommended for heads of school and IHE campus emergency management planning programs and ICS Teams)

The following additional courses are recommended for leadership personnel (in person only):

[ICS-300 Intermediate ICS for Expanding Incidents](#)

[ICS-400 Advanced ICS for Command and General Staff](#)

[L0363 Multi-Hazard Emergency Management for Higher Education](#)

[G0367 Emergency Planning for Campus Executives](#)

IS courses are offered as online courses through: <https://training.fema.gov/is/>

ICS, L & G courses are offered in person through state and federal training programs & may be offered upon request.