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# The School Crisis Intervention Team At Work

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## Abstract

When a large-scale crisis impacts a school, the Crisis Intervention Team (CIT) leads the way to recovery. No single individual has the ability to provide the mental health services needed to cope with any and all emergencies that exist. Therefore, school officials must preplan emergency operations to ensure efficient use of available resources when the unspeakable happens on their campus. Basic to emergency planning is the use of teams to provide services. Schools begin with their own staff and select those individuals with the skills needed to provide mental health services to students and staff. These individuals are the core of the School Crisis Intervention Team.

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Because CIT members are often victims themselves, it is not uncommon that other mental health personnel assist the school team. These mental health resources are accessed from schools in the same district, nearby schools outside the district and other government and community mental health agencies. Once these outside resources are mobilized to assist, it is imperative that they be deployed systematically and coordinated by the School Incident Command Team. To this end, a regional educational agency can assist by locating and mobilizing outside mental health crisis intervention resources.

The Los Angeles County Office of Education (LACOE) is the nation's largest regional educational agency serving 81 independent school districts and approximately 1.5 million students in grades K-12. Through its Safe Schools Center, districts are provided with training, technical assistance and access to nearby mental health resources

when needed. Crisis Intervention Training includes skill development (e.g. Critical Incident Stress Management, Violence Threat Management) and CIT operational procedures.

The Center also provides leadership and guides school administrators and school boards to adopt policies and procedures paving the way to effective program implementation. LACOE is a catalyst for interdisciplinary team building, collaboration with other schools, and linkages to community and governmental resources. Safety policies, procedures and training are also discussed with other key emergency response agencies.

## STANDARDIZED PLANNING FOR SCHOOL CRISIS

Every day school personnel either provide services on campus or summon outside emergency services with minimal disruption to the educational process. It is unusual that an event occurs that surpasses their ability to solve the problem. When a school crisis occurs, school personnel lack the resources to deal with it on their own. Following organizational guidelines that are consistent with the statewide Standardized Emergency Management System, school personnel are able to respond in a manner that is in synchronization with the other agencies required to assist.

California Government Code 8607, the Standardized Emergency Management System (SEMS), requires schools and all public agencies to follow a uniform organizational framework to manage catastrophic events. The system has

been shown to be effective for more than two decades by emergency responders, primarily fire service and rescue workers. Compliance with SEMS permits schools to recover personnel costs following a state-declared emergency but, more important, the framework enables schools to develop disaster procedures that are manageable and in line with those of other emergency agencies that assist. For this reason, the California Education Code (35294.2 (b)) was adopted in 1998 and it requires every public school to develop its own Comprehensive School Safety Plan that is consistent with SEMS. Training for administrators and other key school staff is currently being conducted throughout the state.

SEMS requires schools to organize and manage school emergencies using the Incident Command System (ICS). The ICS is used by all emergency services responding to a major incident. Staff is assigned to roles and responsibilities according to five SEMS functions. This facilitates rapid deployment and interagency communication: The five SEMS functions include Command/Management, Operations, Planning/Intelligence, Logistics, and Finance/Administration. All of these functions are incorporated into the School Safety Plan, and are the subject of school-based training and practice exercises.

The Incident Commander has primary responsibility for response and recovery operations. The School Principal generally fills the position of Incident Commander or designee, as that position has ultimate authority over the school incident. The system is also flexible enough expand or collapse these functions as dictated by the nature of the incident and the staffing available. For example, for small incidents and at small schools, a single individual may perform several of the SEMS functions. If the incident escalates in scope and additional resources become available, SEMS responsibilities are then assigned to other team members.

The School Mental Health Crisis Intervention Teams are deployed as a key Operations component and it is not uncommon for the Incident Commander to assign a Mental Health Officer to assist. Schools, unlike some other disaster settings, often require extensive recovery efforts before the educational process returns to normal. In that regard, the activity level of emergency responders (police, fire and rescue personnel) is generally greatest in the emergency response phase of the incident, while the activity of Crisis Intervention Teams is usually greatest during the recovery phase—usually 24 to 48 hours following the incident.

### **TRAUMA IN ALHAMBRA**

A recent school tragedy illustrates the SEMS-based organizational framework. In late November, staff from the LACOE Safe Schools Center and the Los Angeles County Department of Mental Health were invited to conduct a two-day training seminar for school administrators and the district-wide Crisis Intervention Team for the Alhambra City and High School District. The district is located in the San Gabriel Valley. The total enrollment is just under 20,000 students. There are three four-year high schools, one continuation high school, one alternative high school and thirteen elementary/middle schools.

The training was to take place over two days. On Day One (Wednesday) participants learned information about Mental Health Team organization, activation procedures and SEMS responsibilities of CIT members. In the afternoon participants practiced a tabletop exercise simulating a fatal traffic accident in front of a school. Day Two of training was scheduled for Friday. The plan was cover clinical trauma assessment and intervention skills.

On Thursday we were all in for a sudden change of plans. Ramona Elementary School was about what we learned Day 1 to the test. Ramona has a culturally diverse student population of about 1100 students in grades Kindergarten through 8.. At 9:50 a.m. the Ramona's principal placed an urgent call to the Assistant Superintendent of Pupil Services. Ironically, the day before, the principal had participated in the CIT training, and now she told the Assistant Superintendent that Ramona was having an actual crisis.

A severely disabled sixth grade student fell unconscious in class and needed to be resuscitated with CPR. The eleven-year-old boy was then transported by paramedics to the hospital where he was pronounced dead shortly after arrival. He was born with a serious heart malfunction and this was known to everyone at school. It was his wish to continue to go to school and special arrangements were made for a special aide to assist him with his wheel chair and other appliances needed to accommodate him. The sixth grader was loved by all who knew him. His tragic death was certain to generate sadness, fear, and a profound sense of loss for students and teachers who witnessed the event and everyone who knew him.

Only one school psychologist was assigned to Ramona. That person was new at the school and had an extremely close relationship with the deceased student. The principal knew that the psychologist alone could not help everyone so she

requested additional mental health resources from the District Crisis Intervention Team.

The Assistant Superintendent activated the team immediately. Within three hours, the team members were arriving on scene and they assembled in a pre-designated staging area. The team consisted of 40 school psychologists, nurses, and counselors. In addition, help was requested from the Safe Schools Center where staff was immediately mobilized along with staff from the Los Angeles County Dept. of Mental Health. Also summoned were school-based mental health resources from the Almansor Center, Asian Pacific Counseling Center and the California School of Professional Psychology that provides services to schools in the district.

When the team arrived on-scene there was considerable activity. Paramedics were completing reports. Police officers were interviewing students and teachers who witnessed the event and the principal was meeting with family members. The principal requested that the Assistant Superintendent coordinates the mental health services. In this example, the Incident Commander (Principal) assigned the function of Mental Health Officer to the Assistant Superintendent, a District Office administrator, leaving her free to attend to other matters that demanded immediate attention. The principal retained the ultimate authority and the Assistant Superintendent was there to support her by performing part of her responsibility.

Shortly after arriving at the school, the Assistant Superintendent (Mental Health Officer) assigned CIT members to emergency operations (SEMS function) activities. Team members provided one-on-one support to teachers and staff that had been most involved in providing emergency care for the student. These included a health aide, the sixth grade classroom teacher and the instructional aide that had performed CPR. The school psychologist had accompanied the child to the hospital. She rode in the ambulance and was present when the parents were informed of his death. The school psychologist, an active member of the CIT team, was a trauma victim. This is not uncommon, especially in elementary schools where there may be only one person that provides mental health services. In this case, the psychologist had attended the CIT Training the previous day and was well acquainted with the other team members.

The Assistant Superintendent then assigned CIT members to other responsibilities. Because this crisis required assistance from almost all school personnel, CIT members were

assigned work with other school staff performing variety of SEMS school response responsibilities. Some were assigned to Logistics (SEMS) functions. Rooms needed to be located for activities that would be conducted the following day. Critical Incident Stress Debriefing was to be provided for staff and possibly for students, parents would be invited to an early morning briefing, large rooms were needed for staff and faculty briefings and defusing staff as they left their assignments. Small rooms or spaces were needed for one-on-one counseling, a "Safe Room" would be set up for the benefit of students or staff wanting to talk to someone, and finally a staging area for unassigned staff needed to be assigned. Other logistics functions included the preparation and distribution of a letter to be sent home to parents, and the distribution of school maps, schedules and teacher assignments to all CIT members. Because it was unlikely that additional resources would be need to be recruited, no CIT staff were assigned to the staffing function.

All CIT members not assigned to these functions remained in the staging area where the Disaster Coordinator from the Department of Mental Health facilitated the planning for Day Two. Other school administrators and a custodian also attended this Planning and Intelligence (SEMS) function. Some CIT members had previously worked at Ramona School and were very helpful in helping to assess the needs of faculty and students. The schedule for Day 2 included an early morning meeting for parents, debriefing for faculty and staff, classroom visits that would involve the teaming of CIT members with teachers, Critical Incident Stress Debriefing conducted with seriously impacted faculty and staff, a demobilization meeting for CIT members. Throughout the day CIT staff would be meeting one-on-one students and staff that were self-referred or identified by teachers and CIT as needing additional services.

Two CIT members provided vital Finance/Administration functions (SEMS) coordinated the documentation of CIT services. Sign-in sheets were designed for the Safe Room while service logs were distributed and collected from all CIT staff. CIT sign-in sheets were used to identify all staff on campus and name badges were prepared. These procedures were discussed at the Day-Two Planning Session.

While the training instructors had planned to provide clinical skills training on Day Two, events and circumstances demanded that skills training be postponed. Day Two became the "teachable moment" where CIT members provided the services that were discussed on Day One.

Now, the training instructors will include a discussion of the day's events at the next clinical training meeting and participants will have an actual experience to examine and refine.

This tragic event in Alhambra was totally unplanned. It caught school administrators by surprise but they were not unprepared. The benefits of training and practice were clearly demonstrated by the well-organized and orchestrated response and recovery operation. This underscores the need for all schools to prepare for the unthinkable. Who knows who will be next?

### **A REGIONAL CIT RESOURCE**

The LACOE Safe Schools Center has trained hundreds of school-based and community-based professionals in the basic skills of school crisis intervention. They play a key role linking schools with others who can assist in the event that outside help is required. The Center helps school administrators to understand the benefits and limitations of school Crisis Intervention Teams. Most recently the Center is identifying resources throughout the county so that arrangements can be made for mutual aid from schools and community agencies.

In the aftermath of recent high impact school shootings,

schools understand that mental health services are important. The Center helps schools to organize multi-disciplinary Threat Assessment Teams. These teams are mobilized when someone poses a threat to students or staff. Teams include school administrators, school-based and community-based mental health and law enforcement partners.

Law enforcement professionals experienced in assessing threats to schools, workplaces, and public officials provide state-of-the art technical training. Technical assistance ensures that the school community and student confidentiality are both protected. Teams are also linked with other community agencies that are able to provide assistance when needed. These agencies include: emergency response team of the Dept. of Mental Health, community mental health, children and family services, fire service arson investigators, animal control officers, and others. LACOE also arranges for team meetings so that districts can share their best practices and concerns.

With school safety the ultimate goal, school administrators in Los Angeles County can count on well-trained Crisis Intervention Teams to lead students through their recovery from traumatic events.

### **References**

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