

Small Group Counseling Title/Theme: Coping With Life Changes-Missing You- Unit 2

Grade Level(s): K-2

Small Group Counseling Description: This group is for students who are experiencing problems with the death of a loved one. Students will learn the stages of grief; what supports are available; how to say goodbye; how to label feelings; coping strategies; and how to share memories. The group will be reading books and making a pillowcase to help cope with the loss.

Number of Sessions in Group: Introduction, 6 Sessions, and an Optional Follow-Up Session

Session Titles:

Introductions: Establishing Group Norms:

Establishing norms is important to the group process. This introduction should be used prior to Session #1.

Materials needed:

Chart Paper

Markers

[*Small Group Counseling Guidelines Poster \(Document 18\)*](#)

Session # 1: Getting to Know You

Materials needed

Pillowcase

Markers

Cardboard

[*Small Group Counseling Guidelines Poster \(Document 18\)*](#)

[*Teacher/Parent/Guardian Follow-Up Form \(Document 12\)*](#)

Session # 2: Facing Feelings

Materials needed

Pillowcase

Markers

Chart paper

Cardboard

Book about death/dying/grief and/or feelings

Puppet

[*Small Group Counseling Guidelines Poster \(Document 18\)*](#)

[*Teacher/Parent/Guardian Follow-Up Form \(Document 12\)*](#)

Session # 3: Stick By Me

Materials needed

Pillowcase

Markers

Cardboard

Old Crayons

Popsicle sticks

Chart Paper

[Small Group Counseling Guidelines Poster \(Document 18\)](#)

[Teacher/Parent/Guardian Follow-Up Form \(Document 12\)](#)

Session # 4: Skill Builder

Materials needed

Pillowcase

Markers

Cardboard

Cut out [Skill Builder Strategy Strips](#)

Cup/Bag

[Small Group Counseling Guidelines Poster \(Document 18\)](#)

[Teacher/Parent/Guardian Follow-Up Form Document \(12\)](#)

Session # 5: Memory Maker

Materials needed

Pillowcase

Markers

Cardboard

Tape recorder or CD player with the selected song about memories ready to play.

[Small Group Counseling Guidelines Poster \(Document 18\)](#)

[Teacher/Parent/Guardian Follow-Up Form \(Document 12\)](#)

Unit Assessments (attached to the Unit Plan)

[Teacher Pre-Post-Group Perceptions Form \(Document 14\)](#)

[Student Post-Group Perception Form \(Document 16\)](#)

[Parent/Guardian Cover Letter](#)

[Parent/Guardian Post-Group Perception Form \(Document 15\)](#)

Session # 6: Bring It Full Circle

Materials needed

Pillow Case

Markers

Cardboard

Lists from previous groups

Snacks

[Small Group Counseling Guidelines Poster \(Document 18\)](#)

[Teacher/Parent/Guardian Small Follow-Up Form \(Document 12\)](#)

[Student Post-Group Perception Form \(Document 16\)](#)

[Certificate of Completion](#)

[Student Post-Group Follow-Up Interview Form \(Document 13\) \(Optional\)](#)

8 ½ x 11 paper for each participant; crayons/markers/pencils

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

NOTE: The overall purpose of the MCGP small group counseling units and sessions is to give extra support to students who need help meeting specific Comprehensive Guidance Program Grade Level Expectations (GLEs). This small group counseling unit provides a "shell" that allows you to personalize sessions to meet the unique needs of your students. Your knowledge of the developmental levels, background knowledge and experiences of your students determines the depth and level of personal exploration required to make the sessions beneficial for your students.

Show-Me Standards: Performance Goals (check one or more that apply)

X	Goal 1: gather, analyze and apply information and ideas
	Goal 2: communicate effectively within and beyond the classroom
X	Goal 3: recognize and solve problems
	Goal 4: make decisions and act as responsible members of society

Summative Assessment

Summative assessment relates to the performance outcome for goals, objectives and (GLEs) concepts. Assessment can be survey, student sharing, etc.

Perceptual Data Collection:

The following end-of-group perceptual data collection forms will be used as a part of session four and five; the forms are attached to the Unit Plan:

Classroom Teacher Assessment:

- The classroom teacher will complete the [Student Behavior Rating Form \(Document 4\)](#) for each student before the group starts and after the group has been completed. The Professional School Counselor may consider making two copies of this form, one for the pre-assessment and one for the post-assessment, then entering all data on a final form for comparison.
- [Teacher Pre/Post-Group Perception Form \(Document 14\)](#) will be given to teacher to complete at the end of the group unit.

Parent Assessment:

- [Parent/Guardian Post-Group Perception Form \(Document 15\)](#) will be given to parents to complete at the end of the group unit.

Student Assessment:

- [Student Post-Group Perception Form \(Document 16\)](#) will be given to students to complete at the end of the group unit.

Results Based Data Collection:

The Professional School Counselor will demonstrate the effectiveness of the unit via pre and post comparisons of such factors as attendance, grades, discipline reports and other information, utilizing the PRoBE Model (Partnerships in Results Based Evaluation). For more information about PRoBE, please visit the [Guidance and Placement section](#) of the Department of Elementary and Secondary Education website.

Follow Up Ideas & Activities

Missouri Comprehensive Guidance & Counseling Programs:

Linking School Success to Life Success

To ensure that the work of educators participating in this project will be available for the use of schools, the Department of Elementary and Secondary Education grants permission for the use of this material for non-commercial purposes only.

Implemented by counselor, administrators, teachers, parents/guardians, community partnerships:

The Professional School Counselor will check in to see if students are using coping strategies and supports in order to deal with the feelings and emotions of losing a loved one.

DOCUMENT 14:

**TEACHER PRE/POST-GROUP PERCEPTION FORM
(SAMPLE 1 OF 2)**

Note: Samples 1 & 2 of Document 14 provide you with examples of two ways to gather data about teachers' post-group perceptions of the effectiveness of the group. **Sample 1** measures teachers' perceptions of the changes the student made as a result of the group experience. **Sample 2** measures the teacher's perceptions of the counseling group as a whole. An advantage to using form 2 is that it parallels [Document 15: Parent/Guardian Post-Group Feedback Form](#) and [Document 16: Student Post-Group Perception Form](#); thus, making it possible to compare teacher, parent and student perceptions of the group experience.

Note: The classroom teacher completes Part 1 of this document before students begin group sessions and completes Part 2 after the group has been completed. This process will provide the school counselor with follow up feedback about individual students who participated in the group.

**Sample 1: Individual Student Behavior Rating Form
(Adapted from Columbia Public Schools' Student Behavior Rating Form)**

STUDENT _____ GRADE _____ TEACHER _____

DATE: Pre-Group Assessment _____ Date: Post-Group Assessment _____

Part 1 - Please indicate rating of pre-group areas of concern in the left hand column.

Part 2 - Please indicate rating of post-group areas of concern in the right hand column.

Pre-Group Concerns Rank on a scale of 5→1 (5=Extreme→3=Moderate→1 = None)					Student Work Habits/Personal Goals Observed <i>Colleagues, please help evaluate the counseling group in which this student participated. Your opinion is extremely important as we strive to continuously improve our effectiveness with ALL students.</i>	Post-Group Concerns Rank on a scale of 5→1 (5=Extreme→3=Moderate→1 = None)				
5	4	3	2	1		5	4	3	2	1
					Academic Development					
					Follows directions					
					Listens attentively					
					Stays on task					
					Compliance with teacher requests					
					Follows rules					
					Manages personal & school property (e.g., organized)					
					Works neatly and carefully					
					Participates in discussion and activities					
					Completes and returns homework					
					Personal and Social Development					
					Cooperates with others					
					Shows respect for others					
					Allows others to work undisturbed					
					Accepts responsibility for own misbehavior (e.g., provoking fights, bullying, fighting, defiant, anger, stealing)					
					Emotional Issues (e.g., perfectionism, anxiety, anger, depression, suicide, aggression, withdrawn, low self-esteem)					
					Career Development					
					Awareness of the World of Work					
					Self-Appraisal					
					Decision Making					
					Goal Setting					
					Add Other Concerns:					

DOCUMENT 14:

TEACHER PRE/POST-GROUP PERCEPTIONS

Note: This document measures the teacher’s perceptions of the effectiveness of the group as a whole. The teacher could complete this form after the last group session has been completed.

(SAMPLE 2 OF 2)

TEACHER PRE/POST-GROUP PERCEPTIONS FORM

One or more of your students participated in a small counseling group about _____. We are seeking your opinion about the effectiveness of the group e.g., students’ relationship with the professional school counselor and other participants in the group and your observations of students’ behavioral/skill changes (positive or negative). We appreciate your willingness to help us meet the needs of all students effectively. The survey is anonymous unless you want us to contact you.

Teacher’s Name (optional): _____ Date: _____

Professional School Counselor’s Name: _____

Small Group Title: _____

Before the group started, I hoped students would learn:

While students were participating in the group I noticed these changes in their behavior/attitude

Using a scale of 5 to 1 (5 =strongly agree and 1=strongly disagree), please circle your opinion about the following

What do you think?	5=Strongly Agree 3= Neutral 1=Strongly Disagree				
Overall, I would rate my students’ experience in the counseling group as positive.	5	4	3	2	1
Students enjoyed working with other students in the group.	5	4	3	2	1
Students enjoyed working with the counselor in the group.	5	4	3	2	1
Students learned new skills and are using the skills in school	5	4	3	2	1
I would recommend the group experience for other students.	5	4	3	2	1

Additional Comments for Counselor:

DOCUMENT 12:

TEACHER/PARENT/GUARDIAN FOLLOW-UP FORM

Note: The Professional School Counselor has the option of sending this form to teachers/ parents/guardians after each group session to keep these individuals informed of student's progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

- | | | |
|------------|--------------------|--------------------|
| Friendship | Study Skills | Attendance |
| Feelings | Behavior | School Performance |
| Family | Peer Relationships | Other _____ |

Group Assignment:

I will complete or practice the following at school and/or at home before our next session:

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at _____ if you have further questions or concerns.

Note to Professional School Counselor: This form measures the student's perceptions of the overall effectiveness of the group using the same questions as teachers' and parents answer on their feedback forms. Students complete during the last session (or the follow-up session if you have one). This form may be adapted and used at the upper elementary, middle school or high school level.

DOCUMENT 16:

STUDENT POST-GROUP PERCEPTION FORM
(Sample 1 of 2)

Note: This student feedback form may be sent home with group members after the last group session. This form measures the group member's perceptions of the overall effectiveness of the group using the same questions as teachers and parents answer on their feedback forms. Group members complete during the last session (or the follow-up session if you have one). This is the secondary level form.

STUDENT FEEDBACK FORM

We want your opinion about the effectiveness of your group. We appreciate your willingness to help us make our work helpful to all students. The survey is anonymous unless you want us to contact you.

My Name (optional): _____ Date: _____

Professional School Counselor's Name: _____

Small Group Title: _____

Before the group started, I wanted to learn _____

Because of the group, I have noticed these changes in my thoughts, feelings, actions:

Using a scale of 5 to 1 (5 =strongly agree and 1=strongly disagree), please circle your opinion about the following:

What do you think?	5=Strongly Agree 3= Neutral 1=Strongly Disagree				
Overall, I would rate my experience in the counseling group as:	5	4	3	2	1
I enjoyed working with other students in the group	5	4	3	2	1
I enjoyed working with the counselor in the group.	5	4	3	2	1
I learned new skills and am using the skills in school	5	4	3	2	1
If other students ask me if they should participate in a similar group, I would recommend that they "give-it-a-try"	5	4	3	2	1
Additional Comments for the Counselor: 					

DOCUMENT 16:

STUDENT POST-GROUP PERCEPTIONS
(Sample 2 of 2)

Note: This feedback form may be sent home with group members after the last group session. This form measures the group member's perceptions of the overall effectiveness of the group using the same questions as teachers and parents answer on their feedback forms. Group members complete during the last session (or the follow-up session if you have one). This is the elementary level form.

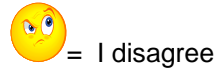
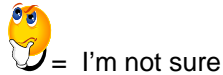
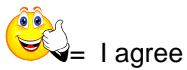
STUDENT FEEDBACK FORM

Directions: Please complete the Student Feedback Form after the last group session.

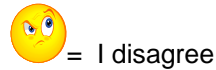
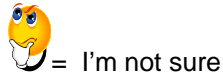
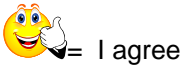
Name: _____ (optional) Date: _____

When I started the group, I wanted to learn about _____
Topic of Group

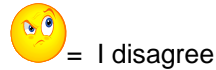
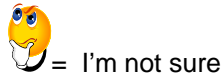
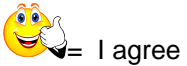
Instructions: Read each sentence. Put a circle around the face that shows how you think and feel right now about what you learned in the group.



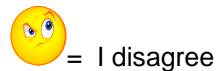
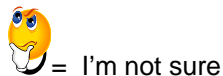
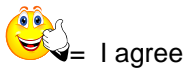
1. Overall, I would rate my experience in the counseling group as:



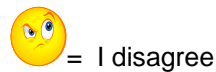
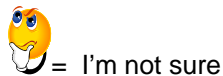
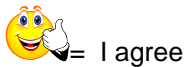
2. I enjoyed working with other students in the group



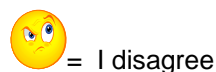
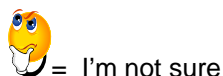
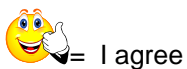
3. I enjoyed working with the counselor in the group.



4. I learned new skills and am using the skills in school.



5. If other students ask me if they should participate in a similar group, I would recommend that they give it a try



Additional comments you would like to share with the counselor:

DOCUMENT 16:

STUDENT POST-GROUP PERCEPTION FORM
(Sample 1 of 2)

Note: This student feedback form may be sent home with group members after the last group session. This form measures the group member's perceptions of the overall effectiveness of the group using the same questions as teachers and parents answer on their feedback forms. Group members complete during the last session (or the follow-up session if you have one). This is the secondary level form.

STUDENT FEEDBACK FORM

We want your opinion about the effectiveness of your group. We appreciate your willingness to help us make our work helpful to all students. The survey is anonymous unless you want us to contact you.

My Name (optional): _____ Date: _____

Professional School Counselor's Name: _____

Small Group Title: _____

Before the group started, I wanted to learn _____

Because of the group, I have noticed these changes in my thoughts, feelings, actions:

Using a scale of 5 to 1 (5 =strongly agree and 1=strongly disagree), please circle your opinion about the following:

What do you think?	5=Strongly Agree 3= Neutral 1=Strongly Disagree				
Overall, I would rate my experience in the counseling group as:	5	4	3	2	1
I enjoyed working with other students in the group	5	4	3	2	1
I enjoyed working with the counselor in the group.	5	4	3	2	1
I learned new skills and am using the skills in school	5	4	3	2	1
If other students ask me if they should participate in a similar group, I would recommend that they "give-it-a-try"	5	4	3	2	1

Additional Comments for the Counselor:

DOCUMENT 16:

STUDENT POST-GROUP PERCEPTIONS
(Sample 2 of 2)

Note: This feedback form may be sent home with group members after the last group session. This form measures the group member’s perceptions of the overall effectiveness of the group using the same questions as teachers and parents answer on their feedback forms. Group members complete during the last session (or the follow-up session if you have one). This is the elementary level form.

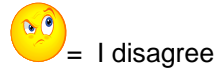
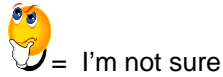
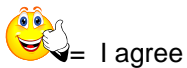
STUDENT FEEDBACK FORM

Directions: Please complete the Student Feedback Form after the last group session.

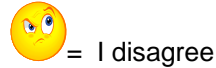
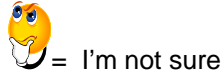
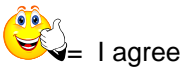
Name: _____ (optional) Date: _____

When I started the group, I wanted to learn about _____
Topic of Group

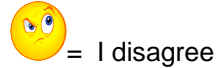
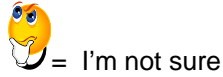
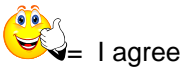
Instructions: Read each sentence. Put a circle around the face that shows how you think and feel right now about what you learned in the group.



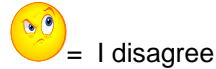
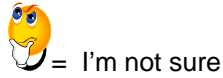
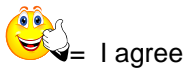
1. Overall, I would rate my experience in the counseling group as:



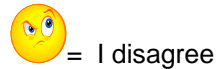
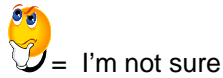
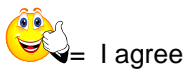
2. I enjoyed working with other students in the group



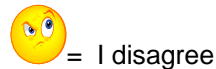
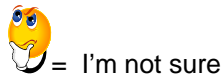
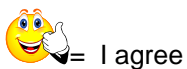
3. I enjoyed working with the counselor in the group.



4. I learned new skills and am using the skills in school.



5. If other students ask me if they should participate in a similar group, I would recommend that they give it a try



Additional comments you would like to share with the counselor:

DOCUMENT 13:

STUDENT POST-GROUP FOLLOW-UP INTERVIEW FORM

Note: This document serves as an example of a way to follow students' success in maintaining changes. It may also be used as a means for gathering data about students' perceptions of the effectiveness of the group. Students who participate in follow-up sessions after a group ends are more likely to maintain the gains made. The Professional School Counselor (PSC) should make arrangements to talk with group members individually and hold at least one more group session 4-6 weeks after the group has ended. The follow-up session will enable the PSC to assess how students are doing on their goals and the successes they are experiencing as a result of the group. Follow-up sessions provide data that will demonstrate the proven effectiveness of small group counseling.

Follow-up Interviews/Session with Students

Potential Interview Questions:

How are things going?

What specific skills are you practicing now that the group is over?

What was the most useful thing you learned from the group?

What skills would you like to practice?

How are things different for you now?

What is better?

What is in need of improvement?

What progress have you made toward the goals you set for yourself at the end of our group meetings?

How are you keeping yourself accountable?

What suggestions do you have for future groups?

Rank your overall experience on a scale from 5 → 1 : _____

5 = Most positive activity in which I have participated for a long time

4 = Gave me a lot of direction with my needs

3 = I learned a lot about myself and am ready to make definite changes

2 = I did not get as much as I had hoped out of the group

1 = The group was a waste of my time

What contributed to the ranking you gave your experience in the group? What could have made it better?

Document 12:

**TEACHER/PARENT/GUARDIAN
FOLLOW-UP FORM**

The counselor has the option of sending this form to teachers or parents/guardians after each group session to keep these individuals informed of student's progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ **Time:** _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

POST-SMALL GROUP FOLLOW-UP WITH STUDENTS

(OPTIONAL SESSION scheduled 4-6 weeks after group ends)

Level: Elementary/Middle School/High School

Note to Professional School Counselor: *The Follow-up Session Feedback Form for Students may be used in several ways, e.g., as an alternative "Procedure" for the post-group follow-up session, as a discussion guide, or (if post-group follow-up session is NOT scheduled) as a guide for interviewing individual students 4-6 weeks after the group ends. Adapt as appropriate for developmental level of students.*

FOLLOW-UP SESSION FEEDBACK FORM FOR STUDENTS

Name: _____ (optional) Date: _____

Questions:

1. What specific skills are you practicing now that the group is over?
2. What was the most useful thing you learned from the group?
3. What could you use more practice on?
4. How are things different for you now?
5. What Progress have you made toward the goals you set for yourself at the end of our group meetings?
6. How are you keeping yourself accountable?
7. What suggestions do you have for future groups?
8. Circle your overall experience in the group on a scale from 1 → 5 _____

1=Most positive activity in which I have participated for a long time
2=Gave me a lot of direction with my needs
3=I learned a lot about myself and am ready to make definite changes
4=I did not get as much as I had hoped out of the group
5=The group was a waste of my time
9. What specific "things" contributed to the ranking you gave your experience in the group?
10. What would have made it better?

Additional comments you would like to share with the school counselor:

DOCUMENT 18:

Small Group Counseling Guidelines Poster

Note: This list may be used as best meets the students' age/grade level. It could be posted in the room, handed out to the students, or turned in to a worksheet with space for each group to add their own guidelines.

Small Group Counseling Guidelines

1. All participants observe confidentiality.
 - a. Counselor
 - b. Student
2. Everyone will be an active listener.
3. Everyone has an opportunity to participate and share.
4. Use positive language.
5. All participants will treat each other with respect.

Group Title: Introduction

This is a sample introduction session for establishing small group norms.

Session Title: Establishing Small Group Norms

Session # 1 of 1

Grade Level: K-12

Estimated time: 30 minutes

Small Group Counseling Session Purpose: To establish small group counseling guidelines, to discuss the purpose of the group, and to begin student self-evaluation process.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

Insert appropriate Strand/Big Idea(s) for the small group in this section.

Missouri Comprehensive Guidance and Counseling Concept(s):

Insert the associated Concept(s) in this section.

American School Counselor Association (ASCA) National Standard:

NOTE: The overall purpose of the MCGCP small group counseling units and sessions is to give extra support to students who need help meeting specific Comprehensive Guidance and Counseling Program Grade Level Expectations (GLEs). This small group counseling unit provides a template that allows you to personalize sessions to meet the unique needs of your students. Your knowledge of the developmental levels, background and experiences of your students determine the depth and level of personal exploration required to make the sessions beneficial for your students.

INTRODUCTION Materials (include activity sheets and/ or supporting resources)

Chart paper

Markers

[*Small Group Counseling Guidelines*](#)

INTRODUCTION Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Share small group counseling guidelines and monitor personal behavior within the group, such as: waiting to speak, listening to what others have to say, and responding to others' statements without putting them down.

INTRODUCTION Session Preparation

Essential Questions: How do people communicate their ideas in a group? How do people treat each other in a group?

Engagement (Hook): What groups do you belong to? What groups would you like to belong to?

INTRODUCTION Procedures

Professional School Counselor Procedures:	Student Involvement:
<p>1. “Today, we are going to talk about working within groups and how small group counseling guidelines help members as they work together.” Introduce the Small Group Counseling Guidelines. Students may wish to add additional guidelines suitable for their specific group.</p> <p>When discussing the term, <i>confidentiality</i>, relate it to outside-the-group talk versus inside-the-group talk. The members may talk with someone outside the group about something they may have said, but they cannot talk about who the members of the group are, or what others shared. Acknowledge student suggestions as examples of how confidentiality can be maintained.</p> <p>Post Small Group Counseling Guidelines, including any additional guidelines the group develops, for the group to refer to during each group session. Remind students that they will be expected to follow the guidelines during each session.</p> <p>2. Introduce the icebreaker activity: Review the groups that were discussed during the hook. “What were some the positive things that made you feel good when you were with that group? Or, if you didn’t enjoy the group, what would have made the experience better for you?”</p> <p>NOTE: This activity can be done in a number of ways:</p> <ul style="list-style-type: none"> • Students may work in a Think-Pair-Share in which they are placed into pairs to discuss the prompts and come up with ideas together. • Students may work with a large piece of chart paper or bulletin board paper to come up with ideas in graffiti form which is presented for final group approval. • Solicit information from the entire group for consideration, which is then to be written on chart paper and edited through group approval. <p>3. Discuss the purpose of the group. Ask what the students would like to learn or achieve in the next few weeks in the group. Record student responses for future reference.</p>	<p>1. Students discuss the guidelines and offer their definitions of each guideline. The students decide upon any other group guidelines they would like to add. As guidelines are accepted, students discuss how they will be expected to follow them.</p> <p>Students make suggestions for maintaining confidentiality.</p> <p>2. Students develop a list of experiences; either individually, with another student, or with the group. Possible student comments might be:</p> <ul style="list-style-type: none"> • We treat others as we would like to be treated. • Everyone gets a turn. • Nobody gets left out. • No put-downs. • Take turns when speaking. • Everyone has a chance to share. • Listen when others are speaking. • Put away equipment when you are finished. • Respect each other’s differences. <p>3. Students share ideas about what they would like to learn or achieve.</p>

<i>Professional School Counselor Procedures:</i>	<i>Student Involvement:</i>
<p>Closure/Summary: Review the small group counseling guidelines with the students. Give students time and date of the next session.</p>	<p>Closure/Summary: Students review the small group counseling guidelines and note the date and time of the next session.</p>

INTRODUCTION Follow-Up Activities (Optional)

INTRODUCTION Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives be better as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

SESSION #1

Group Title: Coping With Life Changes-Missing You

Session Title: Getting to Know You

Session # 1 of 6

Grade Level: K-2

Estimated time: 30 min

Small Group Counseling Session Description:

Students will learn group guidelines and identify a personal loss.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA)National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

SESSION #1 Materials (include activity sheets and/ or supporting resources)

Pillow Case (or T-Shirt or large piece of construction paper) - 1 for every student

Markers (sharpie or permanent markers work best)

Cardboard (to put between pillow case or t-shirt)

[*Small Group Counseling Guidelines*](#)

[*Teacher/Parent/Guardian Small Follow-Up Form \(Document 12\)*](#)

SESSION #1 Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Students will understand their purpose for being in the group. Students will draw on their pillowcase a picture of their deceased loved one.

SESSION #1 Preparation

Essential Questions: Why is it important for you to be here?

Engagement (Hook): The Professional School Counselor engages in a role play discussion with a puppet. The puppet has lost something (i.e. cell phone) and expresses how he feels about the loss (i.e., angry, frustrated, sad, worried). The school counselor summarizes the puppet's response and asks the group to tell the puppet how they would feel if they had lost the same item. The school counselor says "We all lose things but when we lose people we love or care about our feelings are stronger and we might need help and support to feel better." "Hopefully, in this group we will help and support one another."

SESSION #1 Procedures

<i>Professional School Counselor Procedures:</i>	<i>Student Involvement</i>
<ol style="list-style-type: none"> 1. Discuss Group Guidelines, including student additions. Refer to the Small Group Counseling Guidelines 2. Let each student introduce themselves and why they are part of the group. 3. Tell students to draw a picture of the person they have lost and want to remember on their pillowcase. 4. Closure/Summary: “How did you feel while you were working on your drawing today? What other feelings did you hear other group members discuss today?” 5. Group assignment: Ask students to pay attention to the specific feelings that occur this week in relationship to their feelings of their loved one. “We will be sharing those at the next session.” 	<ol style="list-style-type: none"> 1. Students may add any guidelines they want the group to follow. 2. Introductions are made. 3. Students draw pictures of their loved ones on the pillowcase. 4. Closure/Summary : Students discuss their feelings. 5. Group assignment: Students will pay attention to their feelings during the week about their lost loved one.

SESSION #1 Follow-Up Activities

Professional School Counselor will check in with teacher to monitor student’s classroom performance and behaviors.

SESSION #1 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students’ lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Document 12:

**TEACHER/PARENT/GUARDIAN
SMALL GROUP FOLLOW-UP**

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student’s progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student’s Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

- | | | |
|------------|--------------------|--------------------|
| Friendship | Study Skills | Attendance |
| Feelings | Behavior | School Performance |
| Family | Peer Relationships | Other _____ |

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

SESSION #2

Group Title: Coping With Life Changes-Missing You

Session Title: Facing Feelings

Session # 2 of 6

Grade Level: K-2

Estimated time: 30 min

Small Group Counseling Session Description:

Students will be able to name different feelings associated with the death of their loved one.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

SESSION #2 Materials (include activity sheets and/ or supporting resources)

Pillow Case from last session (t-shirt or large construction paper) - 1 for every student

Markers (sharpie or permanent markers work best)

Cardboard (to put between pillow case or t-shirt)

Book about death/dying/grief and/or feelings

Puppet

Chart paper

[Teacher/Parent/Guardian Group Follow-Up \(Document 12\)](#)

SESSION #2 Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Students will be able to state different feelings they have regarding the death of their loved one.

SESSION #2 Preparation

Essential Questions: How do we feel about death?

Engagement (Hook): Introduce puppet. Say, "(Puppet's Name) has lots of feelings inside. Sometimes he's angry, red as a hot chili pepper. Sometimes he's sad, as blue as a rainy day. Sometimes he's excited, yellow as a sunny day. Sometimes he's frightened, white as a ghost. I bet sometimes you have different colors inside you too."

SESSION #2 Procedures

<i>Session #2: Professional School Counselor Procedures:</i>	<i>Session #2: Student Involvement</i>
<ol style="list-style-type: none"> 1. Review <u>Small Group Counseling Guidelines</u> 2. Review previous session. 3. The counselor welcomes everyone to the group. Explain that today the group will be focusing on feelings. There are many types of feelings (can explain the feeling words from the hook here if the students don't understand them). "It's okay to have all the feelings. It's even okay to have more than one feeling at the same time." 4. Read a book about grief/feelings. 5. Have students identify different feelings in the story and see if they have felt any of those feelings before. As students state feelings, the counselor will write a list of all the feelings mentioned on chart paper. 6. Instruct students to identify a couple feelings they have and will display these on their pillowcase either with colors, pictures, or words. Instruct students to refer to the color coding in the hook to choose which colors to use. 7. Closure/Summary: Counselor reviews the session including the book and different types of feelings. 8. Group assignment: Students will try to notice when they are experiencing different feelings and what kind of feeling it is. 	<ol style="list-style-type: none"> 1. Students listen and ask questions. 2. Students share what they remember from the previous session. 3. Students listen to the counselor. 4. Students listen to the reading of the book. 5. Students state different feelings and share with the group when they have felt that way. Students will choose a few feeling words off the list and draw or color their feelings on a designated part of their pillowcase. 6. Students will use the list to identify a couple feelings they have and will display these on their pillowcase either with colors, pictures, or words. Students will refer to the color coding in the hook to choose which colors to use. 7. Closure/Summary: Students will state feelings and understand it is acceptable to have more than one feeling at a time. 8. Group assignment: Students will try to be more aware of their feelings.

SESSION #2 Follow-Up Activities

Professional School Counselor will check in with teacher to monitor student's classroom performance and behaviors.

SESSION #2 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Document 12:

**TEACHER/PARENT/GUARDIAN
FOLLOW-UP FORM**

The counselor has the option of sending this form to teachers or parents/guardians after each group session to keep these individuals informed of student's progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ **Time:** _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

SESSION #3

Group Title: Coping With Life Changes-Missing You

Session Title: Stick by Me

Session # 3 of 6

Grade Level: K-2

Estimated time: 30 min

Small Group Counseling Session Description:

Students will learn the meaning of a support and be able to name different supports they have.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

SESSION #3 Materials (include activity sheets and/ or supporting resources)

Pillowcase from last session (t-shirt or large piece of construction paper) - 1 for every student

Markers (sharpie or permanent markers work best)

Cardboard (to put between pillowcase or t-shirt)

Old Crayons

Popsicle sticks

Chart Paper

[*Teacher/Parent/Guardian Follow-Up From \(Document 12\)*](#)

SESSION #3 Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Students will name different people in their lives who can help them cope with the loss of their loved one.

SESSION #3 Preparation

Essential Questions: Who do you talk to when you are feeling bad?

Engagement (Hook): The Professional School Counselor shows students one crayon and says the following: “It is all alone. (*Break the crayon, place next to popsicle stick*) With one support it may be easy to break, but still more difficult than when it stood alone.” (*Try to break the crayon holding it against the one popsicle stick*). Say “With more than one popsicle stick around the crayon, you cannot break it. The more support you have, the easier it is to deal with your feelings and cope with your problems, so you don't break down.” (*Show students that the crayon will not break with the popsicle sticks surrounding it.*)

SESSION #3 Procedures

<i>Session #3: Professional School Counselor Procedures:</i>	<i>Session #3: Student Involvement</i>
<ol style="list-style-type: none"> 1. Review Small Group Counseling Guidelines. 2. Review previous session. 3. Welcome everyone to the group. Explain that today we will be focusing on sources of support. Define a source of support as someone or something that is there for us; to listen and to help us feel better. There are many types of supports-parents/guardians, siblings, teachers, relatives, friends, pets, church, and other relationships. “Sometimes we forget how many sources of support we have.” 4. Make a list on chart paper of different sources of support the students suggest, prompting them as needed. 5. On their pillow cases, have students write the names of at least three sources of support they have and can rely on in this instance of grief. Students can use the chart paper list to help identify these sources of support. 6. Instruct students to display their sources of support on their pillowcase and share with the group. 7. Closure/Summary: Counselor asks the following: “What did we discuss today? What is a source of support? Who/What/Where can be a source of support?” 8. Group assignment: “Be aware of those around you and who can be a source of support.” 	<ol style="list-style-type: none"> 1. Students listen and ask questions. 2. Students share what they remember from the previous session. 3. Students listen to today's hook and name possible sources of support. 4. Students will give examples of various personal sources of support: parents/guardians, siblings, teachers, relatives, friends, pets, church, and other relationships. 5. Students have the opportunity to write or draw pictures of their sources of support on their pillow cases. 6. Students share their “decorated” pillow cases with the group. 7. Closure/Summary: Students will respond to the counselor's questions. 8. Group assignment: Students think about and notice sources of support.

SESSION #3 Follow-Up Activities

Professional School Counselor will check in with teacher to monitor student’s classroom performance and behaviors.

SESSION #3 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Document 12:

**TEACHER/PARENT/GUARDIAN
FOLLOW-UP FORM**

The counselor has the option of sending this form to teachers or parents/guardians after each group session to keep these individuals informed of student's progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ **Time:** _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

SESSION #4

Group Title: Coping With Life Changes-Missing You

Session Title: Skill Builder

Session # 4 of 6

Grade Level: K-2

Estimated time: 30 min

Small Group Counseling Session Description:

Students will learn different coping strategies and be able to identify the ones that will best help them in dealing with the loss of their loved one.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

SESSION #4 Materials (include activity sheets and/ or supporting resources)

Pillowcase from last session (t-shirt or large piece of construction paper) - 1 for every student

Markers (sharpie or permanent work best)

Cardboard (to put in between pillowcase or t-shirt)

Cut out list of [Skill Building Strategy Strips](#)

Cup/Bag

[Teacher/Parent/Guardian Follow-Up Form \(Document 12\)](#)

SESSION #4 Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Students will be able to name different coping strategies in order to help them cope with the loss of their loved one.

SESSION #4 Session Preparation

Essential Questions: What activities help us cope with loss?

Engagement (Hook): The counselor draws a strategy from the bag of skill builder strategy strips. The counselor acts it out and then asks the students, "How could this help me cope with the loss of a loved one?"

SESSION #4 Procedures

<i>Session #4: Professional School Counselor Procedures:</i>	<i>Session #4: Student Involvement</i>
<ol style="list-style-type: none"> 1. Review Small Group Counseling Guidelines. 2. Review previous session. 3. Welcome everyone to the group. Explain that today we will be focusing on ways to cope. 4. Place Skill Builder Strategy Strips into a cup or bag. When a student pulls out a strategy whisper it into the student's ear. They have 20 seconds to act it out and have each group member guess what strategy they had. 5. Have students name at least three coping strategies they can use to help them cope with their grief. 6. Ask students to display the skills on their pillowcase either with words or pictures. 7. Closure/Summary: “What did we discuss today?” Ask students to name a skill they will try sometime this week. 8. Group assignment: “Practice the skill you have chosen before the next session.” 	<ol style="list-style-type: none"> 1. Students listen and ask questions. 2. Students share what they remember from the previous session. 3. Students listen. 4. Students take turns grabbing a strategy strip and acting it out. The students who are not acting will be guessing the strategy. The student gets to tell the group members what it is. After the group knows the strategy, everyone in the group acts it out the same way the original student did it. Students can give a thumbs-up if they think this particular strategy may help them feel better in their own situation. 5. Allow each student to share three coping strategies they think will help them. 6. Students will add their chosen coping strategies to the pillowcase. 7. Closure/Summary: Students respond to questions. 8. Group assignment: Students will practice their chosen skill before the next session.

SESSION #4 Follow-Up Activities

Remind students during the week to practice their chosen skill.

SESSION #4 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students’ lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Skill Builder Strategy Strips

Talk to a source of support

Smile

Think of loved one

Talk on the phone

Carry a picture with you

Take a walk

Draw

Fly a kite

Run

Create a riddle

Write

Tell a joke

Read

Try to wink

Ride a bike

Stop and think

Sing

Paint

Play a game

Play catch

Jump rope

Kick a soccer ball

Pet an animal

Swing

Dance

Bird watch

Eat

Look for shapes in clouds

Laugh

Spin

Help someone

Make something

Drink water

Blow up a balloon

Take pictures

Bake or cook

Take a nap

Look for a four leaf clover

Give a hug

Take a hike

Document 12

**TEACHER/PARENT/GUARDIAN
FOLLOW-UP FORM**

The counselor has the option of sending this form to teachers or parents/guardians after each group session to keep these individuals informed of student’s progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student’s Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

Today we talked about the following information during our group:

Circle one or more items.

- | | | |
|------------|--------------------|--------------------|
| Friendship | Study Skills | Attendance |
| Feelings | Behavior | School Performance |
| Family | Peer Relationships | Other _____ |

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ **Time:** _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

SESSION #5

Group Title: Coping With Life Changes-Missing You

Session Title: Memory Maker

Session # 5 of 6

Grade Level: K-2

Estimated time: 30 min

Small Group Counseling Session Description:

Students will recall and share memories they have of their loved one.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

SESSION #5 Materials (include activity sheets and/ or supporting resources)

Pillowcase from last session (t-shirt or large piece of construction paper) - 1 for every student.

Markers (sharpie or permanent markers work best)

Cardboard (to put in between pillowcase or t-shirt)

Tape recorder or CD player with the selected song about memories ready to play.

Unit Assessments (attached to the Unit Plan)

[Student Behavior Rating Form \(Document 4\)](#)

[Teacher Follow-Up Form \(Document 12\)](#)

[Parent/Guardian Cover Letter](#)

[Parent/Guardian Post-Group Perception Form \(Document 15\)](#)

SESSION #5 Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Students will remember fun activities, funny things that happened, and other memories of their loved one in order to help them cope.

SESSION #5 Session Preparation

Essential Questions: How do memories help us cope with loss?

Engagement (Hook): As students are coming in, have a song about memories playing on a tape recorder or CD player. Have students sit quietly and listen (or they can sing along) as the song finishes. Some possible songs are: “I Will Remember You”, “Because You Loved Me”, “Time of Your Life”, “Wind Beneath My Wings”, “It’s So Hard to Say Goodbye to Yesterday”, “Memories”, or other appropriate songs.

SESSION #5 Procedures

<i>Session #5: Professional School Counselor Procedures:</i>	<i>Session #5: Student Involvement</i>
<ol style="list-style-type: none"> 1. Review Small Group Counseling Guidelines. 2. Review previous session. 3. The counselor welcomes everyone to the group. Explain that today we will be focusing on our memories with the loved one. Define memories as special or favorite times that we share with our families, friends, and loved ones that we remember and never forget. (The counselor may share a memory of a loved one as an example.) 4. Tell students they will have a short amount of time to share a memory about his or her loved one without interruptions. After each student speaks, allow group members to ask questions. The student will be encouraged to answer, if they are comfortable with sharing. 5. Closure/Summary: Students will think of their favorite or special memory and place it on their pillowcase. 6. Group assignment: The counselor tells students to think of happy memories of their loved one. 	<ol style="list-style-type: none"> 1. Students listen and ask question. 2. Students share what they remember from the previous session. 3. Students listen. 4. Students take turns sharing something special about their loved one. While one student speaks the rest of the group listens and thinks of any questions or comments they may want to make. 5. Closure/Summary: Students spend some time adding favorite memories to their pillow case. 6. Group assignment: Students remember happy times with a loved one.

SESSION #5 Follow-Up Activities

Remind students during the week to come prepared for the next session with a happy memory.

SESSION #5 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

**TEACHER/PARENT/GUARDIAN
SMALL GROUP FOLLOW-UP**

The counselor has the option of sending this form to teachers or parents/guardians after each group session to keep these individuals informed of student's progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

- | | | |
|------------|--------------------|--------------------|
| Friendship | Study Skills | Attendance |
| Feelings | Behavior | School Performance |
| Family | Peer Relationships | Other _____ |

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ **Time:** _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

SESSION #6

Group Title: Coping with Life Changes-Missing You

Session Title: Bring It Full Circle

Session # 6 of 6

Grade Level: K-2

Estimated time: 30 min

Small Group Counseling Session Description:

Students will combine all the skills they have learned from the group sessions. They will choose a coping strategy and identify a support to help them implement this strategy.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):

Personal Social Development: PS.3 Applying personal safety skills and coping strategies

Missouri Comprehensive Guidance and Counseling Concept(s):

PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:

Personal/Social Development

C. Students will understand safety and survival skills.

SESSION #6 Materials (include activity sheets and/ or supporting resources)

Pillowcase from last session (t-shirt or large piece of construction paper) - 1 for every student.

Markers (sharpie or permanent markers work best)

Cardboard (to put in between pillowcase or t-shirt)

Lists from previous groups

Snacks

[Teacher/Parent/Guardian Follow-Up Form \(Document 12\)](#)

[Student Post-Group Perception Form \(Document 16\)](#)

[Certificate of Completion](#)

SESSION #6 Formative Assessment

Assessment should relate to the performance outcome for goals, objectives and GLEs.

Assessment can be question answer, performance activity, etc.

Students will use a coping skill with help from their support(s) in order to deal with the loss of a loved one.

Perceptual Data Collection:

The following end-of-group perceptual data collection forms will be used as a part of session four and five; the forms are attached to the Unit Plan:

Classroom Teacher Assessment:

- The classroom teacher will complete the [Student Behavior Rating Form \(Document 4\)](#) for each student before the group starts and after the group has been completed. Counselor may consider making two copies of this form, one for the pre-assessment and one for the post-assessment, then entering all data on a final form for comparison.

- [Teacher Pre-Post Group Perception Form \(Document 14\)](#) will be given to teacher to complete at the end of the group unit.

Parent Assessment:

- [Parent/Guardian Post-Group Perception Form \(Document 15\)](#) will be given to parents to complete at the end of the group unit.

Student Assessment:

- [Student Post-Group Perception Form \(Document 16\)](#) will be given to students to complete at the end of the group unit.

SESSION #6 Session Preparation

Essential Questions: How can you enjoy life after a loved one is gone?

Engagement (Hook): Have students sit in a close circle, all facing to their right. Students will rub the shoulders of the person in front of them for 30 seconds. Then all students turn to their left. Students will rub the shoulders of the person in front of them for 30 seconds. (Can do pats on the back, depending on the make up of the group). Discuss with the group members how we can work together with others to help us feel better.

SESSION #6 Procedures

<i>Session #6: Professional School Counselor Procedures:</i>	<i>Session #6: Student Involvement</i>
1. Review Small Group Counseling Guidelines .	1. Students listen and ask questions.
2. Review previous session.	2. Students share what they remember from the previous session.
3. The counselor welcomes everyone to the group. Explain that today we will combine all of the skills that we have learned and celebrate our successes.	3. Students listen.
4. Review feelings, supports, and coping skills with the group.	4. Students respond to questions describing what they remember about each topic.
5. Have students look at the lists from the previous groups. Ask students to select one coping skill and one source of support that will help them cope with the loss of their loved one.	5. Each student will select a coping skill and one source of support that will help them cope with the loss of a loved one.
6. Ask students to demonstrate what they have learned through pictures or words on their pillowcase.	6. Students will demonstrate what they have learned through pictures or words on their pillowcase.

<i>Session #6: Professional School Counselor Procedures:</i>	<i>Session #6: Student Involvement</i>
7. The counselor provides snacks for the group and asks students to share their pillowcases with the group.	7. The students eat a snack and share their pillowcases with the group.
8. Discuss with students how to use the words and pictures on their pillowcases as a reminder of their loved one and strategies for coping with their loss.	8. Students listen.
9. Closure/Summary: Thank everyone for being there; remind them that you are a source of support for them as well.	9. Closure/Summary: Students listen.
10. Group assignment: “Notice which activities and sources of support you are using and be prepared to report those during the follow-up session.”	10. Group assignment: Students will notice the activities and sources of support they are using.

SESSION #6 Follow-Up Activities

Check in with teachers/parents/guardians to determine how the students are doing.

Follow-up session or check in with students in a couple of weeks to determine how they are feeling and coping.

SESSION #6 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students’ lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Note to Professional School Counselor: *The Student Feedback Form measures the student's perceptions of the overall effectiveness of the group using the same questions as teachers' and parents answer on their feedback forms. Students complete during the last session. This form is most appropriate for use at the upper elementary, middle school or high school levels.*

**SMALL GROUP COUNSELING
STUDENT POST-GROUP PERCEPTIONS:**

STUDENT FEEDBACK FORM: OVERALL EFFECTIVENESS OF GROUP

We want your opinion about the effectiveness of your group. We appreciate your willingness to help us make our work helpful to all students. The survey is anonymous unless you want us to contact you.

My Name (optional): _____ Date: _____

Professional School Counselor's Name: _____

Small Group Title: _____

Before the group started, I wanted to learn _____

Because of the group, I have noticed these changes in my thoughts, feelings, actions:

Using a scale of 5 to 1 (5 being the highest and 1 the lowest), please circle your opinion about the following

What do you think?	5=High					1=Low
Overall, I would rate my experience in the counseling group as:	5	4	3	2	1	1
I enjoyed working with other students in the group	5	4	3	2	1	1
I enjoyed working with the counselor in the group.	5	4	3	2	1	1
I learned new skills and am using the skills in school	5	4	3	2	1	1
If other students ask me if they should participate in a similar group, I would recommend that they "give-it-a-try"	5	4	3	2	1	1
Additional Comments for the Counselor: 						

Document 12:

**TEACHER/PARENT/GUARDIAN
SMALL GROUP FOLLOW-UP**

The counselor has the option of sending this form to teachers or parents/guardians after each group session to keep these individuals informed of student’s progress in the group.

GROUP TOPIC: _____ **Session #** _____

Student’s Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

Today we talked about the following information during our group:

Circle one or more items.

- | | | |
|------------|--------------------|--------------------|
| Friendship | Study Skills | Attendance |
| Feelings | Behavior | School Performance |
| Family | Peer Relationships | Other _____ |

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ **Time:** _____

Additional Comments:

Please contact _____, Professional School Counselor at _____ if you have further questions or concerns.



Group Certificate of Completion

Student's Name

successfully completed the

“ _____ ” group

*One awesome skill used by _____
was _____*



WAY TO GO!

Professional School Counselor

OPTIONAL FOLLOW-UP SESSION

Group Title: Coping With Life Changes-Missing You

Session Title: How Are You Doing?

Session: Follow-up (4-6 weeks after last session)

Grade Level: K-2

Estimated time: 30-45 minutes

Small Group Counseling Follow-up Session Purpose: The Professional School Counselor (PSC) may facilitate at least one more group session 4-6 weeks after the group has ended. This session helps the PSC track students’ persistence and success in applying new skills and making changes in their lives. Students who participate in follow-up sessions after a group ends are more likely to maintain the gains made during the group sessions.

Missouri Comprehensive Guidance and Counseling Content Area Strand/Big Idea(s):
 Personal and Social Development: PS.3.Applying Personal Safety Skills and Coping Strategies

Missouri Comprehensive Guidance and Counseling Concept(s):
 PS.3.A. Safe and Healthy Choices
 PS.3.B. Personal Safety of Self and Others
 PS.3.C. Coping Skills

American School Counselor Association (ASCA) National Standard:
 Personal/Social Development
 A. Students will acquire the knowledge, attitudes and interpersonal skills to help them understand and respect self and others.

OPTIONAL FOLLOW-UP SESSION

Materials (activity sheets and/ or supporting resources are attached)

8 ½ x 11 paper for each participant; crayons/markers/pencils
 Alternative Procedure: Complete the [Student Post-Group Perception Form \(Document 16\)](#). Discuss after completing.

OPTIONAL FOLLOW-UP SESSION Formative Assessment

This session does not require a formative assessment. It is intended to measure students’ perceptions of the group’s effectiveness over time.

Alternative Procedure: Use the [Student Post-Group Perception Form \(Document 16\)](#) as the procedure and the assessment for the Follow-up Session. The developmental level of your students will determine the usefulness of this alternative with younger students.

OPTIONAL FOLLOW-UP SESSION Preparation

Essential Questions: What does everyone have in common in this group?

Engagement (Hook): What has changed for you as a result of this group?

OPTIONAL FOLLOW-UP SESSION PROCEDURES

Professional School Counselor Procedures: Optional Follow-up Session

Note for PSC: The group follow-up session will give participants a chance to celebrate each other’s successes over time.

1. Welcome students back to the group. Remind them about the [Small Group Counseling Guidelines](#).
2. Invite each student to tell one thing he or she remembers from the group meetings. “I remember _____.”
3. Give each student an 8 ½ x 11 piece of paper. Instruct students to follow you as you fold your paper into fourths; unfold the paper and number the sections 1-4. Give the directions for the quadrants one at a time. Complete all quadrants. Invite students to share one quadrant at a time; discuss responses before going to the next quadrant.

1. With a picture or words, demonstrate what you learned from group.	2. With a picture or a word, describe the most useful thing you learned from the group.
3. With a picture or words, describe a skill you need to practice.	4. With a picture or words, explain how you have changed.

Alternative Procedure: An option for gathering student feedback during the follow-up session is to use the [Student Post-Group Perception Form \(Document 16\)](#). Discuss with students after they have completed the form.

Student Involvement: Optional Follow-up Session

1. Students participate in the review of the guidelines by telling what they remember and by reminding each other of what the guidelines mean.
2. Students contribute a specific example of something they remember about the group.
3. Students follow directions of the school counselor, asking clarifying questions as needed. They share their words/drawings. The school counselor will acknowledge on-topic sharing.

Alternative Procedure: Students complete the form and discuss their responses.

OPTIONAL FOLLOW-UP SESSION Follow-Up Activities

If students completed the (optional) [Student Post-Group Perception Form \(Document 16\)](#), use the responses to prepare a data summary and report of group’s effectiveness.

OPTIONAL FOLLOW-UP SESSION Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students’ lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Document 16:

STUDENT POST-GROUP PERCEPTION FORM
 (OPTIONAL SESSION scheduled 4-6 weeks after group ends)
 Level: Elementary/Middle School/High School

Note to Professional School Counselor: *The Follow-up Session Feedback Form for Students may be used in several ways, e.g., as an alternative "Procedure" for the post-group follow-up session, as a discussion guide, or (if post-group follow-up session is NOT scheduled) as a guide for interviewing individual students 4-6 weeks after the group ends. Adapt as appropriate for developmental level of students.*

FOLLOW-UP SESSION FEEDBACK FORM FOR STUDENTS

Name: _____ (optional) Date: _____

Questions:

1. What specific skills are you practicing now that the group is over?
2. What was the most useful thing you learned from the group?
3. What could you use more practice on?
4. How are things different for you now?
5. What Progress have you made toward the goals you set for yourself at the end of our group meetings?
6. How are you keeping yourself accountable?
7. What suggestions do you have for future groups?
8. Circle your overall experience in the group on a scale from 1 → 5 _____
 1=Most positive activity in which I have participated for a long time
 2=Gave me a lot of direction with my needs
 3=I learned a lot about myself and am ready to make definite changes
 4=I did not get as much as I had hoped out of the group
 5=The group was a waste of my time
9. What specific "things" contributed to the ranking you gave your experience in the group?
10. What would have made it better?

DOCUMENT 15:

PARENT/GUARDIAN POST-GROUP PERCEPTION FORM

Parent/Guardian Feedback Form

Your student participated in a small counseling group about _____. Was this group experience helpful for your student? Following is a survey about your observations of changes (positive or negative) your student made at home while participating in the group at school and since the group ended. The survey will help us meet the needs of all students more effectively. The survey is anonymous unless you want to provide your name for the school counselor to contact you. We appreciate your feedback.

Professional School Counselor: _____ Date: _____

Small Group Title: _____

Before the group started, I hoped my student would learn _____

I've noticed these changes in my student's behavior and/or attitude as a result of participating in the group:

Using a scale of 5 to 1 (5 =strongly agree and 1=strongly disagree), please circle your opinion about the following:

What do you think?	5=Strongly Agree 3= Neutral 1=Strongly Disagree				
Overall, I would rate my student's experience in the counseling group as positive	5	4	3	2	1
My student enjoyed working with the other students in the group.	5	4	3	2	1
My student enjoyed working with the counselor in the group.	5	4	3	2	1
My student learned new skills and is using the skills in and out of school.	5	4	3	2	1
I would recommend the group experience to other parents whose students might benefit from the small group.	5	4	3	2	1
Additional Comments:					

DOCUMENT 4:

STUDENT BEHAVIOR RATING FORM
(Adapted from Columbia Public Schools Rating Form)

Note: (See also [Document 14: Teacher Pre/Post-Group Perception Form](#)). This document is not limited to a single purpose—it may be used in several ways. In the *Small Group Counseling Module*, it is suggested as a pre-and post-group measure of students' behavior. Used in this way, it forms the basis for evaluating the effectiveness of the group experience. In addition, the form may be used for referral when a referring individual has multiple concerns about an individual student. The listing of behaviors is valuable in consultation with other professionals, parents AND students. Modify to fit your needs!

STUDENT _____ GRADE _____ TEACHER _____ DATE _____

Teachers: please indicate areas of concern in the left hand column.		Counselor: use columns on right side. Performance Indicators: (+) = Excellent (/) = Satisfactory (-) = Area of Concern				
Teacher Concerns (mark with X)	Student Work Habits/Personal Goals Observed	Counselor (Modify to fit school marking periods (e.g. quarters, trimesters))				
		Marking Period 1	Marking Period 2	Marking Period 3	Marking Period 4	Marking Period 5
	Academic Development					
	Follows directions					
	Listens attentively					
	Stays on task					
	Compliance with teacher requests					
	Follows rules					
	Manages personal & school property (e.g., organized)					
	Works neatly and carefully					
	Participates in discussion and activities					
	Completes and returns homework					
	Personal and Social Development					
	Cooperates with others					
	Shows respect for others					
	Allows others to work undisturbed					
	Accepts responsibility for own misbehavior (e.g., provoking fights, bullying, fighting, defiant, anger, stealing)					
	Emotional Issues (e.g., perfectionism, anxiety, anger, depression, suicide, aggression, withdrawn, low self-esteem)					
	Career Development					
	Awareness of the World of Work					
	Self-Appraisal					
	Decision Making					
	Goal Setting					
	Add Other Concerns:					
	External Issues (e.g., divorce, death, abuse, socio-economic, incarceration, deployment)					
	Other					
	School Record Data (To be completed by PSC)					
	Attendance: # of days absent					
	Attendance: # of days tardy					
	Discipline: # of referrals					
	Grades					