

Identify Missing Components from Your Protocols

How well a suicide crisis is handled can have a widespread impact on students, staff, and faculty. Good crisis protocols clearly describe what to do and who to contact when:

- A student is in acute distress
- A student attempts suicide
- Someone from the campus community dies by suicide

Good crisis protocols are also readily available and clear to students so they know what to expect if they experience a crisis or a crisis occurs on campus.

The following key components of crisis protocols are adapted from [Framework for Developing Institutional Protocols for the Acutely Distressed or Suicidal College Student](#) (2006) and [Postvention: A Guide for Response to Suicide on College Campuses](#) (2014). Refer to these documents for more details.

Do your crisis protocols cover these key components? Check off all that apply. For any missing items, consider who can help you determine the information to include in your protocols.

Responding to the acutely distressed or suicidal student

- Provides guidance on how to identify someone who may be at risk for suicide, including what steps to take if someone is at risk.
- Identifies who will respond to reports of concern about a student.
- Describes the decision-making process once the potentially at-risk student has been identified, includes what to do when the student who needs help refuses it.
- Describes the process by which the student's risk for suicide is assessed by a mental health professional. This includes establishing memoranda of understanding (MOU) or other type of agreements with local behavioral health providers, hospitals, police or other emergency personnel who may be involved in a mental health crisis.

Establishing an emergency contact notification procedure

- Defines the circumstances when a student's emergency contact would be notified if he or she is in crisis, and what information should be disclosed.
- Specifies the procedure for determining whether information should be disclosed without the student's consent.

Addressing issues around voluntary and involuntary psychiatric hospitalization

- Provides guidance about how to determine if hospitalization is in the best interests of a distressed student. This includes identifying any non-hospitalization options.
- Describes the process of initiating voluntary and involuntary hospitalization. This includes establishing an MOU or other type of agreement with each hospital that may receive a student for assessment or hospitalization.

Documenting encounters with the acutely distressed or suicidal student

- Determines what should be documented in an incident report. This addresses how to compile multiple incident reports for one crisis, whether the information should be part of the student's academic record, and how long these reports will be kept.
- Specifies where and for how long incident reports are maintained.

Developing post-crisis follow-up plans

- Describes the process for determining a follow-up plan for each student who experiences a crisis that reflects the interests of the student, the campus, and the community.
- Identifies the threshold for intervention if the student shows signs of distress again.
- Ensures there is follow-up with those who were involved with and affected by the distressed or suicidal student (e.g., friends).

Addressing leave of absence and re-entry

- Describes the process and structure for a leave of absence.
- Identifies the positive and negative consequences for a student who takes a leave of absence.
- Provides guidance on assessing whether an involuntary leave of absence is in the best interest of the student.
- Describes the process and structure for a student's return to campus from a hospitalization or leave of absence, including what follow-up care is needed.

Responding to a suicide and developing a postvention plan

- Identifies roles and responsibilities for communication. This includes who will communicate to the campus and community about the death of a student and what information will be shared; who will communicate with the family of the deceased student; and who will communicate with the media to ensure safe messaging.
- Specifies which clinical services are available and suitable to support the campus community following a suicide.
- Clarifies the process for identifying any other students at risk after the suicide death.
- Provides guidance on how to decide if hosting a memorial for the deceased student would be in the best interest of the campus community.