Protocol for Student Suicide Attempt(s) and Reentry

These guidelines are intended to assist faculty, staff, and administrators with addressing student suicidal behaviors. Although the University strives to respond in a consistent manner, the specificity of each event will sometime warrant adjustment to this protocol to ensure the health, safety, and well-being of the campus community is always priority. If you have any questions or concerns regarding this document, please contact the Student Health & Counseling Center.

CLEAR SIGNS OF DISTRESS **AFTER HOURS** AAMU DPS X5555 (or 911) and Residential Director (RD) if in Suicidal thoughts, attempts, or gestures (selfresidence hall injury in which there is no intent to die but to give an appearance of a suicide attempt) **BUSINESS HOURS** Recent abuse of alcohol and /or drugs Call Student Health and Counseling Unprovoked anger or hostility 256-372-5800/5601 Verbalizations of hopelessness or wanting to POSSIBLE SIGNS OF DISTRESS Sleeping too much or not enough **BUSINESS HOURS** Call Student Health Center Counseling Social isolation/withdrawal 256-372-5800/5601 Significant change in behavior/mood Unusually low self-esteem

If the student is not experiencing an immediate mental/medical health emergency but is experiencing emotional crises as determined by a counselor from **Student Health and Counseling Services**, it is recommended that the community mental health officer is notified to make the determination if hospitalization is warranted.

Suicidal Gestures

If a student makes suicidal threats or gestures, the following steps should occur:

- a. **DPS** should be notified immediately. Upon arriving DPS will notify **Health & Counseling Services** to determine if a counselor needs to appear on scene.
- b. If it is determined that the student has made a suicide attempt and poses an immediate threat to the health, safety, & well-being of themselves or others the student will be transported to the nearest hospital via HEMSI.
- c. **DPS** will then file a conduct report after collaborating with **Health & Counseling Services** to begin the process of implementing an emergency no-trespass.
- d. Once the conduct report is received by **The Office of Judicial Affairs**, a representative from that office will make contact with the parents of the student in question.

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Hospitalization (voluntary/involuntary)

If a student is transported to the hospital rather voluntary or involuntary, the following steps should occur:

- a. A counselor from **Student Health and Counseling Services** will gather information concerning the status of the student to assist **DPS** in developing an incident report.
- b. Once all the pertinent information has been complied and student has been transported to hospital, the **Associate Vice President of Student Affairs** will enact an emergency no trespass and contact the family of the student.
- c. A **Behavioral Intervention Team** (BIT) meeting will be held within 24-hours to discuss the details concerning the incident, including an updated status report on the student (if available), actions taken by all persons involved and a plan of action will be established.

Discharge and Reentry Protocol:

After the student has been emergency no trespassed from campus and wishes to return to campus, the following steps should occur:

- a. **Health & Counseling Services** should be notified about when the student plans on returning to campus and their current status.
- b. Student will be required to submit a medical clearance form to be completed by the **treating licensed medical provider**.
- c. A release of information is to be signed by the student for relevant medical records for review by **Health & Counseling Services.**
- d. **Health & Counseling Services** will notify the **Office of Judicial Affairs** once medical clearance form is received and make any recommendations related to health, safety, and well-being of student in question.