

THE UNIVERSITY OF TENNESSEE AT CHATTANOOGA

TITLE: STUDENT SUICIDE PREVENTION, INTERVENTION, AND POSTVENTION POLICY

SECTION I. PURPOSE

The University of Tennessee at Chattanooga ("UTC" or "University") strives to maintain a safe campus community free from violence, directed at oneself or others. UTC is committed to providing prevention, intervention, and postvention services to students. All UTC faculty and staff are required to follow the protocols provided in this policy. For information regarding the University's prevention, intervention, and postvention services for faculty and staff, please see the *UTC Faculty and Staff Suicide Prevention, Intervention and Postvention Plan*.

SECTION II. DEFINITIONS

- A. "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.
- B. "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.
- C. "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.
- D. "Center for Student Wellbeing" refers to the office and staff designated with primary responsibility for health-related education and prevention.
- E. "Counseling Center" refers to the office and staff designated with primary responsibility for clinical mental health counseling for University students.
- F. "Faculty" refers to any University employee who holds faculty rank and whose primary appointment is to engage in academic instruction, research, or service.
- G. "FERPA" refers to the Family Educational Rights and Privacy Act (20 U.S.C. § 1232g; 34 CFR Part 99).
- H. "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.
- I. "Office of the Dean of Students" refers to office and staff designated with primary responsibility for the administration, safety, and welfare of University students.
- J. "Office of Human Resources" refers to the office and staff designated with primary responsibility for the oversight and support of all University faculty and staff.

- K. "Office of Student Outreach & Support" refers to the office designated with primary responsibility for non-clinical case management for University students.
- L. "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.
- M. "Postvention" refers to activities following a suicide to help alleviate the suffering and emotional distress of the survivors, and prevent additional trauma and contagion.
- N. "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.
- O. "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.
- P. "SOC Team" refers to the University's Student of Concern Team, which is charged with reviewing any student related matter referred for health or wellness concerns.
- Q. "UTC Police Department" refers to the law enforcement agency with primary jurisdiction for all University owned and controlled property.
- R. "Vice Chancellor for Enrollment Management & Student Affairs" refers to the University's chief enrollment management and student affairs officer to whom the Chancellor has delegated primary authority and responsibility for matters relating therein.

SECTION III. DISSEMINATION

The chairperson of the CARE Team will distribute information regarding the work of this policy to all faculty and staff through the University's e-mail system once each academic year.

SECTION IV. PREVENTION

UTC 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.

A. Training

The Center for Student Wellbeing will provide suicide prevention training, such as Question, Persuade and Refer (QPR). Training will be offered each semester to faculty, staff, and

students. Select departments will be educated on suicide policies and procedures annually, as determined by the Center for Student Wellbeing. Training may also be facilitated at the request of any faculty or staff office or student group. Other mental health awareness programming will be provided throughout the academic year to promote awareness, increase coping skills, and help-seeking behaviors to faculty, staff and students.

B. Resources

Identifying early signs of suicidal thoughts and behaviors can prevent potential harm to self or others by getting students the help they need quickly. Active and passive training and resources will be made available each academic year by the Center for Student Wellbeing.

SECTION V. INTERVENTION

- A. When any faculty or staff member identifies a student with suicidal intent, making suicidal statements, writing suicidal notes, and/or exhibiting self-harm, such as cutting or any similar at-risk behaviors, the faculty or staff member will notify the Office of Student Outreach & Support or the UTC Police Department during business hours and the UTC Police Department after business hours. The Counseling Center will be notified if evaluation is needed. Faculty and staff should take all reasonable steps to not leave the student alone until help arrives.
 - B. Faculty and staff members are not permitted to promise confidentiality or honor a previous promise of confidentiality to the student who might harm themselves. The faculty or staff members must explain to the student that information may be shared with others to help them, but there will not be discussion with others who do not need to know of the incident.
 - C. If faculty or staff suspect that a student may be thinking about suicide, approach the student directly to address concerns. Promote hope by listening to the student. Let them know that they are not alone and help is available. It is recommended that faculty and staff utilize the Columbia Suicide Severity Rating Scale (C-SSRS) Screen for Schools (Appendix A) to determine if the person is in imminent danger. Alternately, ask "Are you thinking about suicide" or "Have you thought about killing yourself". When in doubt, seek consultation from other professionals such as the Counseling Center or Office of Student Outreach & Support. All concerns must be reported using the Community Member of Concern Form (www.utc.edu/coc).
1. Faculty and Staff response protocol:
 - a. Get the student help immediately by calling the Office of Student Outreach & Support or UTC Police Department during business hours or UTC Police Department after business hours.
 - b. While arranging for help, faculty and staff should take all reasonable steps to not leave the student alone until help arrives.
 - c. Assistance will arrive on the scene as quickly as possible. They will determine if the

student is safe and whether or not the student has access to weapons. If the student needs Emergency Medical Services ("EMS") because of stated or observable suicide attempt actions, EMS will be notified to respond. Medical treatment of the student is the first priority in these instances.

- d. Based on the information gathered from the Office of Student Outreach & Support or UTC Police Department, a determination will be made whether an assessment by a counselor will be conducted.
- e. The Office of Student Outreach & Support or UTC Police Department will escort the student to a private space to wait for the counselor. When possible, the student will be directly escorted to the Counseling Center. The counselor will assess the nature and severity of the suicidal ideation, the supports that the student may have available, and the least restrictive way to ensure the safety of the student and community. The counselor will make every effort to be on the scene within 30 minutes of deciding that it is necessary to come to the campus location. The on-call counselor will follow the Counseling Center procedures. The counselor and the student will construct a plan.

SECTION VI. POSTVENTION

Because all students, faculty, and staff are valued and these deaths impact the campus community, whether due to accident, illness or the result of self-inflicted injury, it is important that UTC respond in a consistent manner in all events. The University wants to support all those in the campus community who experience emotional stress that accompanies attempted suicides.

A. Response for Suicide Attempts by Students

1. Upon learning that a student is attempting suicide, the police should be notified immediately:
 - a. If the incident is occurring on-campus, contact the UTC Police Department.
 - b. If the incident is occurring off-campus, contact 9-1-1.
2. Issues of confidentiality do not apply when a person's life is in danger. In many instances, a suicide attempt constitutes a medical emergency (e.g. bleeding from self-injury, confusion, or coma from drug overdose).
3. If the attempt occurs on campus and is discovered by UTC Housing and Residence Life staff, staff should follow department guidelines.
4. The UTC Police Department will notify:
 - a. Emergency medical personnel, if needed.
 - b. The Counseling Center or the on-call counselor.

- c. The Office of the Dean of Students on-call staff person.
5. Emergency medical personnel will transport the student to the hospital.
 - a. In some cases, to ensure the student's safety or that of other members of the campus community, the police officer may be required to take the student into custody and direct the person's transport to the hospital for evaluation. These circumstances include violence, serious injury, or conduct likely to result in immediate serious harm to the student or others.
 - b. If the student is not experiencing a medical emergency, but is experiencing emotional crises, the counselor on-call will conduct an evaluation. If hospitalization is warranted, a police officer may provide transportation.
6. The Office of Student Outreach & Support will go to the hospital and render assistance, if needed. When appropriate, the Office of the Dean of Students will contact the family of the student who attempted suicide and support will be given to family members and significant others at the hospital as needed. The Counseling Center and Office of Student Outreach & Support will coordinate after-care support as needed.
7. If the student is hospitalized, the Office of Student Outreach & Support will do the following:
 - a. Gather as much information as possible, including the current condition of the student and the precipitating event that lead to hospitalization, whether the student is in the emergency room and what their room number is, whether anyone such as friends or family is currently with the student, whether family, friends, faculty or anyone else has been notified of the hospitalization, and how the student was transported to the hospital.
 - b. Gather available information from available resources and online databases to get a full picture of the student's status.
 - c. If visiting the hospital, take business cards. Check in with the hospital's Crises Team before going to the room so that they are aware that you are there to see the student. If the student is able to converse, assess the student's needs, and offer to send out a faculty notification. If the parents are on their way, find out when they will arrive to meet them at the hospital if necessary.
 - d. If the student is hospitalized outside the Chattanooga area, make a call to the treating hospital to see if it is possible to speak to the student.
 - e. Discuss academic options with the student. If the student decides that it is in their best interest to leave school, assist the student with navigating the withdrawal process.

8. The Office of Student Outreach & Support will report all relevant information regarding the attempted suicide, including contacts with significant others, through the SOC Team and/or CARE Team, as well as document the case in the University's Community Member of Concern database system.
9. If the student decides to remain at the University, the student will be encouraged to be engaged in psychotherapy and other supportive interventions or treatments available. The Counseling Center and Office of Student Outreach & Support will work with other University departments to reintegrate the student into the campus environment and to develop with the student appropriate support mechanisms. Additional support is provided and discussed at the SOC Team and/or CARE Team meetings.
10. If appropriate, the Vice Chancellor of Enrollment Management and Student Affairs (or the Office of the Dean of Students as designee) will contact the Office of the Chancellor, or other offices, as appropriate, so that further support can be provided.
11. Any member of the University involved in the intervention of the suicide attempt may call the Counseling Center or Office of Student Outreach & Support to consult about how to best help the individual following the attempt or for additional resources.

B. Response for Completed Suicide by Students

Please refer to the Student Death Policy.

SECTION VII. 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 UTC Police Department or other law enforcement agencies. University law enforcement 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 UTC Police Department) 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.

SECTION VIII. HISTORY AND REVIEW

A. Version

This is the first version of this policy.

B. Periodic Review

This policy is effective January 1, 2020. This policy shall be reviewed on or before January 1, 2025.

Appendix A: Columbia Suicide Severity Rating Scale (C-SSRS) Screen for Schools

	Past Month	
1) Have you wished you were dead or wished you could go to sleep and not wake up?		
2) Have you actually had any thoughts about killing yourself?		
If YES to 2, answer questions 3, 4, 5 and 6 If NO to 2, go directly to question 6		
3) Have you thought about how you might do this?		
4) Have you had any intention of acting on these thoughts of killing yourself, as opposed to you have the thoughts but you definitely would not act on them?	High Risk	
5) Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?	High Risk	
Always Ask Question 6	Lifetime	Past 3 Months
6) Have you done anything, started to do anything, or prepared to do anything to end your life? <i>Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, held a gun but changed your mind, cut yourself, tried to hang yourself, etc.</i>		High Risk



Any YES indicates the need for further care. However, if the answer to 4, 5 or 6 is YES, immediately ESCORT to Emergency Personnel for care, call 1-800-273-8255, text 741741 or call 911.

DON'T LEAVE THE PERSON ALONE.
STAY WITH THEM UNTIL THEY ARE IN
THE CARE OF PROFESSIONAL HELP

Authorization

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