Recovery Planning for Educational Facilities

This article is modified from the Recovery Plan Template from Safe Havens International

A Recovery Plan is an integral part of the four phase crisis planning process. Every recovery plan should be designed to ensure the continuation of vital emotional and cognitive processes in the event that a disaster occurs or a major crisis event affects the psyche of students, faculty and staff. The Crisis Recovery Plan can assist the school system in providing effective emotional health services that can be used to help individuals recover from a crisis event, provide procedures to handle emergency situations that may have an emotional impact on people, and to accomplish the following objectives:

- Prepare crisis team members to respond effectively in a crisis situation.
- Manage the crisis recovery activities in an organized and effective manner.
- Limit the emotional impact of any crisis situation.

Should an emergency situation occur at any educational facility, the school’s recovery efforts should be tailored to provide an effective method that can be used by crisis team members to control all activities associated with the crisis situation in a proactive manner and to lessen the potential negative impact with the media and the community at large. It is important to review the plan carefully to ensure that it includes:

- Documentation for each responsibility.
- Procedures and checklists that will be used to manage and control the situation following an emergency or crisis occurrence.
- Forms that will be used to document activities.

In any event, your Recovery Plan is one element of developing a strategy. The plan’s success, however, depends upon:

- Implementation of the recommendations made by a group of local experts to include community mental health officials, emergency management personnel and public health representatives. It is essential to commit to implementing all recommendations and strategies identified in the Recovery Plan, otherwise investment made in its preparation will be redundant. Similarly, training and awareness must be embarked upon to ensure that the entire school community is confident and competent concerning the plan.
- A program of training of those directly involved in the execution of the plan. All parties must appreciate the importance of the school’s Recovery Plan to the operation’s survival and their role in this process.
- An education and awareness program to ensure district-wide understanding and adoption of the plan, covering internal and external stakeholders, i.e. employees, students, and parents. This awareness should extend to parents and other stakeholders upon whom the school system depends or has influence in both normal and crisis operations.

Finally, your plan should be updated annually, exercised and should always be readily available to authorized personnel.
Crisis Recovery Activities

Crisis recovery activities should encompass the “6 R’s” of recovery:
- Recognition
- Reaction
- Restoration
- Return to Normal
- Rest and Relax
- Re-evaluate and Re-document

The 3-Phase Recovery Process

When the plan is activated, assigned personnel should be alerted and directed to activate their procedures based on a 3-phase process. The team leader should make a quick assessment to determine under which phase they will operate. Once the phase determination is ascertained, the activities outlined in each phase can be accomplished.

Phase I (Initial Phase)
- Conduct a needs assessment to determine who was impacted and who needs help immediately.
- Deploy Crisis Team members to their respective assignments with necessary supplies.
- Brief staff regarding the scope of the disaster, existing community resources, communications, travel, contact persons with other organizations, process to receive pay (if applicable), record-keeping procedures, schedule of work times, other policies and procedures.

Recovery/Mental Health Crisis teams should:
- Obtain a briefing on the scope of the disaster, existing community resources, communications, travel, pay process (if applicable) record-keeping procedures, schedule of work times, location.
- Gain access to work sites and contact persons with whom disaster mental health services are being coordinated.
- Assess and triage those in need of crisis intervention.

Phase II (Middle Phase)
- Reassess mental health needs of disaster victims, relatives and others and evaluate services to date.
- Maintain contact with the Command Team/Incident Commander to acquire information about disaster response operations and to determine potential problems.
- Coordinate response efforts with other responding organizations.
- Debrief members of the other deployed crisis teams and other emergency responders on a routine basis.
- Provide fact sheets and handouts to staff and parents.

Recovery/Mental Health Crisis teams should:
- Provide crisis counseling services through outreach to victims, their families, and other community members, as appropriate.
- Link disaster victims with human service agencies that provide support services.
- Provide referrals to local mental health providers.
- Provide consultation to other community agencies.
- Maintain records of services provided.
Phase III (Final Phase)

Reassess needs, evaluate services to date, and plan for transition to the recovery phase.

Recovery/Mental Health Crisis teams should:
- Provide debriefing by a trained facilitator for members of the program staff and other emergency responders.
- Refer disaster victims that have been identified as needing long-term care to local mental health providers and other human service providers.
- Critique the disaster recovery efforts and activities using feedback from members of the disaster response and recovery organizations, victims, and members of the responding crisis teams.
- Generate recommendations to improve disaster mental health planning response and recovery activities by local mental health providers and other disaster response organizations.
- Update disaster mental health plan based on lessons learned.

Because many people do not see themselves as needing mental health services following a disaster and will not seek out such services, a traditional, office-based approach to providing services has proven ineffective in a disaster. School disaster mental health responders must actively seek out those impacted by the disaster. Disaster mental health responders must also avoid the use of terminology generally associated with traditional mental health services including such terms as diagnosis, therapy or treatment.

Age-specific Activities for Children in Disasters

<table>
<thead>
<tr>
<th>Preschoolers</th>
<th>Elementary (grades K-5)</th>
<th>Middle/Junior High to High School (grades 6-12)</th>
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</thead>
<tbody>
<tr>
<td>Draw-a-picture</td>
<td>Draw-a-picture</td>
<td>Art, music, dance</td>
</tr>
<tr>
<td>Tell-a-story</td>
<td>Tell-a-story</td>
<td>Stories, essays, poetry, video production</td>
</tr>
<tr>
<td>Coloring books on disaster and loss</td>
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</tr>
<tr>
<td>Doll, toy play</td>
<td>Create a play or puppet show about a disaster</td>
<td>Create a play, or video about a disaster</td>
</tr>
<tr>
<td>Group games</td>
<td>Create a game about a disaster, disaster preparedness, or disaster recovery</td>
<td>Group discussions about disaster, disaster preparedness, or disaster recovery</td>
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<tr>
<td>Talks about disaster safety and self-protection</td>
<td>School study projects</td>
<td>School projects on health or natural and social sciences</td>
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<tr>
<td>Materials about disaster safety and self and family protection</td>
<td>Materials about disaster safety and self, family, and community protection</td>
<td>School service projects</td>
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</tbody>
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