# UTM Suicide Prevention Plan

# PREVENTION, INTERVENTION, POSTVENTION

UNIVERSITY OF TENNESSEE AT MARTIN | DEPARTMENT OF STUDENT AFFAIRS

Updated 08/2024

# TABLE OF CONTENTS

Death by suicide is preventable
Definitions2
Death by suicide2
Suicide attempt2
Protective Factors
Risk Factors
Written and/or Verbal Clues
Behavioral Clues4
Situational Clues4
UT Martin three-tiered prevention plan4
Prevention4
Student Health and Counseling Services4
Employee Assistance Program5
UTM Care Team5
UTM Care Coordinator5
First Year Initiative and Peer Enabling Program (PEP) Leaders6
Healthy Hawks
Residence life7
Intervention
Reporting
Student in Crisis Protocol8
Who To Contact9
Response10
Postvention11
Crisis Response11
Resources
UTM Medical Emergency Crisis Response Protocol13
Student Affairs Response Team
References

# UNIVERSITY OF TENNESSEE AT MARTIN SUICIDE PREVENTION PLAN

# DEATH BY SUICIDE IS PREVENTABLE

The University of Tennessee at Martin is dedicated to suicide prevention efforts and has a comprehensive plan to address suicide prevention, intervention, and postvention. The most recent statistics are alarming; according to the Center for Disease Control and Prevention (CDC), death by suicide is the third leading cause of death among traditional college aged students. Our campus is in rural Northwest Tennessee, which further increases the need to remain vigilant, as the CDC statistics also show a drastic increase in rate of suicide in rural counties.<sup>1</sup>

We recognize that our community is also the proud home of diverse sub-populations that may require additional types of resources, such as our military veterans, non-traditional students, and an increasing number of students who represent our multi-cultural student populations. Our efforts do not end with UTM's student population; all members of our campus community, including faculty and staff, benefit from the University's comprehensive plan.

UTM is a JED Campus. The University partnered with the JED Foundation in 2021. The Jed Foundation is a nonprofit organization that provides colleges and universities expert support, evidence-based best practices, and data-driven guidance to protect student mental health and prevent suicide. JED offers helpful resources on the JED website: <u>Https://jedfoundation.org/</u>



# The Jed Foundation<sup>2</sup>

# DEFINITIONS

# DEATH BY SUICIDE

When people direct violence at themselves with the intent to end their lives, and they die because of their actions.<sup>3</sup>

#### SUICIDE ATTEMPT

When people harm themselves with the intent to end their lives, but they do not die because of their actions.<sup>4</sup>

# PROTECTIVE FACTORS<sup>5</sup>

When met with life's challenges, protective factors decrease the probability that an individual will develop a particular disease or disorder, reduce the severity of an existing condition, or mitigate the effects of stress generally.

- Life skills necessary to problem solve, adapt to change, and the resilience to cope with challenges
- Connectedness to family, friends, and the campus a framework of support
- Access to appropriate medical care to address physical and mental health
- Spiritual and cultural beliefs that support self-preservation
- Easy access to clinical interventions and support for help seeking

# RISK FACTORS 6,7

Certain risk factors are hallmarks of an individual in need of referral to resources. The more risk factors that are present, the higher the risk; nevertheless, often just one is reason for concern and potential action.

- Previous suicide attempt of self, friend, or family member
- Death by suicide of friend or family member
- Talking, posting on social media, or texting about suicide
- Substance use opioids, alcohol, and marijuana are all depressants
- Social isolation

- Feelings of hopelessness
- Easy access to lethal means
- Clinical depression or other mood disorders
- Chronic disease or disability
- Impulsive or aggressive tendencies
- Loss (relational, social, work, financial)
- Strong wish to die a preoccupation with death (thoughts, music, reading, writing)

# WRITTEN AND/OR VERBAL CLUES<sup>8</sup>

Distress is often conveyed through words. Written and/or verbal clues can be either direct, or more coded, indirect communications. We have experienced an increase in student's expressing distress or intent via social media posts and text messages.

Direct Statements:

- I've decided to kill myself.
- I wish I were dead.
- I'm going to commit suicide.
- I'm going to end it all.

Indirect Statements:

- I'm tired of life, I just can't go on.
- My family would be better off without me.
- Who cares if I'm dead anyway.
- I just want out.
- I won't be around much longer.
- Pretty soon you won't have to worry about me.
- I just want to go to sleep and never wake up.
- If (such and such) doesn't happen, I'll kill myself.

# BEHAVIORAL CLUES<sup>9</sup>

There is often indication that someone is nearing a crisis point, the following behavioral clues indicate a need for concern.

- Past suicide attempt
- Gaining access to a firearm or stockpiling pills
- Giving away prized possessions
- Impulsivity/increased risk taking.
- Unexplained anger, aggression, and/or irritability
- Baseline behavior changes (positive or negative)

- Sudden decline in job or academic performance
- Drastic change in appearance or mannerisms
- Self-destructive acts (i.e. cutting)
- Physical symptoms (eating, sleeping, headaches, stomach problems, menstrual irregularities)
- Perfectionism

# SITUATIONAL RISK FACTORS 10

Risk of suicide increases when harmful or stressful situations occur:

- Being expelled from school or fired from a job
- Family problems or alienation change in level of interaction
- Loss of any major relationship or change in relationship status
- Death of friend or family member (especially if by suicide)
- Diagnosis of serious or terminal illness
- Financial problems of self or family
- Sudden loss of freedom or fear of punishment
- Feeling embarrassed or humiliated in front of peers
- Recent disappointment or rejection
- Being a victim of assault or bullying

# UT MARTIN THREE-TIERED PREVENTION PLAN

UT Martin has a three-tiered plan for suicide prevention: Prevention, Intervention, and Postvention.

# PREVENTION

The first tier of this plan involves prevention efforts. Much like protective factors, these programs, offices, and initiatives act to educate, inform, and build a framework of support for our campus community.

# STUDENT HEALTH AND COUNSELING SERVICES

The mission of Student Health and Counseling Services (SHCS) is to assist students in achieving and maintaining wellness by providing medical and counseling services that address the unique needs of college students. Students are encouraged to take a holistic approach to wellbeing by actively taking responsibility for their own health, both physical and mental. Student Health and Counseling Services offers a positive approach to supporting a student's healthy lifestyle through the development of physical, emotional, intellectual, spiritual, and social well-being.

UTM Student Health and Counseling Services (SHCS) is a campus resource that provides wellness services to students who are currently enrolled in classes and/or paying the student health fee. The staff at SHCS is committed to delivering professional mental and physical health services to a diverse student body. Click here to take a free mental health screening.

- o Monday Friday
- 8:00 am to 5:00 pm
- Located on the Martin Campus at 609 Lee Street, Martin, TN.
- To schedule an appointment call (731) 881-7750
- o Closed during all University Administrative Closings
- o Staff includes: Licensed Clinicians, Health Care Providers and a Clinical Case Manager
- o <u>Student Health and Counseling Services Website</u>

# Mental Health Crisis Helpline: (731) 881-7743. Available 24/7, answered by a trained clinician.

# EMPLOYEE ASSISTANCE PROGRAM

The UTM Employee Assistance Program (EAP) offers free, confidential assistance to employees and their families and provides a wide range of resources to support employees dealing with challenges, including but not limited to:

- Suicidal thoughts
- Grief and loss

- Depression, anxiety and stress
- Family concerns

EAP is available 24/7, and can be reached at 855-HERE4TN (855.437.3486), or at www.here4tn.com

# UTM CARE TEAM

The UTM Care Team is a multi-disciplined committee including faculty, staff, and a Care Coordinator/Case Manager, dedicated to providing support to students. The team meets on a regular basis and has a mission of collaborative problem solving to aid in removing barriers to student success.

UTM Care Team aids the campus community during periods of crisis, such as the loss or serious injury of a student. The team's multi-disciplined make-up allows for interactions across campus, uniting Athletics, Student Affairs, Academic Affairs, and other administrative entities. Visit <u>care.utm.edu</u> for additional information and links to campus resources including the **Hawk Alert** and **Care Connect**.

# UTM CARE COORDINATOR

Higher Education Care Coordinators serve their institutions by coordinating outreach, intervention, and support efforts across campus and community systems to assist students. Referrals may include students who are facing crises, experiencing life stressors, and/or encountering barriers that are limiting their personal, professional, or academic success.

At UTM, the Care Team coordinates the proactive and follow-up case management services for students referred for personal, emotional, mental health, and/or academic concerns in a non-clinical setting. Our Care Team coordinates care within the community as well as across campus resources such as Student Health and Counseling Services, Office of Disability Services, Student Success Center, Office of Financial Aid, etc.

The Care Coordinator is in the Office of Student Conduct and Care in the Boling University Center, Room 215.

- Monday Friday
- 8:00 am to 5:00 pm
- To schedule an appointment call (731) 881-7703
- o Closed during all University Administrative Closings
- Submit a Hawk Alert or a Care Connect online anytime <u>care.utm.edu</u> if you are concerned for the wellbeing of a student
- Student Affairs Response Team operates year-round; someone is always on call and will respond to Hawk Alerts within 24 hours. This is not a replacement for emergency services.
- Call 911 for emergency situations

# FIRST YEAR INITIATIVE AND PEER ENABELING PROGRAM (PEP) LEADERS

The UT Martin <u>First-Year Initiative</u> is a unique program designed to help students with their transition to university life. The first step of the First-Year Initiative is SOAR—Summer Orientation and Registration. During SOAR, prospective students meet with academic advisors and register for classes. Additionally, students and parents receive information about various student services including academic support, housing, financial aid, and student involvement.

The second step of the First-Year Initiative involves the active participation of students in the General Studies 101 course (GENS 101). The GENS 101 course begins during Welcome Weekend, which occurs the weekend prior to the start of classes in the Fall Semester. A faculty mentor and a <u>peer counselor</u> (PEP Leader) lead the group during Welcome Weekend and throughout the GENS 101 class. PEP Leaders are trained in QPR Suicide Prevention.

#### HEALTHY HAWKS

The mission of Healthy Hawks - UTM Healthy Campus Initiative aims to develop a culture of wellness by implementing sustained strategies that promote healthy behaviors to improve the health of faculty, staff, and students. The purpose of the Healthy Hawks - UTM Healthy Campus Initiative is to promote wellness and to perform ongoing assessment, planning, implementation, and evaluation of health promotion strategies and to make recommendations for policy change. Healthy Hawks - UTM Healthy Campus Initiative contributes to the reduction of preventable negative health outcomes among the students, faculty, and staff at the University of Tennessee at Martin. http://www.utm.edu/healthyhawks.

#### **RESIDENCE LIFE**

UTM Residence Life employs full-time professional live-in staff and student Resident Assistants (RA) to help manage the campus residential experience. The Residence Life program 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. Professional staff are also certified for NARCAN usage with access to the life-saving drug in every hall.

# INTERVENTION

Should a community member exhibit warning signs of suicidality, which may include risk factors, behavioral clues, situational clues, or making indirect (coded) or direct verbal/written statements about suicide, reporting is easy.

#### REPORTING

To aid the community in knowing how to respond, the campus has a UTM Student in Crisis Protocol, also known as the "Red Light Protocol." Campus community members are instructed to contact 911 or the Department of Public Safety (DPS), **(731) 881-7777**, when a perceived potential for harm exists. If the person is <u>not</u> at risk of imminent danger but there are some concerns, community members may submit an online <u>Hawk Alert online</u>; contact UTM Mental Health Crisis Helpline **(731) 881-7743** to speak with a trained clinician 24/7; during business hours, Monday – Friday, anyone may call Student Health and Counseling Services (SHCS), **(731) 881-7750** and/or the Care Team Office, **(731) 881-7703**, <u>UTMCareTeam@utm.edu</u>,. In addition, the Care Team and SHCS provide students with the contact numbers for the local community crisis team, national suicide prevention lifelines and crisis text number, in printed and online media.

The Hawk Alert reporting system has a dedicated member of the response team who works directly with the Department of Public Safety, Residence Life, and other offices as deemed necessary to support students who may need additional support. The goal is to reach students in distress, prior to a crisis.

The Care Connection reporting system is intended for low level questions, concerns, or resource requests and will be reviewed within 1-2 business days. If someone has a question or concern that may create a barrier to personal and/or academic success, this could be a great first step to getting help!

- Help find answers to questions
- Create connections to campus and community resources
- Provide support for students who could use a little extra care



# WHO TO CONTACT

# EMERGENCY 911

Call 911 If a student exhibits severe distress, has stated or alluded to having a suicide plan and lethal means, has made statements that they are experiencing suicidal thoughts, or have 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.

SUICIDE AND CRISIS LIFELINE 988, or 24/7 UTM CRISIS RESPONSE LINE

The 988 Suicide & Crisis Lifeline and the UTM SHCS Crisis Response Line are free, confidential 24/7 phone lines that connect individuals in crisis with trained counselors across the United States.

You don't have to be suicidal or in crisis to call the Lifelines. People call to talk about other things: substance abuse, economic worries, relationships, sexual identity, illness, getting over abuse, depression mental and physical illness, and loneliness.<sup>12</sup>

# DEPARTMENT OF PUBLIC SAFETY (DPS) (731) 881-7777

UTM's campus police force will accept reports of concern and respond to members of the campus community in need of intervention. UTM DPS Officers are trained annually in responding to crises. They can perform welfare checks on community members to assess safety and will take necessary steps to ensure safety if it is in question. UTM DPS notifies the Crisis Response Team every time a student is transported to the hospital from campus.

# CARE TEAM HAWK ALERT CARE.UTM.EDU

The Hawk Alert is an online reporting tool that allows community member to alert the Care Team's Crisis Management Team if they are concerned for a student. Hawk Alert is not a replacement for contacting Campus Police or calling 911 in cases of imminent danger. All alerts are triaged within 24 hours of being received. Should immediate intervention be required, appropriate measures are taken to alert those on campus who can help.

# STUDENT HEALTH AND COUNSELING SERVICES (731) 881-7750

Concerned community members may contact the office for consultation Monday thru Friday, 8:00 am to 5:00 pm. The staff will triage crisis situations as needed. Students with a mental health emergency can call 731-881-7743 24/7 or walk-in during normal operating hours.

# REGIONAL AND NATIONAL SUPPORT

- Pathways Crisis Line: (800) 372-0693
- TN State Crisis Line: (855) 274-7471

Suicide and Crisis Lifeline:
988 Call or Text
Chat online <u>https://988lifeline.org/</u>

#### RESPONSE

#### STUDENT AFFAIRS RESPONSE TEAM

The Student Affairs Response Team (SART), also known as the Crisis Response Team, is comprised of Student Affairs professionals who respond to crisis situations involving students. One of the team members is on-call every day of the year, and the team maintains an open line of communication with the team to further aid in responsiveness. If a student is transported to the hospital, the Department of Public Safety will establish communication with the student's parents or support person. A member of SART or the Crisis Response Team will be available to speak with parents or a support person regarding the crisis evaluation process and assist with addressing campus related issues such as communicating absences to faculty and campus support resources.

#### BEHAVIORAL THREAT ASSESSMENT TEAM

Select members of SART and 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 utilizes industry specific rubrics and tools for assessing potential for violence on campus.

#### STUDENT HEALTH AND COUNSELING SERVICES

In addition to normal operating hours, UTM SHCS offers case management services to best address student needs and get them connected appropriately. Additionally, the office will triage students who are in crisis any time during the business day. Students may call to make an appointment **(731) 881-7750**. Call-in times allow first-time visitors to have an assessment and receive immediate care.

#### CARE MANAGEMENT

Students gain the support of a care manager. The Care Team Case Manager can help navigate academic and resource concerns upon returning to campus. 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 case manager, or referral to appropriate university resources or local agencies.

#### EMPLOYEE ASSISTANCE PROGRAM

The Employee Assistance Program (EAP) is available to employees 24/7 and staffed by trained counselors who will aid the employee in finding local resources for continuing mental health.

# POSTVENTION

Following the loss of a campus community member to suicide, the University is dedicated to assisting the campus recover from loss, decrease trauma, and prevent additional suicides. The Survivors of Suicide Loss Task Force<sup>13</sup> defines postvention as an organized response in the aftermath of a suicide to accomplish any one or more of the following:

- To facilitate the healing of individuals from the grief and distress of suicide loss
- To mitigate other negative effects of exposure to suicide
- To prevent suicide among people who are at high risk after exposure to suicide

#### **CRISIS RESPONSE**

# DEATH OF A STUDENT PROTOCOL

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.

#### STUDENT AFFAIRS RESPONSE TEAM

The University's Student Affairs Response 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 SART will coordinate with local mental health providers and the Tennessee Suicide Prevention Network for assistance.

# COORDINATION WITH COMMUNITY RESOURCES

The University's Student Affairs Response Team will coordinate with additional community resources if deemed beneficial; the SART will coordinate with local mental health providers and the Tennessee Suicide Prevention Network for assistance.

#### RESOURCES

# **EMERGENCY AND CRISIS**

#### EMERGENCY 911

SUICIDE AND CRISIS LIFELINE 988

UTM DEPARTMENT OF PUBLIC SAFETY (731) 881-7777

UTM SHCS MENTAL HEALTH CRISIS LINE NEW PERSPECTIVES (731) 881-7743

CRISIS TEXT LINE TEXT 'TN' TO 741741 TO BEGIN TEXTING

LGBTQ TREVORLIFELINE (866) 488-7386

PATHWAYS CRISIS (TENNESSEE) (800) 372-0693

TENNESSEE REDLINE (ADDICTION AND RECOVERY) (800) 889-9789

POISON CONTROL CENTER (800) 222-1222

# LOCAL RESOURCES

UTM STUDENT HEALTH AND COUNSELING SERVICES LEE STREET, MARTIN, TN

CAREY COUNSELING (731) 480-0011 HANNINGS LN, MARTIN, TN

(731) 587-3545 HAWKS RD, MARTIN, TN

PATHWAYS (731) 885-9333 MT ZION RD, UNION CITY, TN

**RECOVERY NAVIGATORS (ADDICTION** AND RECOVERY) (731) 541-5485

# REPORTING AND SUPPORT

NATIONAL SEXUAL ASSAULT HOTLINE (800) 656-HOPE (4673)

WRAP - WO/MEN'S RESOURCE & RAPE ASSISTANCE PROGRAM (800) 273-8712

TITLE IX (731) 881-3505 TITLEIX@UTM.EDU

OFFICE OF STUDENT CONDUCT AND CARE (731) 881-7703 STUDENTCONDUCT@UTM.EDU

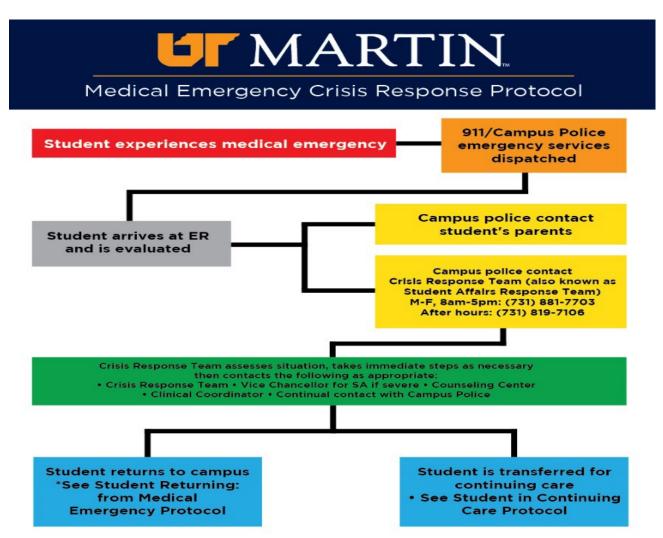
UTM CARE TEAM (731) 881-7703 UTMCARETEAM@UTM.EDU



**CARE TEAM** 







Medical emergency includes Suicidal ideation, threat, or attempt Protocols are only effective when medical emergency known to appropriate campus officials

#### CRISIS RESPONSE TEAM/STUDENT AFFAIRS RESPONSE TEAM Members

Assistant Vice Chancellor for Student Affairs and Dean of Students Assistant Vice Chancellor for Residence and Student Life Director of Residence Life Clinical Coordinator for Student Health and Counseling Services Clinical Case Manager for Student Health and Counseling Services Director, Student Conduct and Care Care Coordinator/Outreach and Support John Abel Gina McClure Ryan Martin TBD Brandon Keller Shannon Perry Priscilla Price References

988 Suicide and Crisis Lifeline. (2022). Retrieved from 988lineline.org: https://988lifeline.org

- Center for Disease Control. (2019, September). *Risk and protective factors*. Retrieved from https://www.cdc.gov/violenceprevention/suicide/riskprotectivefactors.html
- Hedegaard, H., Curtin, S., & Warner , M. (2018). *Suicide mortality in the United States, 1999-2017.* Hyattsville, MD: National Center for Health Statistics.

JED Foundation. https://jedfoundation.org/wp-content/uploads/2021/07/JED-Comprehensive-Approach\_FINAL

QPR Institute. (2019). Ask a question, save a life (4th ed.). QPR Institute.

- Rodgers, P., & Suicide Prevention Resource Center. (2011). Understanding Risk and Protective Factors for Suicide: A Primer for Preventing Suicide. Retrieved from Suicide Prevention Resource Center: http://www.sprc.org/sites/default/files/migrate/library/RiskProtectiveFactorsPrimer.pdf
- Substance Abuse and Mental Health Services Administration. (2016, April). *Promoting wellness: A guide to community action.* Retrieved from https://store.samhsa.gov/product/Promoting-Wellness-A-Guide-to-Community-Action/sma16-4957
- Survivors of Suicide Loss Task Force. (2015, April). *Responding to grief, trauma, and distress after a suicide: U.S. national guidelines.* Washington, DC: National Action Alliance for Suicide Prevention. Retrieved from http://www.sprc.org/resources-programs/responding-grief-trauma-and-distress-after-suicide-us-national-guidelines
- U.S. Department of Health and Human Services. (2018). *Suicide in America: Frequently Asked Question.* Bethesda, MD: National Institute of Health.

<sup>1</sup> (Hedegaard, Curtin, & Warner , 2018)

<sup>2</sup> (JED Foundation, 2021) <u>https://jedfoundation.org/wp-content/uploads/2021/07/JED-Comprehensive-Approach\_FINAL</u>

- <sup>3</sup> (U.S. Department of Health and Human Services, 2018)
- <sup>4</sup> (U.S. Department of Health and Human Services, 2018)
- <sup>5</sup> (Substance Abuse and Mental Health Services Administration, 2016)
- <sup>6</sup> (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)
- <sup>7</sup> (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)
- <sup>8</sup> (Center for Disease Control, 2019)
- <sup>9</sup> (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)
- <sup>10</sup> (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)
- <sup>11</sup> (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)

<sup>12</sup> (Suicide and Crisis Lifeline, 2022) <u>https://988lifeline.org</u>

<sup>13</sup> (Survivors of Suicide Loss Task Force, 2015, p. 1)