Suicide Prevention Plan

Introduction
The University of Tennessee Southern (“UT Southern”) strives to maintain a safe campus community free from violence, directed at oneself or others. UT Southern is committed to providing prevention, intervention, and postvention services to students. All UT Southern faculty and staff are required to follow the protocols provided in this policy.

“MOST SUICIDAL PEOPLE GIVE DEFINITE WARNING SIGNALS OF THEIR SUICIDAL INTENTIONS, BUT OTHERS ARE OFTEN UNAWARE OF THE SIGNIFICANCE OF THESE WARNINGS OR UNSURE WHAT TO DO ABOUT THEM.”

The second leading cause of death for college students is suicide. Many college students are also struggling with suicidal thoughts and mental health problems. We understand that suicide is preventable, and that most suicidal people want to live; they are just unable to see alternatives to their problems.

All UT Southern faculty and staff are required to follow the protocols provided in this policy which is available on the UT Southern website.

Definitions
1. Vice Chancellor for Enrollment & Student Affairs refers to the University's chief student affairs officer to whom the Chancellor has delegated primary authority and responsibility for matters relating therein.
2. Campus Community refers to any person who is a student, faculty member, staff employee, campus visitor, or participant in a University-sponsored or University-affiliated activity.
3. CARE Team refers to the University's Case Assessment, Review, and Evaluation team, which is charged with behavioral intervention and threat assessment for students, faculty, and staff.
4. Chancellor refers to the University's chief executive officer to whom the President of the University of Tennessee System has delegated primary responsibility for administration of University operations, policies, and procedures.
5. Counseling Services refers to the office and staff designated with primary responsibility for clinical mental health counseling for University students.
6. Death by Suicide refers to when people direct violence at themselves with the intent to end their lives, and they die because of their actions.
7. Faculty refers to any University employee who holds faculty rank and whose primary appointment is to engage in academic instruction, research, or service.
9. Intervention refers to a direct effort to prevent a person from ending their life through an activity or set of activities to decrease risk factors and increase protective factors.

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2 https://tspn.org/resources/for-higher-education/
3 https://tspn.org/about-suicide/facts-myths-about-suicide/
10. **Prevention** refers to activities implemented prior to the onset of an adverse health outcome (e.g., dying by suicide) and designed to reduce the potential that the adverse health outcome will take place.

11. **Postvention** refers to activities following a completed suicide to help alleviate the suffering and emotional distress of the survivors, and prevent additional trauma and contagion.

12. **Safety and Security** refers to the UT Southern security department with primary jurisdiction for all University owned and controlled property.

13. **Staff** refers to any full-time or part-time University employee not primarily engaged in academic instruction, research, or service, who holds either an exempt or non-exempt position with or without administrative, executive, or managerial responsibilities, excluding student employees of the University.

14. **Student** refers a person who is admitted, enrolled or registered for study at the University, either full-time or part-time, pursuing undergraduate, graduate, professional, and/or non-degree courses; or has completed a preceding academic term at the University and is eligible for re-enrollment without re-applying for admission and/or otherwise has a continuing relationship with the University.

15. **Suicide Attempt** refers to when people harm themselves with the intent to end their lives, but they do not die because of their actions.

16. **Suicidal Ideation** refers to thoughts or/and unusual preoccupation about suicide may be seen in the following ways:

   - self-harm,
   - detailed planning,
   - expressions of past bullying, trauma, abuse,
   - written expression in assignments, emails, and class discussions,
   - past attempts of self, close friends, or family,
   - suicide of close friend,
   - distressing and concerning social media,
   - change in attendance, class participation, assignment completion and performance, overall performance.

**Dissemination**

The chairperson of the CARE Team will distribute information regarding the work of this policy to all students, faculty and staff through the University's e-mail system at the beginning of each semester.

**Student Confidentiality Concerns**

University faculty and staff members who respond to crises must remain aware that students have a right to privacy and that, in some instances, they may not wish to have information shared with others. FERPA protects student education records from disclosure to unauthorized persons. Once observations become written (electronically or on paper), they become subject to FERPA, unless these records are written by and remain in the custody of the UT Southern Safety and Security or other law enforcement agencies. University Safety and Security records are subject to public records laws, including the Tennessee Public Records Act (Tenn. Code Ann. § 10-7-503, et seq.). As outlined in the University's Policy Statement on FERPA, faculty and staff may disclose a student's education records and information without the consent of the student under certain circumstances, including when the disclosure is to University officials (e.g. a person employed by the University in an administrative, supervisory, academic, research or support staff position, including health and medical staff, a person employed by the UT Southern Safety and Security who have a legitimate educational interest in the receiving the records and/or information. An official has a legitimate educational interest if that official is performing a task specific to their position description, performing a task related to the discipline or education of a student, providing a service or benefit to the student or student's family (e.g. healthcare, counseling, job placement, financial aid), or maintaining the safety and security of the campus. In any situation, it is always best to attempt and obtain the student's permission to release information.
Suicide Prevention Plan

Prevention
UT Southern will provide suicide prevention training and resources through existing, standardized training opportunities as well as training and resources that are specifically tailored to the campus community. Prevention training and resources will be reviewed annually and updated as appropriate to respond to changing practices and the campus community needs.

Training
The University provides suicide prevention training, such as Question, Persuade and Refer (QPR) which teaches participants to (1) identify people at risk for suicide; (2) recognize the risk factors, protective factors, and warning signs of suicide; and (3) respond to and get help for people at risk.

Training will be offered each semester to select faculty, staff, and students. Select departments will be educated on suicide policies and procedures annually, as suggested by the UT Southern Care Team. Training may also be requested by any faculty or staff office or student group. Other mental health awareness programming will be provided via Counseling Services and Student Affairs throughout the academic year to promote awareness, increase coping skills, and help-seeking behaviors to faculty, staff and students.

Screening
Online screening is one of the quickest and easiest ways to determine whether you are experiencing symptoms of a mental health condition. One resource is www.mhascreening.org; other are available through Clinic and Counseling Services (below).

UT Southern Clinic and Counseling Services
Clinic and Counseling Services will assist students in achieving and maintaining physical and mental health by providing a clinic for our students, as well as counseling services.

Counseling Services are located in the UT Southern Clinic. Clinic and Counseling Services offer office visits to students who are currently enrolled in classes.

Employee Assistance Program
The UT Employee Assistance Program (EAP) is designed to provide free, confidential assistance to help employees and their families resolve problems that influence their personal lives or job performance. Spouses and dependent children of employees also qualify for EAP benefits.

The program is available to all benefits-eligible UT employees and their immediate families, regardless of whether you participate in the State’s Group Health Insurance Program. The state EAP provides free short-term counseling, financial counseling, and brief legal advice for regular employees scheduled to work at least 75% (30 hours per week) time. Seminars are also available throughout the state.

Suicide Prevention Plan

The EAP provides anonymous, free confidential personal self-assessments of the following:

- alcohol use
- anger management
- anxiety disorder
- depression
- eating disorders

Self-tests are also available to assess the following issues:

- career motivation
- conflict management
- emotional intelligence
- goal setting
- nutrition knowledge
- self-esteem
- stress (SRR scale)

Online service is available through www.Here4TN.com. You may enter as a registered or unregistered user. Results are given immediately after completion of the screening test. Remember, if you score as a potential problem, you may contact the EAP for personal counseling sessions.

CARE Team
The UT Southern CARE (Case Assessment, Review, and Evaluation) Team is a multi-disciplined committee including faculty and staff dedicated to providing safety and support to students and the UT Southern community. The team meets on a regular basis and is tasked with collaboratively devising a way to aid in removing barriers to student success. The team also addresses/assists with crisis response and behavioral threat assessment. The multi-disciplined committee allows for interactions across campus (Athletics, Student Affairs, Academic Affairs, and other administrative departments).

Current CARE Team:
- Student Affairs - Sarah Catherine Richardson, chairperson
- Counseling Services - Desiree Stone
- Academics - Matthew Little
- Residential Life - Kara Williams
- Campus Security - Josie Brown
- Athletics - Madison Bennett

Residential Life
UT Southern Residential Life employs live-in staff (Resident Directors) and student Resident Assistants (RA) to help manage the campus residential experience. Residential Life is committed to ensuring all staff are trained with the ability to serve as a first-line response to a variety of student concerns and incidents. All staff receive training in Mental Health First Aid, suicide prevention training, and bystander intervention training.
## Intervention

### Identifying Suicidal Students & Reporting

#### IS A STUDENT IN IMMINENT DANGER?

<table>
<thead>
<tr>
<th>YES</th>
<th>MAYBE</th>
<th>NO</th>
</tr>
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| Risk of death is high.  
Student has a plan and access to a lethal means, are planning to make an attempt very soon, or are currently in the process of making an attempt. | Risk of death uncertain or unclear.  
Student may not have plan or means, but has suicidal ideation. | Risk of death not imminent.  
Student is a concern. |

**YOUR NEXT STEP**

1. Call 911.
*Security will alert CARE on Call.*

**YOUR NEXT STEP**

Call CARE on Call, and/or call Counseling Services*.  
*If unavailable, may call Security.*

**YOUR NEXT STEP**

Submit a CARE Alert.

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We evaluate students using the National Association for Behavioral Intervention and Threat Assessment’s Risk Classification. Some behaviors we see commonly, as identified by NaBITA, are outlined below.

<table>
<thead>
<tr>
<th>Extreme Risk</th>
<th>Severe Risk</th>
<th>Elevated Risk</th>
<th>Moderate Risk</th>
<th>Mild Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How does the student seem?</strong></td>
<td>Dysregulated (way off baseline) or medically disabled; possibly detached</td>
<td>Disturbed or advancing to dysregulation</td>
<td>Seriously disruptive incident(s)</td>
<td>Involved or repeated disruption</td>
</tr>
<tr>
<td><strong>Is the student making or suggesting threats?</strong></td>
<td>Threat made or present; concrete, repeated, consistent, plausible. References to weapons, means, target</td>
<td>Threat made or present; vague but direct or specific but indirect; repeated, consistent, plausible</td>
<td>Threat made or present; vague/indirect but repeated</td>
<td>Possible threat made or present; vague/indirect/implausible</td>
</tr>
</tbody>
</table>
### Contact Information

<table>
<thead>
<tr>
<th></th>
<th>Call when…</th>
</tr>
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</table>
| **Emergency/ Police** | 911  
A student…   | • exhibits severe distress  
• has stated or alluded to having a suicide plan and lethal means, and/or  
• has indicated they have made a current attempt to kill themselves.  
If there is any indication that there is a firearm involved, call 911. Firearm lethality requires professional support and immediate action. |
| **Security** | 931-309-7502  
Security responds to members of the campus community in need of intervention. Staff are trained annually in responding to crises, and can perform welfare checks on community members to assess safety and will take necessary steps to ensure safety if it is in question. Security notifies the CARE Team every time a student is transported to the hospital from campus. |
| **CARE on Call** | 931-309-1670  
Student Affairs administrators who respond when a student has been transported to the hospital. One of the team members is on-call daily 24/7 via the CARE on Call number. The team maintains an open line of communication with one another to further aid in responsiveness. |
| **Counseling Services** | 931-424-7338  
A student has made statements that they are experiencing suicidal thoughts. |
| **CARE Alerts** | utsouthern.edu/care-team/  
You have concerns about a student’s wellbeing, but do not believe that the student…  
• exhibits severe distress  
• has stated or alluded to having a suicide plan and lethal means,  
• has indicated they have made a current attempt to kill themselves, or  
• has made statements that they are experiencing suicidal thoughts.  
All alerts are responded to within 48 hours of being received, often within minutes. Should immediate intervention be required, appropriate measures are taken to alert those on campus who can offer assistance. |
REGIONAL AND NATIONAL SUPPORT

- TN State 24/7 Crisis Line (855) 274-7471
- TN Crisis Text Line Text “TN” to 741-741
- Help Line (800) 560-7471
- Centerstone (Giles County) (931) 363-5438
- National Suicide Prevention Lifeline 988
- Health Connect America (931) 347-0811

The University’s Response

Response Protocol for Imminent Danger/Crisis

1. Student experiences crisis
2. 1. 911 dispatched
   2. Security dispatched
3. Security contacts CARE on Call
4. Crisis Team Member assess situation, informs VC for Student Affairs, Dean of Students
5. Crisis Team Member contacts student’s emergency contact or support person
6. Student arrives at ER for evaluation, accompanied by Crisis Team Member
7. Student receives care and is discharged
   Student should receive treatment plan
8. Student returns to campus
   Care Team Member meets with student within 24 hours with Return Recommendations

CRISIS RESPONSE TEAM
The Crisis Response Team is comprised of Student Affairs administrators who respond when a student has been transported to the hospital. One of the team members is on-call daily 24/7 via the CARE on Call Number (931-309-1670). The team maintains an open line of communication with one another to further aid in responsiveness.

If a student has been transported to the hospital for a suicide attempt or suicidal thoughts, a member of the Crisis Response Team will stay with the student until parents or the student’s support person arrives at the hospital. If the
student is transferred to the ICU, the Crisis Response Team member will establish communication with the parents or support person and meet them at the hospital upon arrival. In the absence of being able to reach someone, the on-call Crisis Response Team member will continue to attempt contact. Once contact has been established, the CRT member will relay only basic information, provide the phone number for the hospital, facilitate a conversation with the student if medically advised, and explain the crisis evaluation process for Giles County.

**BEHAVIORAL THREAT ASSESSMENT TEAM**
Select members of the Care Team comprise the university’s Behavioral Threat Assessment Team. The team engages in best practices as established by the National Behavioral Intervention Team Association (NaBITA) and utilized industry specific rubrics and tools for assessing potential for violence on campus.

**UT SOUTHERN CLINIC & COUNSELING SERVICES**
Clinic and Counseling Services offers appointments for students and will assist with the triage of students who are in crisis any time during the business day. Appointments are made through the University Clinic, and may occur in person at the Clinic or via secure telehealth links, based on the student’s preference and the counselor’s availability.

**CARE TEAM**
UT Southern’s Case Assessment, Review, and Evaluation (CARE) Team is charged with behavioral intervention and threat assessment for students, faculty, and staff. Students gain the support of a Care Team Member to help navigate resources and support during times of crisis or concern, and upon returning to campus as part of postvention protocols. The protocol used for a student returning from a Serious Medical Condition may recommend establishment of a written safety plan, regular check-in meetings with a Care Team Member, or referral to appropriate university resources or local agencies.

**EMPLOYEE ASSISTANCE PROGRAM**
Available to employees 24/7, and staffed by trained counselors who will aid the employee in finding local resources for continuing mental health.
**Postvention**

In cases of student crisis, the University is committed to continued support after the crisis has passed, including but not limited to cases of completed suicide. Postvention is the University’s organized response to the aftermath of crisis and/or completed suicide.

**After Crisis**

A designated member of the CARE Team will act as the point of contact for all postvention activities following a student crisis. The CARE Team Member will coordinate communications including individualized Recommendations for Return, provide administrative updates, facilitate and aid in providing mental health support services to the individual and to individuals affected by the crisis, and be a point of contact for parental concern. Should additional community resources be beneficial, the CARE Team Member will coordinate with local mental health providers and the Tennessee Suicide Prevention Network for assistance.

**After Loss to Suicide**

The University is dedicated to assisting the campus recover from loss, decrease trauma, and prevent additional suicides. The University has an established protocol to guide administrators in the unfortunate event of a student death; the manner of death does not alter the protocol. Our process does not release cause of death, and is intentional about identifying and providing support to those students affected by the loss of a friend and/or classmate.

The University’s CARE Team will act as the point of contact for all postvention activities. The team will work to coordinate communications, provide administrative updates, facilitate and aid in providing mental health support services to the campus community, and be a point of contact for parental concern. Should additional community resources be beneficial, the CARE Team will coordinate with local mental health providers and the Tennessee Suicide Prevention Network for assistance.