



MCPS Death of a Student or Staff Member Procedures Toolkit

Forward Thinking, High Achieving.

Roles and Responsibilities for Suicide Prevention Planning Work Sheet

Name and Title	Protocols for Responding to at risk Students	Post Suicide Protocols	Staff Training and Education	Parent and Community Education	Student Programs	Screening
Principal						
Counselor 1						
Counselor 2						
Counselor 3						
Family Resource or FIT						
School Psychologist						
Social Worker						
Assistant Principal						
CSCT						
SRO						
NCBI						
Missoula County Health Department						
Media Liaison						
School Nurse						

Checklist for After a Suicide

Notify Key Staff			
Task	Person Responsible	Contact Number	Tools
1. Verify death	Lead: _____ Back-up _____	Police: 406-552-6300 Coroner: 406-258-4810	
2. Ensure that staff know how to respond to inquiries and manage the campus for safety	Lead: _____ Back-up _____		Appendix 1 Sample Script for Office Staff
3. Notify Superintendent's office	Lead: _____ Back-up _____	Superintendent: Ext. 1022 Backup/Weekends: (see Administrator Cell Phone List)	
4. Notify school Crisis Response Team* professionals	Lead: _____ Back-up _____	Team Cell Numbers:	
5. Notify schools attended by family members of the deceased	Lead: _____ Back-up _____	See Administrator Cell Phone List	
6. Contact and coordinate with external mental health	Lead: _____ Back-up _____	Tamarack Grief: 406-541-8472 Other:	
7. Reach out to and work with the family of the deceased	Lead: _____ Back-up _____		
8. Notify all faculty and staff	Lead: _____ Back-up _____		
9. Coordinate notifying students about the death and school's response	Lead: _____ Back-up _____		Appendix 2 Sample Student Notification
10. Notify families of	Lead: _____		Appendix 3 Sample

students about the death of staff and school response	Back-up_____		Parent Notification
On-Going Support and Monitoring			
11. Organize and facilitate staff meeting	Lead:_____		Appendix 4 Sample Staff Meeting Agenda Suicide
	Back-up_____		
12. Provide staff with guidance in talking to students	Lead:_____		Appendix 5 Talking Points for Students and Staff After a suicide
	Back-up_____		
13. Organize and facilitate parent meeting (if appropriate)	Lead:_____		Appendix 6 Agenda for Parent Meeting
	Back-up_____		
12. Schedule meeting time with students and secure rooms for student support	Lead:_____		
	Back-up_____		
13. Identify, monitor, and support students who may be at risk	Lead:_____		
	Back-up_____		
14. Implement steps to help students with emotional regulation	Lead:_____		
	Back-up_____		
15. Participate and/or advise on appropriate memorialization in the immediate aftermath	Lead:_____		
	Back-up_____		
13. Monitor hallways, bathrooms and common areas	Lead:_____		
	Back-up_____		
Minimize Risk of Contagion through Media			
15. Work with press/media	Lead: Director of Communications and Technology		Appendix 7 Sample Media Statements and Key Considerations
	Back-up_____		

15. Monitor social media	Lead: _____ Back-up _____		
Develop Plan for Next Week			
16. Identify, monitor, and support students who may be at risk	Lead: _____ Back-up _____		
17. Hold Incident Debriefing meeting	Lead: _____ Back-up _____		
Develop Long Term Plan			
16. Plan for Birthday and/or holidays	Lead: _____ Back-up _____		
17. Plan for anniversary of death	Lead: _____ Back-up _____		
Debrief Incident			
18. Schedule and hold debriefing meeting	Lead: _____ Back-up _____		Appendix 8 Debriefing Protocol and Action Plan
19. Complete Debriefing Action Plan	Lead: _____ Back-up _____		Appendix 8 Debriefing Protocol and Action Plan

Sample Script for Office Staff after Death of a Staff or Student

This script can help receptionists or other people who answer the telephone to respond appropriately to telephone calls received in the early stages of the crisis.

Hello,

School. May I help you?

Take messages on non-crisis-related calls.

For crisis-related calls, use the following general schema:

- Police or other security professionals**—Immediate transfer to principal.
- Family members of deceased**—Immediate transfer to principal or anyone else they want to reach at the school. If principal is not available immediately, ask if they would like to speak to a school psychologist or social worker.
- Other school administrators**—Give out basic information on death and crisis response and offer to transfer call to principal or others.
- Parents regarding their child's immediate safety**—Reassure parents if you know their child was not involved and outline how children are being served and supported. If child may have been involved, transfer to a crisis team member who may have more information.
- Persons who call with information about others at risk**—Take down information and get it to a crisis team member. Take a phone number where the person can be called back by a crisis team member.
- Media**—Take messages and refer to principal.
- Parents generally wanting to know how to respond**—Explain that children and staff are being supported. Take messages to give to Crisis Response Team from parents needing more detailed information.
- Where to send parents who arrive unannounced on the scene**—Set aside a space for parents to wait and get information. Any person removing a student from school must be on the annual registration form as the parent or guardian. Records must be kept of who removed the child and when.



Forward Thinking, High Achieving.

Sample Death Notification Statement for Students

Use in small groups such as homerooms or advisories, not in assemblies or over loudspeakers.

Option 1 – When the death has been ruled a suicide

It is with great sadness that I have to tell you that one of our students, _____, has taken [his/her] own life. All of us want you to know that we are here to help you in any way we can.

A suicide death presents us with many questions that we may not be able to answer right away. Rumors may begin to circulate, and we ask that you not spread rumors you may hear. We'll do our best to give you accurate information as it becomes known to us.

Suicide is a very complicated act. It is usually caused by a mental disorder such as depression, which can prevent a person from thinking clearly about his or her problems and how to solve them. Sometimes these disorders are not identified or noticed; in other cases, a person with a disorder will show obvious symptoms or signs. One thing is certain: there are treatments that can help. Suicide should never, ever be an option.

Each of us will react to ____'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known ____ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction.

We have counselors available to help our school community deal with this sad loss and to enable us to understand more about suicide. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.



Forward Thinking, High Achieving.

Option 2 – When the cause of death is unconfirmed

It is with great sadness that I have to tell you that one of our students, _____, has died. All of us want you to know that we are here to help you in any way we can.

The cause of death has not yet been determined by the authorities. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we ask that you not spread rumors since they may turn out to be inaccurate and can be deeply hurtful and unfair to _____ as well as [his/her] family and friends. We'll do our best to give you accurate information as it becomes known to us.

Each of us will react to ____'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known ____ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction. We have counselors available to help our school community deal with this sad loss. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.



Forward Thinking, High Achieving.

Sample Death Notification Statement for Parents

Option 1 – When the death has been ruled a suicide

It is with great sadness that I have to tell you that one of our students, _____, has taken [his/her] own life. All of us want you to know that we are here to help you in any way we can.

A suicide death presents us with many questions that we may not be able to answer right away. Rumors may begin to circulate, and we ask that you not spread rumors you may hear. We'll do our best to give you accurate information as it becomes known to us.

Suicide is a very complicated act. It is usually caused by a mental disorder such as depression, which can prevent a person from thinking clearly about his or her problems and how to solve them. Sometimes these disorders are not identified or noticed; in other cases, a person with a disorder will show obvious symptoms or signs. One thing is certain: there are treatments that can help. Suicide should never, ever be an option.

Each of us will react to ____'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known ____ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction.

We have counselors available to help our school community deal with this sad loss and to enable us to understand more about suicide. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.



Forward Thinking. High Achieving.

Option 2 – When the cause of death is unconfirmed

It is with great sadness that I have to tell you that one of our students, _____, has died. All of us want you to know that we are here to help you in any way we can.

The cause of death has not yet been determined by the authorities. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we ask that you not spread rumors since they may turn out to be inaccurate and can be deeply hurtful and unfair to _____ as well as [his/her] family and friends. We'll do our best to give you accurate information as it becomes known to us.

Each of us will react to ____'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known ____ very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction. We have counselors available to help our school community deal with this sad loss. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you

Sample Staff Meeting Agenda

- I)** Introduce the Crisis Response Team members and roles.
- II)** Share accurate information about the death and hand out staff resources
 - a. Allow staff an opportunity to express their own reactions and grief.
 - b. Identify anyone who may need additional support and refer them to appropriate resources.
 - c. Provide appropriate faculty (e.g., homeroom teachers or advisors) with a scripted death notification statement for students.
 - d. Arrange coverage for any staff who are unable to manage reading the statement.
 - e. If death is as suicide, prepare for student reactions and questions by providing handouts to staff on Talking About Suicide and Facts About Suicide
- III)** Remind Staff of Procedures (do we have this outlined so they don't forget)
 - a. Ask teachers to submit attendance reports to office as soon as possible and instruct teachers to require student not leave the classroom alone.
 - b. Ask teachers to be in the hallways and common areas during passing time.
 - c. Identify substitute teachers scheduled for the day and provide necessary support.
 - d. Remind staff of student dismissal protocol for funeral.
- IV)** Discuss Student Support
 - a. Explain plans for the day, including locations of crisis counseling rooms.
 - b. Remind all staff of the important role they may play in identifying changes in behavior among the students they know and see every day, and discuss plan for handling students who are having difficulty.
 - c. Brief staff about identifying and referring at-risk students as well as the need to keep records of those efforts.
 - d. Apprise staff of any outside crisis responders or others who will be assisting.
- V)** Identify designated media spokesperson and instruct staff to refer all media inquiries to him or her.

Facts about Suicide and Mental Disorders in Adolescents

from *After a Suicide: A Toolkit for Schools*

Suicide is not inexplicable and is not simply the result of stress or difficult life circumstances. The key suicide risk factor is an undiagnosed, untreated, or ineffectively treated mental disorder. Research shows that over 90 percent of people who die by suicide have a mental disorder at the time of their death.

In teens, the mental disorders most closely linked to suicide risk are major depressive disorder, bipolar disorder, generalized anxiety disorder, conduct disorder, substance use disorder, and eating disorders. While in some cases these disorders may be precipitated by environmental stressors, they can also occur as a result of changes in brain chemistry, even in the absence of an identifiable or obvious “reason.”

Suicide is almost always complicated. In addition to the underlying disorders listed above, suicide risk can be affected by personality factors such as impulsivity, aggression, and hopelessness. Moreover, suicide risk can also be exacerbated by stressful life circumstances such as a history of childhood physical and/or sexual abuse; death, divorce, or other trauma in the family; persistent serious family conflict; traumatic breakups of romantic relationships; trouble with the law; school failures and other major disappointments; and bullying, harassment, or victimization by peers.

It is important to remember that the vast majority of teens who experience even very stressful life events do *not* become suicidal. In some cases, such experiences can be a catalyst for suicidal behavior in teens who are already struggling with depression or other mental health problems. In others, traumatic experiences (such as prolonged bullying) can precipitate depression, anxiety, abuse of alcohol or drugs, or another mental disorder, which can increase suicide risk. Conversely, existing mental disorders may also lead to stressful life experiences such as family conflict, social isolation, relationship breakups, or school failures, which may exacerbate the underlying illness and in turn increase suicide risk.

Warning Signs of Suicide

These signs may mean someone is at risk for suicide. Risk is greater if a behavior is new or has recently increased in frequency or intensity, and if it seems related to a painful event, loss, or change.

- Talking about wanting to die or kill oneself
- Looking for ways to kill oneself, such as searching online or buying a gun
- Talking about feeling hopeless or having no reason to live
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated, or behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage

Talking About Suicide *from After a Suicide: A Toolkit for Schools*

<p>Give Accurate Information About the Suicide</p> <p>Suicide is a complicated behavior. It is <i>not</i> caused by a single event such as a bad grade, an argument with parents, or the breakup of a relationship.</p> <p>In most cases, suicide is caused by an underlying mental disorder like depression or substance abuse. Mental disorders affect the way people feel and prevent them from thinking clearly and rationally. Having a mental disorder is nothing to be ashamed of, and help is available.</p> <p>Talking about suicide in a calm, straight-forward manner does not put ideas into kids' minds.</p>	<p>By Saying...</p> <p>"The cause of ____'s death was suicide. Suicide is most often caused by serious mental disorders like depression, combined with other complications."</p> <p>"____ was likely struggling with a mental health issue like depression or anxiety, even though it may not have been obvious to other people."</p> <p>"There are treatments to help people who are having suicidal thoughts."</p> <p>"Since 90 percent of people who die by suicide have a mental disorder at the time of their death, it is likely that ____ suffered from a mental disorder that affected [his/her] feelings, thoughts, and ability to think clearly and solve problems in a better way."</p> <p>"Mental disorders are not something to be ashamed of, and there are very good treatments to help the symptoms go away."</p>
<p>Address blaming and scapegoating.</p> <p>It is common to try to answer the question "why?" after a suicide death. Sometimes this turns into blaming others for the death.</p>	<p>By Saying...</p> <p>"The reasons that someone dies by suicide are not simple, and are related to mental disorders that get in the way of the person thinking clearly. Blaming others—or blaming the person who died—does not acknowledge the reality that the person was battling a mental disorder."</p>

Sample Agenda for Parent Meeting

Meetings with parents can provide a helpful forum for disseminating information and answering questions. The Crisis Response Team Leader, Team Coordinator, all Crisis Response Team members, the superintendent, and the school principal should attend. Representatives from community resources such as mental health providers, county crisis services, and c provide materials. This is a good time to acknowledge that suicide can be a difficult subject to talk about and to distribute the handout on **Talking About Suicide**.

A word of caution: Large, open-microphone meetings are not advised, since they can result in an unwieldy, unproductive session focused on scapegoating and blaming. Instead, the meeting should ideally be broken into two parts. During the first part, presented by school staff, the focus should be on dissemination of general information to parents, without opening the meeting to discussion. During the second part, have parents meet in small groups with trained crisis counselors for questions and discussion. The following is a sample meeting agenda.

First Part: General Information (45 to 50 minutes)

Crisis Response Team Leader or School Superintendent

- Welcomes all and expresses sympathy
- Introduces the principal and members of the Crisis Response Team
- Expresses confidence in the staff's ability to assist the students
- Encourages parent and school collaboration during this difficult time
- Reassures attendees that there will be an opportunity for questions and discussion
- States school's goal of treating this death as it would any other death, regardless of cause, while remaining aware that adolescents can be vulnerable to risk of imitative suicidal behavior
- States importance of balancing need to grieve with not inadvertently oversimplifying, glamorizing, or romanticizing suicide

Principal

- Outlines the purpose and structure of the meeting
- Verifies the death (see **Sample Notification Announcements for Parents**)
- Discourages the spread of rumors
- Informs parents about the school's response activities including media requests
- Informs parents about student release policy for funerals

Crisis Response Team Leader (or other appropriate Crisis Team member)

- Discusses how school will **help students cope**.
- Mentions that more information about bereavement after suicide is available at **<http://www.afsp.org/survivingsuicidelloss>**.
- Shares handout **Facts about Suicide and Mental Disorders in Adolescents** emphasizing risk factors and warning signs and noting that over 90 percent of suicides are linked to underlying mental disorders such as depression or anxiety that can cause substantial psychological pain but may not have been apparent to others (or that may have shown up as behavior problems or substance abuse).

Talking Points for Talking to Family about Permanent Memorial

Immediate Concerns

- Recognize the extreme grief parents or family members are experiencing and let them know it is normal for parents to want a memorial for their child.
- Explain that while memorials, although beneficial for many, are also activating for others, especially those already vulnerable due to their own personal trauma experiences. This constitutes a significant number of students and staff in any facility.
- Memorials can be activating because of the simple fact that they provide an ongoing visual reminder of what happened. Being activated may lead to a decrease in cognitive function, the ability to attend, focus, retain and recall, and the ability to process information-- primary learning functions.
- Explain that the “closed” environment in schools makes it almost impossible for staff that are negatively affected to avoid the memorial
- Offer the possibility of a temporary memorial which can be helpful and appropriate but must be time-limited and removed from the school.

Long-Term Complications

- Explain the difficulty of setting up permanent memorials because in reality many deaths can occur in a few years-how large will memorials be allowed to grow?
- Having permanent memorials (like gardens or places for plaques) remind students daily of how many have died.
- Upkeep becomes another issue for the school and memorials can be destroyed or vandalized. Also if schools move or renovate moving memorials could be problematic.

For these reasons, MCPS does not allow permanent memorials for students or staff on school grounds but encourages memorials to be placed in the community. Families can memorialize their student through a monetary donation for a student scholarship. If parent or family member persists in requesting a permanent memorial you may refer them on to a regional director or the school superintendent.

Key Messages for Media Spokesperson

For use when fielding media inquiries.

Suicide/Mental Illness

- Depression is the leading cause of suicide in teenagers.
- About 6 percent of teenagers will develop depression yearly. Sadly, more than 80 percent of these kids will not have their illness properly diagnosed or treated, which can also lead to school absenteeism, failing grades, dropouts, crimes, and drug and alcohol abuse.
- Depression is among the most treatable of all mood disorders. More than three fourths of people with depression respond positively to treatment.
- The best way to prevent suicide is through early detection, diagnosis, and vigorous treatment of depression and other mental disorders, including addictions.

School's Response Messages

- We are heartbroken over the death of one of our students. Our hearts, thoughts, and prayers go out to [his/her] family and friends, and the entire community.
- We will be offering grief counseling for students, faculty and staff starting on [date] through [date].
- We will be hosting an informational meeting for parents and the community regarding suicide prevention on [date/time/location]. Experts will be on hand to answer questions.
- No TV cameras or reporters will be allowed in the school or on school grounds.

School Response to Media

- Media are strongly encouraged to refer to the document "Reporting on Suicide: Recommendations for the Media," which is available at <http://www.afsp.org/media> and http://www.sprc.org/library/at_a_glance.pdf.
- Research has shown that graphic, sensationalized, or romanticized descriptions of suicide deaths in the news media can contribute to suicide contagion ("copycat" suicides), particularly among youth.
- Media coverage that details the location and manner of suicide with photos or video increases risk of contagion.
- Media should also avoid oversimplifying cause of suicide (e.g., "student took his own life after breakup with girlfriend"). This gives the audience a simplistic understanding of a very complicated issue.
- Instead, remind the public that more than 90 percent of people who die by suicide have an underlying mental disorder such as depression.
- Media should include links to or information about helpful resources such as local crisis hotlines or the National Suicide Prevention Lifeline 800-273-TALK (8255).

Crisis Response Team Debriefing Action Plan

Suggestion	Key Issue	Action/Recommendation	Action owner	Completion Date
1				
2				
3				
4				
5				
6				
7				
8				