ATTACHMENT 3

CHECKLIST FOR SCHOOLS RECEIVING POSTVENTION SERVICES FROM AGENCIES

1. **Advance preparations – (to be completed and revised at the beginning of each school year)**
   - Designate the District and school crisis leadership:
     - Identify the coordinator/contact person for the District and for each school.
     - Identify the spokesperson for the district/school. Provide this person with a copy of the *Postvention Standards Manual*, highlighting the sections on dealing with the media and memorials.
   - Provide the agency responders with these persons’ names, phone numbers (including home and cell), fax numbers, e-mail addresses, and office locations.
   - Review with school and District coordinators the *Postvention Standards Manual*, including the checklist of responsibilities.
   - Provide the coordinators/contact persons with the same information for the agency coordinators.
   - Conduct a review meeting with each building administrator and Student Assistance Team. At the review meetings:
     - Update the contact information on each member of the crisis team. This should include name, phone numbers (work, home, cell), e-mail address, office or work location and schedule, and that person’s specific assigned duties in responding to a crisis.
     - Go over the *Postvention Standards Manual* and other school procedures related to crises.
     - Review the required and recommended contents of the crisis response kits and replace any missing or outdated items (e.g., jump drives with templates for parent letters).
     - Review and document previous losses or crises that may have an impact on the school in the coming year. These should include last school year’s tragedies or crises as well as events that took place during the summer. Make a note of anniversary dates or other sensitive dates.
   - Send the agency responders this information that has been updated:
     - Accurate driving and parking directions for the school.
     - A floor plan for the school, indicating the spaces to be used for individual and small group meetings. Show where the telephones, main office, cafeteria, and restrooms are.
     - Information regarding how informed consent from parents will be obtained if agency providers are to have contact with students.
     - Brief summary of previous crises or tragedies and those dates.
   - Prepare a *Confidential Information Sheet* to give to agency responders *at the time of a crisis*. This sheet should be considered confidential and agency providers should: a) sign a confidentiality statement upon receiving it, and b) return it after their work is complete. The information might include:
o Contact information for all school crisis responders
o Floor plans showing teachers’ names.
o Telephone dialing instructions
o Copier equipment codes
o Security codes used in communicating lock-downs, etc.
o Other information that agency responders might need to access resources in the building, especially in the event of a large-scale crisis.

- Names of students thought to be at ongoing risk because of prior mental health problems, substance abuse, family dysfunction, or other psychosocial stressors.
- Regardless of their relationship to the victim, students with depression, anxiety disorders, PTSD, substance abuse and recent interpersonal losses including exposure to a suicide, will be at elevated risk in the event of a suicide.

- If necessary, the District Coordinator and the agency Coordinator should meet to review procedures and to obtain signatures on agreements regarding the procedures.

2. Actions to take at the time of the crisis. [The school or District coordinator should take responsibility for seeing that these actions are completed by members of the crisis team. These actions are in addition to those listed in the Postvention Standards Manual.]

- If necessary, the superintendent formally invites the agency to participate and establishes any “ground rules” for that participation (e.g., consent from parents, payment, reimbursement for expenses, record keeping, confidentiality agreements)
- Alert security that the agency persons will be on campus.
- Arrange for the agency staff to park.
- Draft the parent letter with information about those who will be providing services. Fax or e-mail this draft letter to the agency coordinator for review.
- Arrange for spaces for the responders to meet with students and with adults.
- Make copies of the Confidential Information Sheet for agency responders.
- Review the checklist in Attachment 3 in this manual and designate who will take care of each item.
ATTACHMENT 4- THE AFTERMATH OF SUDDEN DEATH

COMMON ACUTE GRIEF/STRESS REACTIONS

SHOCK  Feelings of numbness, denial and disbelief.
SADNESS Includes feelings of longing, yearning, and sorrow.
FEAR  Fear your emotions will be unmanageable.
SHAME Embarrassed by the circumstances surrounding the death; embarrassed by the strong emotions the death has caused in you.
ANGER  Over the pain the death has caused, and the unfairness of losing someone that you cared about; you may even mad at the person who has died
GUILT  Feelings that you may have been able to prevent the death.

Grief is an emotional course with dramatic highs and lows, and no straight lines. It may have emotional, physical and cognitive manifestations. The grief process is on-going.

WAYS OF DEALING WITH SUDDEN DEATH

TALK ABOUT YOUR REACTIONS - it is not important to dwell on the unnecessary or gory details, but talking about what happened helps you accept that the death has occurred.

SEARCH FOR REASONS - remember that you may never know all the reasons. Looking at different reasons why this has occurred may help alleviate some of the uncomfortable feelings and confusion you are experiencing. Don't torture yourself with “what ifs” and ruminate on “only ifs” or “should.” Doing so may complicate the grieving process.

EXPRESS YOUR FEELINGS - talk to family and friends about your thoughts and feelings. Expressing yourself, and sharing your feelings with others can help you feel less alone, less like you are the only one in pain. How much you talk and to whom you speak depend upon your relationship with the person and the level of trust that you have. When sharing online keep in mind how heightened emotions can be. Consider some “off-line” time.

NEED TO BE ALONE AS WELL AS WITH OTHERS - give yourself time to think and reflect privately if you feel that is what you need. Also, there will be times when you won't want to be alone; you may need to be with others. You need a balance, but it is important not to isolate yourself. Try to ask for what you need. Remember you can change your mind.

THERE ARE NO TIME FRAMES - every person is different. The time it takes for someone to “feel like his or her old self again” is different from person to person. However, most people feel better maintaining a “normal” schedule, as much as possible. This would include a regular eating, sleeping and exercise schedule.
GUIDELINES FOR TALKING WITH STUDENTS
IN THE AFTERMATH OF A SUDDEN DEATH

Note to staff: Make sure you take care of yourself! Be aware of your own stress reactions. Younger students will likely follow the reactions of the adults around them. As soon as possible, allow private/adult time for your own reactions so you can be composed for your students. You may feel there isn’t much you can say or do. Yet, coming to school and experiencing the tragedy with your students shows that you care and that individuals supporting one another can survive a tragedy.

- Explain that it is normal to feel emotions such as shock, fear, sadness, guilt, or anger. Encourage students to talk about these feelings with parents, friends, and counselors. Identify additional natural supports such as extended family, clergy, coaches, and, youth leaders.
- Let students know that there is no "right way" to feel after a tragedy. Remind them that people deal with grief differently, and they need to be patient and tolerant with each other.
- Do not expect students to "resolve their grief" after talking with someone about it. Grief is a process, and students need to work through that process in order to reconcile themselves with their loss.
- Do not try to "cheer students up." They need to experience the grief process, even though it is often painful. You may want to offer your condolences to students.
- Help to clarify facts about the death. Correct errors and rumors.
- If the death was self-inflicted and your school has decided to refer to it as a suicide, follow the guidelines offered in this handbook. Stress that no one is to blame for the suicide. No one "caused" the victim to take his or her own life. The victim’s decision-making ability may have been impaired.
- Do not glamorize a suicide in any way. In discussing it, focus on recovery of the survivors and alternative methods of dealing with problems. Avoid focusing on manner of death, idealizing or blaming the deceased. Shift focus to how students are coping and concerns they have for themselves or peers.
- Encourage students to describe their memories of better times with the deceased.
- Talk candidly with students about what they can expect at the funeral home and funeral service and how they should dress and conduct themselves. Emphasize that the family's wishes should be respected.
- Rehearse possible condolence messages to the family. This is a new experience for most students and they don't know what to say.
- Emphasize that help is available to all students, not just those students who were friends or family members (or students of a teacher who has died). Make sure students know where to go to get help for themselves or for a friend who is depressed or suicidal.
Attachment 1 - Postvention Action Steps

POSTVENTION ACTION STEPS

Crisis Team Members Name/Title and Contact #’s:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Initials</th>
<th>RESPONSIBILITY</th>
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|      |      |          | 1. The school is informed of the death
|      |      |          | - Postvention coordinator is notified
|      |      |          | - Superintendent is notified
|      |      |          | - Building administration is notified
|      |      |          | 2. Factual information is gathered
|      |      |          | - Postvention coordinator or school official contacts Coroner or law enforcement agency and confirms death and identity of the victim
|      |      |          | - Postvention coordinator completes the Coroner’s/Law Enforcement Agency’s Report
|      |      |          | 3. Postvention coordinator contacts mental health agency for on-site support and/or consultation
|      |      |          | - Mental health agency states what services will be provided
|      |      |          | - Superintendent approves use of mental health services
|      |      |          | - Postvention coordinator reviews District’s policy regarding outside school personnel who screen students and the need for signed consent
|      |      |          | 4. Meeting is scheduled for Postvention/Crisis/SAP team and building administration
|      |      |          | - Crisis team prepares the announcement that is to be read by teachers
|      |      |          | - Principal prepares letter to inform parents of the death as well as the postvention services
|      |      |          | - Postvention coordinator locates victim’s personal belongings and puts them into safekeeping
|      |      |          | - Postvention coordinator removes victim’s name from individual class rosters, school mailing lists and automated attendance call lists
|      |      |          | - Crisis Team identifies rooms for screening students
|      |      |          | - Crisis Team confirms designated media spokesperson with the Superintendent
|      |      |          | 5. If death was a suicide, Crisis Team assesses the risk for contagion
|      |      |          | - Postvention coordinator identifies and contacts feeder schools and/or adjacent school districts where students may be affected
|      |      |          | - Mental health consultant contacts neighboring mental health providers
|      |      |          | 6. Faculty and school staff are informed of the death through phone chain
|      |      |          | - Teachers are informed of faculty and staff meeting to take place as soon as possible (i.e., an early morning meeting)
|      |      |          | 7. Crisis team begins to compile a list of at-risk students to be individually screened
|      |      |          | - Friends of the victim
|      |      |          | - Siblings of the victim
|      |      |          | - Students with a personal or family history of mental health problems
|      |      |          | - Students with a past history of suicide attempts
|      |      |          | - Students who are currently in mental health or drug and alcohol abuse treatment
|      |      |          | - Students who have been a concern for parents and/or teachers
|      |      |          | - Classmates /teammates /fellow club members of the victim
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<td>8. Postvention coordinator contacts the victim’s family</td>
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<td>- Conveys the school’s condolences</td>
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<td>- Asks parents/guardians about funeral arrangements</td>
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<td>- Determines how the parents/guardians would like the school to participate in the funeral</td>
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<td>- Reassures parents/guardians that school will safeguard and return victim’s personal belongings</td>
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<td>- Informs parents that the school is providing counselors for students and staff</td>
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<td>9. Postvention coordinator or principal holds faculty meeting before school or as soon as possible</td>
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<td>- Expresses condolences to the staff</td>
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<td>- Acknowledges the efforts of the Postvention/Crisis/SAP team</td>
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<td>- Reviews the facts of the death as known</td>
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<td>- Announces funeral arrangements if known</td>
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<td>- Makes sure that staff members wanting to may attend the funeral</td>
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<td>- Introduces all outside professionals</td>
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<td>- Gives an overview of the postvention services</td>
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<td>- Advises teachers to send visibly distressed students to the guidance office or designated area with a hall monitor or escort</td>
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<td>- Encourages teachers to monitor behaviors that may indicate that a student is grieving (i.e., journal entries, comments written in margins, off-handed comments, etc.)</td>
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<td>- Describes the school’s policy on what to do with gifts/memorials that students leave for the victim</td>
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<td>- Distributes the announcement that is to be read to the students</td>
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<td>- Encourages any teacher who needs assistance reading the announcement to contact the postvention coordinator</td>
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<td>- Announces follow-up meeting to be held ideally at the end of the school day</td>
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<td>10. Postvention coordinator contacts the funeral home (no release of information is needed)</td>
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<td>- Reviews specific funeral arrangements and family’s wishes</td>
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<td>- Informs the funeral director that students might visit the funeral home</td>
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<td>11. Superintendent approves letter to be mailed to parents</td>
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<td>- Letter describing the tragedy and the postvention service is distributed to students at the end of the day and mailed to parents</td>
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<td>12. The schedule of the victim is followed by a school counselor or postvention team member</td>
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<td>- Expresses condolences</td>
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<td>- Responds to students’ questions about the death</td>
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<td>- Explains funeral arrangements and procedures if any are known</td>
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<td>- Discusses the subject of memorials</td>
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<td>- Explains that counselors are available to see students</td>
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<td>- Reviews various stress reactions and the necessity of exhibiting tolerance and understanding</td>
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<td>13. Trained classroom teacher or counselor may conduct grief presentation for their classroom</td>
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<td>- Asks how each student learned about the death</td>
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<td>- Explores each student’s reaction to the death</td>
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<td>- Reviews aspects of grief</td>
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<td>- Discusses ways to deal with tragic loss</td>
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<td>- Encourages student discussion and questions</td>
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<td>- Distributes student “help card” or county crisis cards with emergency and resource numbers</td>
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<td>- Urges students to self-refer or refer a friend if they are concerned</td>
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<td>- Emphasizes the need to contact an adult if students have concerns about suicidality</td>
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<td>- Asks for and respond to students’ questions</td>
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|      |      | _____    | 14. Postvention coordinator or mental health consultant coordinates individual screenings and keeps a confidential roster of all students referred and screened (Ideally all records are maintained in accordance with pre-established letter of agreement between school district and agency/community providers prior to crisis response)  
|      |      | _____    | - Makes every effort to contact the parents/guardians of each student refereed for screening  
|      |      | _____    | - Makes clear to student that interview is voluntary  
|      |      | _____    | - Reviews confidentiality policy  
|      |      | _____    | - Makes appropriate referral for in or out of school support  
|      |      | _____    | - Contacts therapists of students who are in treatment if releases are signed and on file  
|      |      | _____    | - Explains where students can go if they have any problems or questions about their loss  
|      |      | _____    | - ASAP follows-up with student's parents/guardians and documents recommendations  
|      |      | _____    | - Monitors the follow-up for all students screened within a week by crisis team member, unless warranted sooner by behaviors of concern, and weekly for the first month; thereafter monitoring of screened students may continue at least every three months for the next two years by school counselor or other student service staff/agency provider (i.e. SAP member) |
|      |      | _____    | 15. Postvention coordinator or principal facilitates follow-up faculty meeting (at the end of the first day if possible)  
|      |      | _____    | - Thanks faculty and staff and acknowledges their hard work  
|      |      | _____    | - Provides updates on any new developments of the death and/or funeral arrangements  
|      |      | _____    | - Reminds staff to refer all media inquiries to the District’s designated media spokesperson  
|      |      | _____    | - Distributes and reviews the letter that goes home to parents  
|      |      | _____    | - Encourages faculty and staff to continue to monitor students  
|      |      | _____    | - Explains that students may have a resurgence of feelings after the funeral and in the weeks and months to come  
|      |      | _____    | - Reminds faculty and staff that there is no time frame for grieving  
|      |      | _____    | - Emphasizes that through natural supports, staff and students will get through this difficult time |
|      |      | _____    | 16. Postvention coordinator holds a follow-up meeting for Postvention/Crisis team and building administration  
|      |      | _____    | - Reviews all students who were seen  
|      |      | _____    | - Identifies plan for the following days, especially the day after the funeral |
|      |      | _____    | 17. Postvention coordinator or principal holds optional parent meeting, typically a week or two after the funeral  
|      |      | _____    | - Reviews school’s postvention activities  
|      |      | _____    | - Discusses typical child and adolescent responses to sudden death  
|      |      | _____    | - Identifies risk factors that indicate a concern  
|      |      | _____    | - Reviews symptoms of depressions and suicidal behavior  
|      |      | _____    | - Identifies resources available in the community |
|      |      | _____    | 18. Postvention coordinator or principal holds meeting with Postvention/Crisis/SAP team and building administration  
|      |      | _____    | - Evaluates the postvention  
|      |      | _____    | - Plans for anniversary dates and special events  
|      |      | _____    | - Reviews student screenings  
|      |      | _____    | - Emphasizes that faculty and staff need to stay alert to upcoming events or lessons that may be reminders of the tragedy, i.e., fire safety week, bicycle safety week and literature about suicide, accidents or death  
|      |      | _____    | - Makes recommendations for other interventions  
|      |      | _____    | - Emphasizes the need to take care of themselves with fluids, rest, exercise, etc. |
After experiencing a traumatic event, it is very common, in fact quite normal, for people to experience a wide range of emotional or physical reactions. These responses may appear immediately after the event, or some time later. They may last for a few days, a few weeks, or even longer. **Don’t worry** - these are normal reactions to an abnormal situation. It is important to understand that like the flu, your reactions will run their course and you will feel better in time. The following are some of the most common symptoms:

### Emotional
- Fear
- Anxiety
- Depression, Sadness, Grief
- Feeling hopeless or Helplessness
- Feeling Numb
- Irritability
- Inappropriate Emotional Response
- Anger
- Guilt, survivor guilt
- Denial
- Agitation
- Feeling overwhelmed

### Cognitive (Thoughts)
- Confusion
- Difficulty concentrating and making decisions
- Memory problems
- Shortened attention span
- Overly critical
- Preoccupation with the event
- Flashbacks
- Hyper-vigilance
- Overly sensitive

### Behavioral
- Social withdrawal/Silence
- Hyper-alert to environment
- Suspiciousness
- Emotional outbursts, loss of control
- Changes from typical behavioral
- Avoiding thoughts, feelings or situations related to the event
- Changes in communication
- Change in sexual function
- Increased consumption of alcohol or other chemicals
- Loss or increase of appetite
- Inability to rest

### Physical
- Easily startled/Jittery
- Fatigue
- Changes in appetite
- Sleep disturbances and nightmares
- Headaches
- Grinding teeth
- Feeling uncoordinated
- Nausea/Diarrhea
- Shallow breathing
- Twitches/Tremors
- Chills/Sweating
Attachment 13 - What You Can Do For Yourself

WHAT YOU CAN DO FOR YOURSELF
Department of Mental Health & Substance Abuse Prevention Resource Center (405) 522-3810

When you’ve experienced a trauma, it can be a shock to your whole system. The following are some ideas to help you cope with any physical or emotional symptoms you may be experiencing.

- Eat well-balanced and regular meals, even if you don’t feel like it
- Get plenty of rest.
- Exercise regularly. It can help work off some physical symptoms, leaving you feeling calmer and better able to relax. If you are feeling lethargic it can help energize you and clear your mind.
- Avoid caffeine, especially if you are having trouble sleeping.
- Avoid the use of drugs or alcohol, including prescription and over the counter to numb the pain. It will only complicate or delay your recovery.
- Structure your time and set priorities. Maintain your basic normal routine, but give yourself permission to skip the extras for a while.
- Don’t make any major life changes or decisions.
- Do make as many small daily decisions as possible to reassert your sense of control.
- Don’t try to avoid or deny reoccurring thoughts or feelings about the incident. They are normal and will decrease over time.
- Give yourself permission to feel rotten and to share your feelings with others.
- Do things that you enjoy. Take mini-breaks: go out to dinner, take 10 minutes alone, watch a movie.
- Talk with people you trust: your family, friends, co-workers. Don’t be afraid to reach out. People do care.
- Don’t be afraid to set limits with others when you don’t feel like talking. You don’t have to discuss the incident or your feelings when you don’t want to.
- Don’t label yourself as “crazy.” Remind yourself you are having normal reactions.
- Write down your thoughts and feelings. This can be especially helpful if you are having trouble sleeping or when you wake from a troubling dream.
- Ask for help if you need it. If you are having trouble coping on your own help is available from many sources:
  - Professional assistance from a counselor may sometimes be necessary. This does not imply weakness or craziness. It simply indicates that the particular event was just too powerful to handle by yourself.
  - In the workplace you may be able to get assistance from your co-workers, the human resources department, or company EAP.
  - Church, friends, family, and other community resources can be valuable sources of support.