

UTM Suicide Prevention Plan

PREVENTION, INTERVENTION, POSTVENTION

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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 now the second leading cause of death among traditional college aged students. Our campus is located in rural West 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.¹

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.

DEFINITIONS

DEATH BY SUICIDE

When people direct violence at themselves with the intent to end their lives, and they die because of their actions.²

SUICIDE ATTEMPT

When people harm themselves with the intent to end their lives, but they do not die because of their actions.³

WELLBEING⁴



Overall wellness is essential to academic and personal success. The idea of wellness, or wellbeing, is complex; however, when viewed along eight dimensions, we begin to gain a meaningful understanding of what it takes to remain “well” in a holistic sense. In order to aid our campus community in achieving overall wellness, the University engages both campus and local resources.

Community members are encouraged to act as self-advocates in seeking out ways to maintain wellness in all eight dimensions: intellectual, physical, environmental, spiritual, social, occupational, emotional, and financial. Building a strong base in each dimension allows for resiliency and flexibility when faced with adversity.

Throughout the plan, we highlight these dimensions and offer resources to aid in maintaining the physical and mental health needed to support overall wellness.

PROTECTIVE FACTORS⁵

When met with life's challenges, protective factors increase a community member's ability to navigate issues and protect people from suicide.

- 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 a community member in need of referral to resources. The more risk factors that are present, the higher the risk; nevertheless, 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 CLUES⁸

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:

- 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:

- 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 CLUES⁹

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 CLUES¹⁰

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-part 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 located on the Martin Campus at 609 Lee Street, Martin, TN. This campus resource offers office visits to students who are currently enrolled in classes and 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.](#)

- Monday - Friday
- 8:00 am to 5:00 pm
- To schedule an appointment call **(731) 881-7750**
- COUNSELING Call-In Hours:
 - Monday - Friday 12:00 to 2:00 pm
- Closed during all University Administrative Closings
- [Student Health and Counseling Services Website](#)
- 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 many 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. Additionally, the team provides educational outreach to both employees and students on topics such as Autism Awareness, Trauma Informed Practices, Bystander Intervention, Post Traumatic Stress Disorder, Veterans assistance, Question, Persuade, Refer (QOR) suicide prevention training, depressive disorder, anxiety, and more. The team includes a Crisis Response Team and a Behavioral Threat Assessment Team.

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 care.utm.edu for additional information and links to campus resources including the Hawk Alert.

UTM CARE COORDINATOR

Higher Education Case Managers 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 the Student Health and Counseling Services, Office of Disability Services, Student Success Center, Office of Financial Aid, etc.

The Care Coordinator is located in the Office of Student Conduct and Care in the Hall Moody Administration Building, Room 222.

- Monday - Friday
- 8:00 am to 5:00 pm
- To schedule an appointment call **(731) 881-7703**
- Closed during all University Administrative Closings
- **24/7 Submit a Hawk Alert** care.utm.edu
 - Crisis Response Team operates 24/7 year-round, someone is always on call and will respond to Hawk Alerts

HEALTHY HAWKS

The mission of Healthy Hawks - UTM Healthy Campus Initiative aims to develop a culture of wellness at the University of Tennessee at Martin 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 build capacity 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. More information can be found at <http://www.utm.edu/healthyhawks>.

FIRST YEAR INITIATIVE AND PEER ENABELING PROGRAM (PEP) LEADERS

The UT Martin [First-Year Initiative](#) 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 [peer counselor](#) (PEP Leader) lead the group during Welcome Weekend and throughout the GENS 101 class. PEP Leaders are trained in QPR Suicide Prevention.

PEER ADVOCATES

The Peers Educated for Early Response (PEER) Advocate program trains students to aid peers and act as mental health advocates on campus. The program educates the PEER Advocates in mental health awareness, increases their ability to recognize signs of depression, and identify students who may benefit from connection with resources for mental and/or physical health.

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 not at risk of imminent danger, community members may submit an online Hawk Alert online, 24/7; contact UTM Mental Health Crisis Helpline **(731) 881-7743** to speak with a trained clinician 24/7; call Student Health and Counseling Services (SHCS), **(731) 881-7750**, Monday – Friday during business hours; contact a member of the Care Team, **(731) 881-7703**, UTMCareTeam@utm.edu, or personal contact. 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, under the umbrella of the Care Team, has a dedicated response team who work directly with the Department of Public Safety, Residence Life, and other offices as deemed necessary, to support students who may be in need of additional support. Our goal is to reach students in distress, prior to crisis; however, the program is responsive to all reports.





IS A STUDENT IN IMMINENT DANGER?
Risk of death is high. The student has a suicide plan and access to lethal means.



CALL 911

~or~

Call Campus Police (731) 881-7777



Call Campus Police (731) 881-7777



24/7/365

Submit a HawkAlert @ care.utm.edu

Call Campus Police (731) 881-7777

Suggest the student call UTM Crisis Helpline (731) 881-7743

Monday - Friday: 8:00 am - 5:00 pm

Contact Care Team Facilitator (731) 881-7703

Contact Student Health and Counseling (731) 881-7750



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.

DEPARTMENT OF PUBLIC SAFETY (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](https://care.utm.edu)

The Hawk Alert is a 24/7/365 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 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.

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. Call-in hours are weekdays from 12:00 am to 2:00 pm, and the staff will triage crisis situations as needed. Students with a mental health crisis can call 731-881-7743 or walk-in during normal operating hours.

REGIONAL AND NATIONAL SUPPORT

- Pathways Crisis Line: (800) 372-0693
- TN State Crisis Line: (855) 274-7471
- National Suicide Prevention Lifeline: (800) 273-8255
- Crisis Text Line: Text TN to 741741

RESPONSE

CRISIS RESPONSE TEAM

The Crisis Response Team is comprised of six Student Affairs administrators who respond when a student has been transported to the hospital. One of the team members is on-call every day of the year, and 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.

Contacting the student's parents or support person is initiated by DPS if the student is transported to the hospital. 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 Weakley 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.

STUDENT HEALTH AND COUNSELING SERVICES

In addition to normal operating hours, UTM SHCS offers Call-in appointments at designated times daily, 12:00 to 2:00 pm, Monday thru Friday. 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 TEAM AND CASE MANAGEMENT

Students gain the support of a Care Team case manager to 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 Care Team case manager, 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

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 Force¹¹ 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.

CRISIS RESPONSE TEAM

The University's Crisis 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 CRT will coordinate with local mental health providers and the Tennessee Suicide Prevention Network for assistance.

COORDINATION WITH COMMUNITY RESOURCES

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

RESOURCES

EMERGENCY & CRISIS

Emergency 911

UTM Department of Public Safety
(731) 881-7777

UTM Mental Health Crisis Helpline
(731) 881-7743

Crisis Text Line
Text 'TN' to 741741 to begin texting

National Suicide Prevention Lifeline
1-800-273-TALK(8255)

LGBTQ TrevorLifeline
1-866-488-7386

Pathways Crisis (Tennessee)
1-800-372-0693

LOCAL & STATE RESOURCES

**UTM Student Health and
Counseling Services**
(731) 881-7750
Lee Street, Martin, TN

Carey Counseling
(731) 480-0011
Hannings Ln, Martin, TN

New Perspectives
(731) 587-3545
Hawks Rd, Martin, TN

Pathways
(731) 885-9333
Mt Zion Rd, Union City, TN

**TN Redline - Substance use and
Treatment Referrals**
1-800-889-9789

REPORTING & SUPPORT

National Sexual Assault Hotline
1-800-656-HOPE (4673)

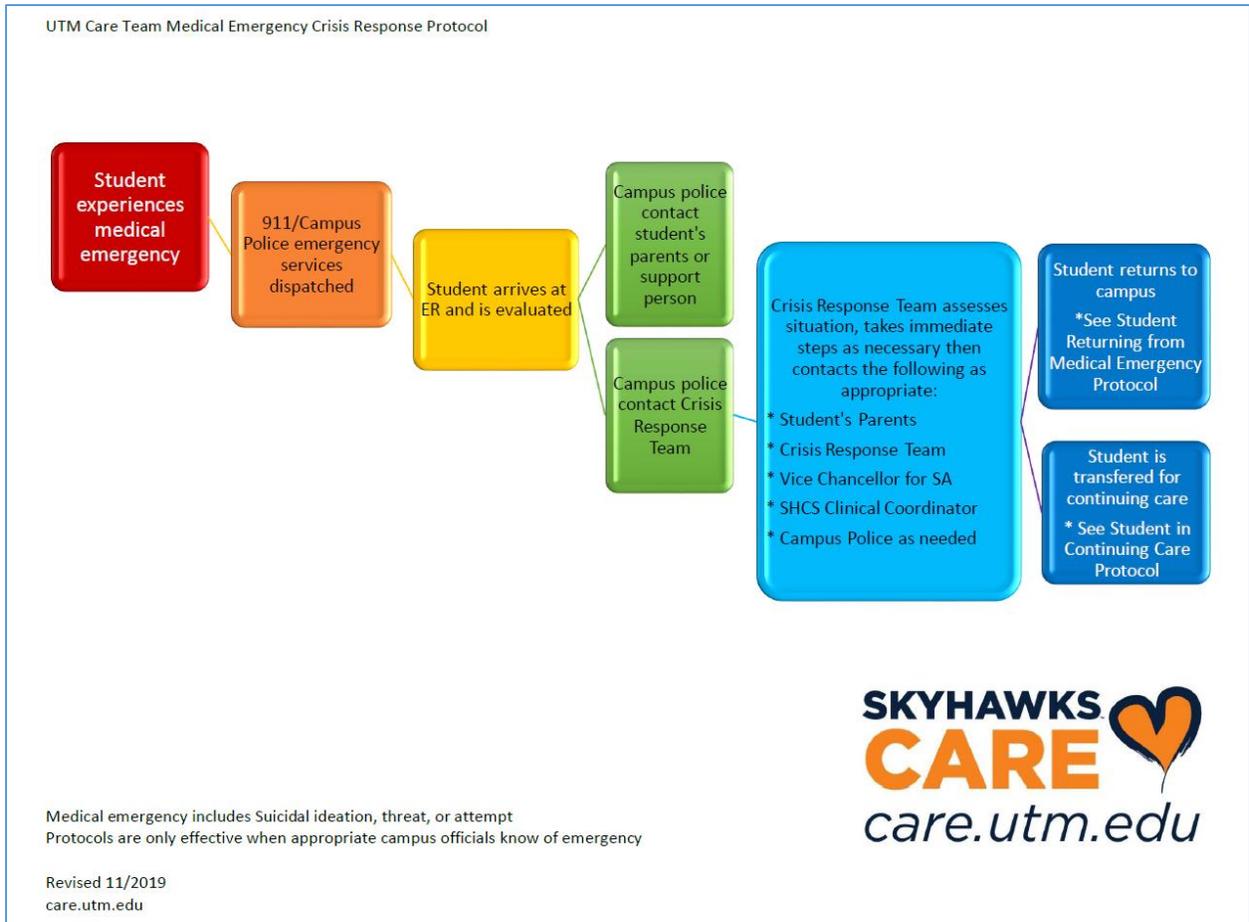
**WRAP - Wo/Men's Resource & Rape
Assistance Program**
1-800-273-8712

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

UTM CARE TEAM MEDICAL EMERGENCY CRISIS RESPONSE PROTOCOL



CRISIS RESPONSE TEAM

CRISIS RESPONSE TEAM (CRT)

CRT MEMBERS

Assistant Vice Chancellor for Student Affairs and Dean of Students	John Abel
Assistant Vice Chancellor for Residence and Student Life	Gina McClure
Assistant Director of Residence Life	Ryan Martin
Clinical Coordinator for Student Health and Counseling Svc	Jenifer Hart (Consulting)
Director, Student Conduct and Care	Shannon Perry
Student Affairs Coordinator and FYI	George Daniel
Care Coordinator/Outreach and Support	Alyson Newman

UTM Student in Crisis Protocol



IS A STUDENT IN IMMINENT DANGER?
Risk of death is high. The student has a suicide plan and access to lethal means.

YES
Risk is high!
Student has a suicide plan and lethal means

CALL 911

~or~

Call Campus Police (731) 881-7777

MAYBE
No specific plan or lethal means, but has expressed suicidal ideations

Call Campus Police (731) 881-7777

NO
Risk of death is not imminent but there is cause for concern

24/7/365

Submit a HawkAlert @ care.utm.edu

Call Campus Police (731) 881-7777



Suggest the student call UTM Crisis Helpline (731) 881-7743

Monday - Friday: 8:00 am - 5:00 pm

Contact Care Team Facilitator (731) 881-7703

Contact Student Health and Counseling (731) 881-7750

Suicidal ideation - Thoughts or an unusual preoccupation about suicide may be seen in the following ways:

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

UTM crisis helpline: (731) 881-7743

Pathways crisis line: (800) 372-0693

TN State crisis line: (855) 274-7471



REFERENCES

- 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.
- 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 questions*. Bethesda, MD: National Institute of Health.

¹ (Hedegaard, Curtin, & Warner, 2018)

² (U.S. Department of Health and Human Services, 2018)

³ (U.S. Department of Health and Human Services, 2018)

⁴ (Substance Abuse and Mental Health Services Administration, 2016)

⁵ (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)

⁶ (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)

⁷ (Center for Disease Control, 2019)

⁸ (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)

⁹ (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)

¹⁰ (QPR Institute, 2019) and (Rodgers & Suicide Prevention Resource Center, 2011)

¹¹ (Survivors of Suicide Loss Task Force, 2015, p. 1)