



Resources for Supporting Students, Families, and School Staff After a Tragic Event: Harm or Loss of a Student

It is important that students, families, and school staff feel supported and emotionally secure in their schools and communities. Following a stressful or tragic event a school may need to take additional steps to meet the emotional and psychological needs of students and staff. To assist schools during these challenging times we have compiled these best-practice recommendations and resources schools may consider implementing.

Immediate Response

The American School Counselor Association and National Association of School Psychologists have provided the following recommendations:

- Families and adults need to first deal with and assess their own responses to crisis and stress.
- Try and keep routines as normal as possible. Children (and adults) gain security from the predictability of routine, including attending school.
- Limit exposure to television and the news if needed. Social media may also need extra monitoring.
- Help children identify at least one adult at school to whom they should go if they feel they need extra support.
- Observe children's emotional state. Some children may not express their thoughts or concerns verbally.
- Make time to talk and listen to the students' thoughts and concerns. Keep explanations age-appropriate:
 - Early elementary school: Provide brief, simple information balanced with reassurances that adults are there to support them.
 - Upper elementary and early middle school: Children this age may have more questions and need more explanation of what happened and additional reassurances of their own safety and support.
 - Upper middle school and high school students: Emphasize the role that students play in supporting each other and communicating any concerns to a trusted adult.

Priority Resources

- **DPHHS Contacts:** [Karl Rosston](#), 406-444-3349
 - [DPHHS Suicide Prevention Information and Resources for Schools webpage](#)
- **Montana CAST-S Crisis Action Toolkit on Suicide**
 - Section 3: Postvention After a Suicide (p. 43),
 - Tool 21: Checklist for Postvention Steps After a Suicide (p. 103) and Tool 22: Additional Postvention Steps After a Suicide (p.105),
 - Appendix 2: After a Suicide, Challenging Time for Schools (p. 149-152)
 - [Download the CAST-S here](#) or [contact Tammy Lysons](#) for a printed copy.
- [After a Suicide: A Toolkit for Schools, 2nd Edition](#)
- [Educator Self-Care](#)- This resource provides quick tips and information for educators to care for themselves.
- [The Bright App](#)- This application helps you search for behavioral health providers in your area. If you feel it is appropriate, we encourage you to appoint someone to reach out to the providers in your area to request additional, short-term behavioral health services for both students and school staff. This may be especially important if your school/community has recently experienced additional traumatic events and stress prior to the death of the student.

Additional Resources

- [Protocol for Death of Student/Staff Member](#)- Quick, step-by-step guidance on responding to the death of a student or staff member. Guidance is organized by place of death (on or off school campus). This guide contains short check-lists for the school administrator, principal, and counselor (crisis response team) and sample messages for communicating about the death.
- [Overview of a Suicide Emergency Operations Plan Annex](#): This document includes items for a school to consider when creating a comprehensive Emergency Operations Plan with a specific hazard annex on suicide. Included in this document are tips for schools to address in the planning phases including: 1) Prevention 2) Protection 3) Mitigation 4) **Response** and 5) **Recovery**.
- [Coping With the Sudden Death of a Student](#): This document was created by the Mississippi Bend Area Education Agency in Bettendorf Iowa and includes a step-by-step guide for administrators in dealing with the **Response and Recovery** stages of a student death.
- [Resilient Together: Coping with Loss at School](#)- Kognito Simulation on the Teacher Learning Hub- A death in the school community can have profound impacts on the social and emotional health of students and staff. In this course, you'll learn the key elements of a crisis response plan and best practices for communicating with community members emotionally impacted by the event, and, if needed, connecting them to support. You'll practice these skills in role-play conversations with fully animated and interactive students and teachers.

Long-term Support and Recovery

Prevention Training for Staff

These programs are generally available at no cost within MT subject to grant funding:

- [At-Risk: Mental Health and Suicide Prevention Role-Play Simulations](#) (Elementary, Middle School, and High School) Kognito simulation on the Teacher Learning Hub (Self-paced, 1 OPI renewal unit each)
- [Dealing with Grief and Loss in Adolescents](#) on the Teacher Learning Hub (Self-paced, 2 CEUs)
- [Overview of Youth Suicide](#) and [Suicide Prevention for Schools Part 1: Strategies](#) on the Teacher Learning Hub (3 CEUs each)

Evidence-based Student Prevention Programs

- [Signs of Suicide \(SOS\)](#) for students grades 6-12. [Karl Rosston](#), DPHHS can provide funding for the first year of implementation.
- [Youth Aware of Mental Health \(YAM\)](#) for middle and high school students. Contact: [Kelley Edwards](#), 406-994-1606.
- [Teen Mental Health First Aid \(tMHFA\)](#) for students in grades 10, 11, and 12.

Prevention Training for Staff & Families

- [Youth Mental Health First Aid and Teen Mental Health First Aid](#)- Online facilitated training available. YMHFA programs can be scheduled for your school at no cost through the Montana Hospital Association (Grant funding permitting).
- [QPR Gatekeeper Training for Suicide Prevention](#) (Adults 18 years and older)

Visit the [Suicide Prevention Resource Center](#)- Program Resources and Programs Repository to look for additional educator and student prevention programs with evidence of effectiveness.