

Guidelines for Medical Schools Managing Unexpected Student Death

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Outline

- I. What to do before a tragedy occurs
 - a. Defining a crisis team
- II. What to do when a tragedy occurs-general guiding principles
 - a. Define priorities for the school
 - b. Delegate tasks
- III. What to do when a tragedy occurs-communication with different groups
 - a. Communication to school officials
 - b. Communication with families of deceased students
 - c. Communication with media
 - d. Communication with your larger school community
- IV. Student needs
 - a. Grief support and psychological needs
 - b. Academic support
 - c. Targeted support for vulnerable students
- V. Support for others
- VI. Memorials/funerals
 - a. Events organized by the school
 - b. Enduring remembrances of student
- VII. Financial Aid
 - a. Financial aid office notification; communication with family regarding loan forgiveness
- VIII. Housing
 - a. On campus and off campus housing issues
- IX. Miscellaneous
 - a. Ways that students and others can support the families
- X. GSA community support

- a. Reach out to others for comfort and support

Background and rationale for document. In general, medical students are young and healthy people. Rarely, medical students may die in an “expected manner” (known terminal illness). When this happens, it is tragic, but it is also frequently anticipated, and there has been a gradual development of planning and early stages of grieving even before the death occurs.

More frequently the death of a medical student will be unexpected and sudden (automobile accidents, suicide, unintentional overdoses). When this occurs, the medical school community will experience tremendous grief and shock. Those in Student Affairs will likely be called upon to respond to and deal with, these tragedies, while such individuals are grieving themselves. With many students, faculty, staff affected by such a tragedy, the “ripple” effects can be staggering. Individuals process grief in different ways, and manifest its effects differently. The time frame for resolving grief is also highly variable.

It is helpful to have a “to do” list of issues that may arise as the office responds to such a tragedy. The expanded outline below is intended to summarize our recent experiences.

- I. What to do before a tragedy occurs
 - a. Consider putting together a “crisis response group” of people who will work together in the setting of an unexpected student death.
 - b. Potential members of crisis response group
 - i. Student affairs dean
 - ii. Curriculum dean
 - iii. Head of “counseling/psychological services” office or whatever structure is responsible for providing such support for students; someone from your Department of Psychiatry
 - iv. Communications/media contact for your school
 - v. Student affairs staff members (including relatively high level staff member who can assist with organization of tasks)
 - c. Make sure all crisis response group members can reach each other readily (cell phones, pagers)
 - d. Designate a “leader” of the group who delegates tasks, and to whom group members report back (otherwise there is a lot of duplication of effort and communication). Consider designating a “back up leader” should the leader be out of town.
- II. When an unexpected tragedy occurs-general guiding principles
 - a. Decide what your role is, and who you are trying to serve. Set your priorities. For us, our top priorities were supporting our students, and serving the families of the deceased students.
 - b. Many people will offer to help you and their offers are sincere. But they don’t typically know how they can help. If you think someone has an important skill to

bring to the tragedy response, do not hesitate to enlist their help. But having too many people involved, with unclear responsibilities, can lead to chaos.

- c. Try to avoid getting hung up in little unimportant details and decisions. There will be many little decisions to make, but they all pale in comparison to the magnitude of what has happened.
- d. If there are individuals you find difficult to work with/deal with, and you are part of the crisis team, try to avoid having those individuals play a role in responding to the tragedy. Any difficulties you may have could be greatly magnified under stress.
- e. Many people will contact you, to express sympathy and/or to find out “what happened”. Consider creating a templated responses to such e-mails, so that you do not become overwhelmed with such communications at a time when there will be many demands on your time. For example “I appreciate your kindness and support. In times of tragedy, it is comforting to know of the support available within the School of Medicine community,” as an example.

III. Communication issues

- a. Notification of officials at your school
- b. Notification of families (for our tragedies this was performed by the medical examiner’s office first, and we then followed up with phone calls to each family)
- c. Consider having a single contact person at your institution for the family, in order to avoid confusion and overload. Ideally, this should be a relatively senior school official who will also be readily available (not out of town, etc). It may be helpful to have this be someone other than the person who knows the students best, as frequent contact with families can become emotionally overwhelming to those closest to the students.
- d. Offer sympathy to family; answer questions in a kind but factual manner; do not offer information that you do not have or are not privy to (for example, do not speculate on “cause of death” if it is unclear.)
- e. Ask how you can help; offer some suggestions (if you have the staff/time), such as possibly picking up family members at airport/train station, or offering a time to meet with them at the school or elsewhere. If they are unfamiliar with the area, you can volunteer information about local hotels, etc. Helping with such “decision making” was very comforting for our families
- f. Dealing with potential media interest-work with your communications/media office. Communicate to your colleagues/students/faculty that they should refer all media inquiries to the media office; they are under no obligation to talk to the media.
- g. Communicating with your school: students, faculty, staff, residents may have all known your student. Try to promptly communicate with these groups regarding the death. The communication/media office can work with you on the content of this message. It should not be sent until the families have been notified, but with texting and social media this can mean that many are “aware” of what has happened before more official notification. No good answer for this problem.

IV. Dealing with student needs

- a. Grief support-working with counseling service/department of psychiatry. Consider small “grief processing groups” within 24-48 hrs of event. Mental health professionals can then start to work with students about characteristics of normal grief, ways of dealing with it, what to expect, how everyone is different in their response, etc. Make sure all students are aware of how to access professional help through your school.
- b. Academic support-accommodations to academic schedules. Some students may need to delay exams, clerkships because of their grief. Others may find they do best by “staying on schedule”. Engage your course directors and ask for their support in being flexible with how different student situations are handled.
- c. If there are students you suspect will be more affected than others, for example students with a mental health history who may find it very challenging to deal with a student suicide, reach out to that student (or have their advisor do so). If the student has a treating mental health professional, consider calling that individual to be sure they are aware what has happened at your school, so that they may consider touching base with your student. Other students to pay close attention to would be those closest to the deceased. It will be appreciated by those students if their advisor or dean reaches out to them to express concern and support.

V. Supporting others

- a. Staff, residents, and faculty may also need grief support. Recommend working with the local support available within your School of Medicine to remind each group of how they can access support, and also make “interim support” available, perhaps from faculty within the Department of Psychiatry.
- b. Those in the Student Affairs office may be most in need, and are also shouldering most of the workload of the tragedy. Consider having rotating days off for staff and deans within this office.

VI. Memorials/funerals

- a. Students frequently wish to have a school organized memorial for a classmate. If so, inform the families of this plan so that if the family plans a memorial/funeral, there is no conflict in dates. Family’s plans should be deferred to with regards to dates.
- b. For school memorial, designate student affairs staff person(s) comfortable working with students/event planning, to help put together an event based on student needs. Event should be 60-90 minutes in length, with time to gather afterward as a community, ideally with food. Try to include School community members who can share memories of different parts of the student’s life, including a dean, students, advisors, faculty member/service organization director, etc. This will obviously vary depending on the student.

- c. If possible, it is nice to create a video of a school based memorial for the family of the deceased student
 - d. Holding a memorial helps to bring closure for the school community. Timing is flexible but within 2-3 wks after the event is reasonable
 - e. Communicate with course directors to allow students to attend school based and family organized services
 - f. Students may wish to plan a more enduring remembrance for their classmate-establish a scholarship fund, plant a tree, dedicate a space in a building, etc. Recommend working with the students so that they realize this is not urgent, and may best be done over a slower time frame, in order to allow input and discussion amongst many stakeholders
- VII. Financial aid
- a. Financial aid office can answer family's questions about loan forgiveness, what steps they need to take to notify lenders, etc. The school has a defined time frame to report a student death to NSLDS (pretty sure about this), but the family typically has much more time. So this is not urgent.
- VIII. Housing
- a. If student was living in campus housing: notify your housing liaison of the death. They will need to work with the family regarding packing of the possessions, etc. This can be very emotional, and is also something that friends of the deceased (other students) may be able to assist the family with. Clarify with housing when the charges for the apartment stop.
 - b. If off campus, you may volunteer to contact landlord (only if time/staff available). As above, students may be able to help family with possessions of the deceased.
- IX. Miscellaneous
- a. One of our students was hospitalized for an extended period of time after the automobile accident in which others were killed. Our medical students put together a "google doc" to organized home-cooked meals for the family of the hospitalized student. This was very much appreciated, and a great example of a "way to help"
 - b. Students initiated memory books for the families-hand written remembrances from students. These too were very much appreciated by the families
 - c. Helping families to pack/move the possessions of the deceased can be very much appreciated by the families if this is feasible (as mentioned above)
- X. GSA community support
- a. Consider contacting student affairs officials at other U.S. medical schools who may have had similar experiences. Their wisdom, support, and comfort could be very helpful.