

Suicide Intervention Team Policy and Procedure Manual

University of Illinois Champaign-Urbana

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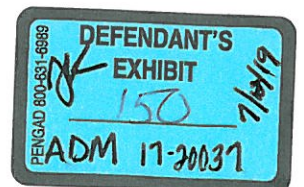


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1.01 Suicide Intervention Team Manual Introduction

This manual has been developed by the University of Illinois Suicide Intervention Team to provide the campus community with information and transparency regarding the Suicide Incident Referring Program's guiding policies and procedures. This manual contains all essential information for the user to make full use of the Suicide Incident Referral Program. This manual includes a description of all Suicide Intervention Team functions, operations, step-by-step procedures, and associated documents. This manual is reviewed annually by the Suicide Intervention Team and modifications made as deemed appropriate.

1.02 The Suicide Intervention Team Mission

I. Mission:

"The Mission of the Suicide Intervention Team at the University of Illinois is to engage in activities that would lead to a reduction in the naturally occurring rate of suicide."

II. Goals:

- a. Increase awareness of signs and symptoms of suicide. Provide education and resources to faculty, staff, and students that increase willingness and comfort when engaging with a suicidal student.
- b. Increase instances of students meeting with mental health professionals after a suicide related behavior.
- c. Empower students to take responsibility for their own health and wellness.
- d. Enhance every student's collegiate experience by limiting the distress that can occur with suicide related behavior.

1.03 History of Suicide Intervention Program on Campus

In 1977, the Vice Chancellor for Student Affairs at the University of Illinois mandated that all Student Affairs staff submit a Suicide Incident Referral Form when credible information became available that a student had threatened, attempted, or completed suicide.

As a result, the "Invite and Encourage Program" was developed. The goal was to enlist friends, family, residence hall staff, and faculty to make contact with suicidal students and encouraged them to meet with a social worker or psychologist to explore the roots of their suicidal intent. Unfortunately, this program only lasted three months and was deemed completely ineffective at increasing the rate of post-threat and post-attempt contact. Only about 5 percent of the students in the program followed up and agreed to see a counselor.

As a result of further program changes and continued suicide incidents occurring on college campuses, the Policy of Mandated Assessment was created in 1984 and continues today. This policy requires any student who threatened or attempted suicide to attend four sessions of professional risk assessment with a licensed mental health professional. To monitor the compliance and program functions, the Suicide Intervention Team was developed in collaboration with the Office of the Dean of Students, The Counseling Center, and McKinley Health Center.

1.04 Suicide on College Campuses and Definition of Suicide Behaviors

I. Suicide on College Campuses:

- a. The rate of suicide among college-attending young adults has been convincingly established at 7.5 per 100,000 students per year (American College Health Association, 2002)
- b. The majority of students who contemplate suicide do not seek professional help, and nearly 80% of students who die by suicide never received services at their campus counseling centers
- c. 21.8 million students enrolled in the nation's colleges and universities in 2013, it is estimated that 1,635 of these students will complete suicide
- d. Suicide is the 2nd leading cause of death among youth attending colleges and universities in the United States (Centers for Disease Control and Prevention 2014)
- e. A 2005 study by Westefeld and colleagues found that 24% of college youth considered suicide. This would be approximately 10,500 students on the University of Illinois Campus

II. Definitions:

The following definitions are used by the Suicide Intervention team when reviewing suicide incident referrals and providing consultation to campus faculty, staff, students, and community mental health providers. These definitions are used for the purpose of providing a common understanding of what exactly suicide is and how it must be contextualized when supporting the campus community.

These definitions are reviewed annually for accuracy and consistency with best practices in the field of suicide prevention.

- a. **Suicide:** A death that was self-inflicted and there was clear intent to die. The term *completed suicide* can be used interchangeably with *suicide*.
- b. **Suicide Attempt:** A potentially self-injurious behavior with a nonfatal outcome and there was clear intent to die. A suicide attempt may or may not result in injury.
- c. **Aborted Suicide Attempt:** A potentially self-injurious behavior with a nonfatal outcome and there was clear intent to die. The person stopped the attempt before physical damage or injury could occur.
- d. **Suicide-related Behavior:** Potentially self-injurious behavior for which there is evident that there was intent to die or a wish to use the appearance of intending to die to attain some other end. The Term *Suicide Acts* can be used interchangeably.
- e. **Suicide Threat:** An interpersonal action, verbal, non-verbal, in writing, or any other form of communication. Action stops short of a directly self-harming act, which communicates or suggests that a suicidal act or other suicide related behavior might occur in the near future.
- f. **Suicide Ideation:** Any self-reported thoughts of engaging in suicide-related behavior.
- g. **Suicidal Intent:** Subjective expectation and desire for a self-destructive act to end in death
- h. **Para-suicidal Behavior:** The act of non-lethal yet intentional self-harming acts and behavior.
- i. **Suicide Gesture:** Attempted suicide characterized by a low-lethality method, low level of intent or planning, and little physical damage.

2.01 Student Code Related to Suicide Incidents on Campus

[Article 2 – General Policies and Regulations]

Medical Policies

2-102 Mandatory Assessment

(a) In the event that the University is presented with a credible report that a student has threatened or attempted suicide, engaged in efforts to prepare to commit suicide or expressed a preoccupation with suicide, that student will be required to attend four sessions of professional assessment. These sessions are designed to foster the students' willingness and ability to maintain a reasonable concern for their own self welfare.

(b) Confidentiality

(1) All records associated with the reported incident are kept separately by the Suicide Intervention Team. The Suicide Intervention Team is staffed by the Counseling Center and McKinley Health Center.

(2) All records associated with the mandated assessment are protected by federal and state laws regarding confidentiality.

(c) Appeals

(1) A student may appeal the accuracy of the report to the Suicide Intervention Team. In some instances, in order for the appeal to go forward, a student will be required to sign a release of information authorizing the members of the Suicide Intervention Team to contact and interview witnesses to the incident. An appeal may be made to the Dean of Students or designee. The decision of the Dean of Students is final.

(2) The policy of four sessions of professional assessment is applied uniformly to all students who cross the threshold described above. The requirement of four professional assessments is not subject to appeal.

2.02 Reporting Suicide Incidents on the University of Illinois Campus

I. Rationale or background to policy:

The University encourages students to maintain a reasonable concern for their mental health well-being, and takes the issue of suicide seriously. The student code Section 2-102 requires that students who have made a credible suicide threat, gesture, or attempt must participate in four sessions of professional assessment with a qualified mental health provide. The University expects members of the campus community to report incidents of suicidal threats and attempts. This is so the Suicide Prevention Team (SIT) can be aware of the risk of suicide in students and offer necessary assistance.

II. Policy Statement:

This procedure establishes guidelines for individuals with concern (i.e., clinicians, staff, students, etc.) to inform the SIT about an incident that elicits concerns of a student's risk of suicide (i.e., students who have made a credible suicide threat, gesture, or attempt).

III. Procedures:

University community members are encouraged to notify the SIT when they receive credible information that raises concerns of students who are at risk of suicide. The referring individuals will:

- a. Fill out the University of Illinois Suicide Incident Referral Form (SIR form) to the best of their knowledge. The SIR form can be found on the Counseling Center website: [<http://counselingcenter.illinois.edu/sites/default/files/SuicideIncidentReferrall.pdf>].
- b. After filling out the SIR form, the referring individuals will print, sign, and fax to: Attention Suicide Intervention Team 217-244-7586; or the SIR form can be delivered to the Center in person.

2.03 Suicide Incident Referral Form Received

I. Rationale or background to policy:

The rationale of this policy is for the Suicide Intervention Team (SIT) to have a clear and strict set of guidelines to follow when receiving a Suicide Incident Referral (SIR).

II. Policy Statement:

This policy relates to all Suicide Incident Referral Forms that are received by the Suicide Intervention Team.

III. Procedures:

- a) Suicide Incident Referrals can be submitted by various people within the University as well as community by completing a Suicide Incident Referral form online available via the UIUC Counseling Center website:
[<http://counselingcenter.illinois.edu/sites/default/files/SuicideIncidentReferral.pdf>].
- b) Once completed, this form can be faxed or dropped off at the front desk of the UIUC Counseling Center during hours of operation (Monday – Friday 8am to 5pm).
- c) After the referral is submitted, it is first reviewed by the administrative assistant to the SIT to determine if the person is currently an enrolled student and if the student is receiving services at either the UIUC Counseling Center or McKinley Mental Health.
- d) If the person is a registered student, they are entered in the Suicide Incident Referral system.
- e) Next a staff member of the Suicide Intervention Team reviews the SIR to determine disposition. (For more information regarding a referral that is activated, refer to section 2.04 *Reviewing a Suicide Incident Referral Form for Activation*).
- f) Please note, due to the limits of confidentiality, Suicide Intervention Team members can confirm if a referral was received but cannot share disposition information with those who wrote the Suicide Incident Referral or other interested parties. All records associated with the mandated assessment are protected by state laws regarding confidentiality.

2.04 Reviewing a Suicide Incident Referral From for Activation

I. Rational or background to policy:

Although University community members are encouraged to refer incidents of suicidal threats and attempts, they are not responsible or advised to make a decision regarding the severity of the situation. The responsibility of assessing the referred case and determining the disposition should be done by a trained mental health professional. One of the tasks of the Suicide Intervention Team (SIT) is to review the referred case and offer appropriate professional recommendations about the disposition.

II. Policy Statement:

This procedure establishes guidelines for members of the SIT to respond when receiving a SIR from the administrative assistant to the program.

III. Procedures:

When the designated SIT member receives an SIR the member will:

- a. Review the SIR Form to decide disposition and determine whether to activate or not activate the referral.
- b. Consult with other SIT members if the indications are unclear.
- c. If a suicidal threat, gesture, or attempt was identified, the case will be activated and sequential actions will be taken.

2.05 Activation of a Suicide Incident Referral

I. Rationale or background to policy:

The rationale of this policy is for the Suicide Intervention Team (SIT) to have a strict set of guidelines to follow when receiving a Suicide Incident Referral (SIR) to determine if the referral should be activated or not. Referrals are activated when there is an accurate and honest report of an enrolled University of Illinois Urbana-Champaign (UIUC) student, who has made a threat, gesture or attempt at suicide.

II. Policy Statement:

This policy relates to all Suicide Incident Referral Forms that are received and activated by the Suicide Intervention Team.

III. Procedures:

- a) When the Suicide Intervention Team receives a Suicide Incident Referral, it is carefully reviewed by a staff therapist on the Suicide Intervention Team.
- b) If the referral is determined to provide a credible account that a student has threatened, gestured or attempted suicide, then the Suicide Incident Referral is activated.

2.06 Deactivation of a Suicide Incident Referral Form

I. Rationale or background to policy:

To ensure that each SIR (Suicide Incident Referral) is thoroughly evaluated prior to deactivation to ensure the welfare of the student in question.

II. Policy Statement:

This procedure establishes guidelines for deactivating an SIR.

III. Procedures:

The SIR in question must be brought to the attention of the SIT (Suicide Intervention Team) who will review all relevant documentation. Two members of the SIT must agree that the SIR no longer meets criteria for an activated SIR and document this on the SIR face sheet. The SIT and the administrative assistant to the SIR program will be notified and the student's SIR status will be deactivated. The SIT member or student's current clinician will notify the student of the deactivation.

2.07 Communicating with Students about a Suicide Incident Referral Mandate

I. Rationale or background to policy:

To ensure that students are promptly and accurately notified regarding activation of their SIR (Suicide Incident Referral) mandate.

II. Policy Statement:

This procedure has established guidelines for notifying a student when there is an activated Suicide Incident Referral by providing detailed information about satisfying the necessary requirements.

III. Procedures:

Once the SIR has been activated by the Suicide Intervention Team (SIT), the student will be notified via e-mail, letter, or verbally in person of their mandated sessions. The student is notified by either a member of the SIT or by their treating clinician if that student is already in treatment at the Counseling Center or McKinley Mental Health.

In the initial notification of an activated SIR it is explained that, as per the Student Code, they are mandated to complete 4 assessment sessions with a licensed mental health professional. The student is provided information on where to complete requirements, which includes the following options: UIUC Counseling Center, McKinley Health Center or with a private practitioner with comparable credentials at the students own expense.

The student is also notified that failure to fulfill the requirements of the assessment may result in disciplinary action, academic encumbrance, suspension and/or withdrawal.

2.08 Completing SIR Sessions with a Private Practitioner in the Community

I. Rationale or background to policy:

The Suicide Intervention Team's (SIT) policy is that student with an activated Suicide Incident Referral (SIR) must complete four therapeutic evaluation sessions. This policy establishes guidelines for students with an active SIR who wish to utilize a licensed private mental health clinician (LPMHC) in the community to fulfill their SIR mandate, rather than a University-affiliated mental health clinician.

II. Policy Statement:

Students who have an active SIR and wish to utilize a licensed private mental health clinician in the community to fulfill their mandate are free to do so. However, in order for sessions with a LPMHC in the community to count towards the mandate, the Suicide Intervention Team must receive documentation from the clinician in a timely manner using the below procedures. Failure to do so may result in an academic hold being placed on the student's account.

III. Procedures:

- a. The student must notify a member of the SIT or their current University-affiliated mental health clinician that they are seeking to fulfill all or part of their SIR sessions through a LPMHC.
- b. At this time, the SIT member can choose to send the student the SIT Community Provider Session Completion form along with the SIR Community Partner letter, to better explain the University's policy on the mandate to the LPMHC.
- c. The student may sign a release with their licensed private mental health clinician allowing the SIT to contact the clinician and verify dates of sessions that will count towards completion of the mandate.
- d. Alternately, the student may sign a release with their LPMHC and ask the clinician to mail or fax back the SIT Community Provider Session Completion form or other documentation providing proof of attendance of therapy sessions that count towards the completion of the mandate.

2.09 Appealing an Activated Suicide Incident Referral

I. Rationale or background to policy:

The Suicide Intervention Team (SIT) recognizes that not all students may agree with their decision to activate a Suicide Incident Referral form (SIR). In accordance with this, the below policy establishes guidelines and procedures for a student who wishes to appeal his or her activated SIR.

II. Policy Statement:

Students who do not agree with the Suicide Intervention Team's decision regarding an activated SIR on their record may appeal the SIT's decision. They may communicate this with a counselor they are already seeing while in session or contact a member of the SIT directly. To appeal the activated SIR, the student must provide information to refute the report. This may include written (i.e. police report, crisis report, emails) or verbal communication beyond what was in the original SIR. In either case the below procedures must be followed:

III. Procedures:

- a. The student with the activated SIR contacts a member of the SIT requesting to appeal the report.
- b. The student meets with the SIT member and presents additional information and/or supportive documentation to support his or her appeal.
- c. The SIT member brings the additional information to the next bi-weekly team meeting, where it is reviewed.
- d. A decision is made by the SIT whether to uphold the original SIR activation or deactivate the report.
- e. The SIT member contacts the student to communicate the decision rendered by the Suicide Intervention Team.

2.10 Managing Students with Multiple Suicide Incident Referrals

I. Rationale or background to policy:

During the course of a student's academic career, the Suicide Intervention Team may receive multiple unique suicide incident referrals on the same student. This policy establishes protocols for managing instances where a student has multiple Suicide Incident Referrals within a short time frame (e.g., 3+ in a single semester).

II. Policy Statement:

This policy pertains to students who have received multiple SIR referrals during the course of an academic year or term. Multiple in this instance means more than one unique incident rather than more than one referral per incident. If a student has an active Suicide Incident Referral and another incident occurs prior to the completion of these four sessions, the student is required to complete 4 sessions from the date of the most recent incident. If the counselor feels that the risk of suicide is of high acuity, then they can consult with the Suicide Intervention Team on further direction and continued quality of care. The Suicide Intervention Team Co-Chairs may choose to communicate with the student the implications of these incidents on them, the campus, and the local community. This will take place on a case by case basis in consultation with the rest of the Suicide Intervention Team members.

III. Procedures:

- a. If another unique Suicide Incident Referral is activated on an active-SIR student, the student will be notified of the new mandate. This notification can be done by the SIT or clinician connected with the student.
- b. The student is required to complete 4 sessions from the date of the most recent incident.
- c. If the SIT decides a meeting should take place with the student to discuss the implications of the multiple referrals, the Co-Chairs will contact the student and arrange for a consultation to take place at the Counseling Center.

2.11 Managing Non-Compliance with Mandate

I. Rationale or background to policy:

The Suicide Intervention Team will follow protocols for managing a student who is non-compliant with their Suicide Incident Referral mandate.

II. Policy Statement:

The Suicide Intervention Team will implement a specific action with students who have not responded to the Counseling Center, McKinley, or Dean of Students about their initial Suicide Incident Referral notification within the given time frame of 7 days from the date of first notice, and have not established compliance through means of future established appointments with the Counseling Center, McKinley, or an outside provider. This is also applicable for students who have initiated but have not yet completed an active Suicide Incident Referral mandate and have not followed up with further contact from Counseling Center staff.

III. Procedures:

- a. Once the Suicide Intervention Team members are made aware of a student being non-compliant with their mandate due to lack of communication or future scheduled appointments, the team will agree to request an academic hold be placed on the student's account.
- b. An SIT member will volunteer to carry out the hold through the Office of the Dean of Students.
- c. The SIT member will email the designated Office of the Dean of Students contact with the student's initials and UIN # and request a hold.
- d. The SIT member will blind copy/forward the email received from the Office of the Dean of Students to the administrative assistant to the program for confirmation and documentation of the hold.

2.12 Watch/Hold List Policy

I. Rational or background to policy:

In accordance with the University policy on mandated assessments around suicidal incidents, the Suicide Intervention Program has created a Watch/Hold List policy to establish parameters in which the program can make determinations on how to monitor students that are not in compliance with the University policy.

II. Policy Statement:

Students who have not completed their mandated professional assessment meetings and are either no longer enrolled or have withdrawn from the University will have an academic hold placed on their account and be added to a Watch/Hold List.

Students will remain on the list for two consecutive semesters (excluding the summer term), before any decision to close the Suicide Incident Referral is made.

Students will be removed from the Watch/Hold List if/when:

- a. The student re-enrolls in the University. They are then placed back on the active SIR list.
- b. The student has completed their mandated professional assessments with an off campus professional. At this time, the student's SIR will be closed.
- c. If a student has not been enrolled for classes for more than two consecutive semesters (excluding the summer term), the Suicide Intervention Team can move to close their SIR.

III. Procedures:

- a. If the SIR team receives notification that a student has withdrawn for the semester or has not re-enrolled for a new semester, they will send an email to the Office of the Dean of Students and request an academic hold be placed on the student's account. The administrative assistant for the program will then place the student on the Watch/Hold List.
- b. If a student is removed from the Watch/Hold list because they re-enroll, the administrative assistant for the program will place the student back on the active SIR list. The student's progress towards completing their mandate will be monitored at the bi-weekly meeting.
- c. If a student is removed from the Watch/Hold list because they complete their mandated assessments or they've been unenrolled for two consecutive semesters (excluding the summer term) their SIR will be closed. The team will send an email to the Office of the Dean of Students and request their academic hold be removed. The administrative assistant for the program will place the student onto the "Closed SIR" list.

3.01 Completing the Suicide Incident Referral Tracking Sheet

I. Rational or background to policy:

The Suicide Intervention Team (SIT) has a standard series of actions in response to receiving a Suicide Incident Referral Form (SIRF). These are detailed below in the policy statement and procedures.

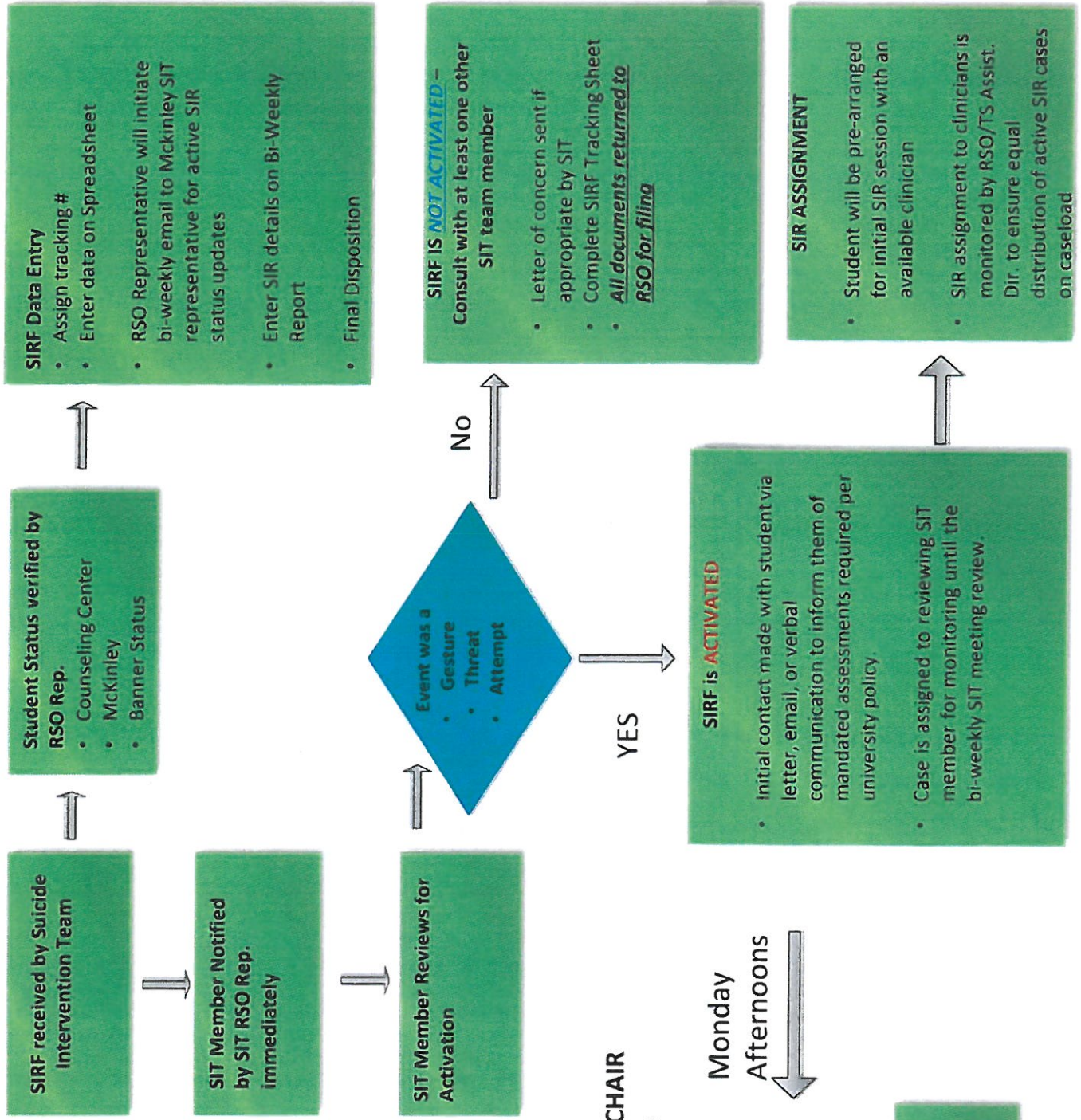
II. Policy Statement:

SIRFs come into the Counseling Center by fax, walk-in, print form, or email from local police departments (PDs) or University Housing. The administrative assistant to the program creates a new SIR tracking sheet for each referral with a new event/incident. Any referral received on an existing event/incident is added to that packet (packet refers to all referrals received on the same event/incident).

III. Procedures

- a. The administrative assistant to the program assigns each new SIRF a number and looks up and fills in demographic information on registered students. For non-registered students the administrative assistant consults with the assigned SIT clinical member for the day on further steps to take.
- b. The SIR tracking sheet, along with a copy of the SIR, are placed in the assigned SIT clinical member's mailbox.
- c. The SIT clinical member reviews the SIRF and completes the rest of the SIR tracking sheet.
- d. The completed tracking sheet and copy of the SIR are given back to the administrative assistant to the program for further processing and filing.

3.02 Suicide Incident Referral Work Flow Guide



Task completed by SIT CHAIR and BIT Representative

Monday
Afternoons

BIT CHECK

SIR Roster is checked with BIT agenda and progress shared as appropriate

3.03 Assignment of SIRs to Suicide Intervention Team

I. Rational or background to policy:

To ensure a timely and organized review and processing of all Suicide Incident Referral Forms (SIRFs) by providing continuous coverage by the Suicide Intervention Team.

II. Policy Statement:

The below procedures establish organized guidelines for the Suicide Intervention Team (SIT) in assigning coverage responsibilities for the timely review of received SIRFs and related consultation.

III. Procedures

- a. The Administrative Assistant to the program will create monthly schedules that assigns SIRD coverage duty to a SIT clinician for each Counseling Center business day. This schedule will take into account the availability of each SIT clinician for the month. The schedule will be distributed to SIT members at the beginning of each month.
- b. On their assigned coverage days SIT clinicians will be responsible for reviewing and processing any SIRFs received on that date, in accordance with SIT Manual Policies 2.03-2.05. If the SIRD does not meet the threshold for activation, the SIT clinician on assigned coverage duty must consult with another available SIT member prior to completing the tracking sheet for filing. If the SIRD is activated, the SIT member on assigned coverage will notify the student in accordance with Policy 2.07.
- c. Once the appropriate review and action is taken with respect to the SIRD, the SIT clinician on assigned coverage will fill out the remaining portions of the SIRD Tracking Sheet that indicate the appropriate disposition. The completed SIRD Tracking Sheet will then be returned to the Administrative Assistant to the program for appropriate filing.
- d. In the event that an SIT clinician is not available on their date of assigned coverage, the Administrative Assistant to the program will identify another available SIT clinician to review and process the SIRD in accordance with the above procedures.

3.04 Guidelines for Clinicians to Complete SIR Sessions

I. Rational or background to policy:

The Suicide Intervention Team (SIT) understands the importance of helping Counseling Center and McKinley Health Center mental health professionals understand the nuances of the Suicide Intervention Program. This policy aids mental health professionals in assessing student risk, assisting students in completing their four mandated sessions, and provides useful guidelines for them to follow when seeing a student in the Suicide Intervention Program.

II. Policy Statement:

The below procedures assist mental health professionals when they are seeing a student in the Suicide Intervention Program. These are not exhaustive and additional consultation with members of the Suicide Intervention Team may be required and/or helpful to professionals when seeing a student.

III. Procedures

- a. Mental health professionals should make sure to assess for risk with the student at each session and document this in each progress note.
- b. The SIR policy should be reviewed with the student during their first session, and as needed in follow-up sessions, and documented in the progress note.
- c. A student may complete their mandated sessions with a community provider of their choice. If a student expresses this desire, they should be provided with the SIR community Partner Letter and SIR Community Provider Session Completion Form (See Appendix 4.06 and 4.07 respectively.) The mental health professional should inform the SIT of their community referral. They should also request the student to ask their community provider to notify the SIT team following the attendance of each session, as well as fax the SIR Community Provider Session Completion Form upon ending their fourth session.
- d. Students who are active in the SIR program and are also being provided services by the Counseling Center will not be terminated until the student has completed their four mandated sessions, or has been moved to the Watch/Hold list. In cases where a Counseling Center clinician will no longer be able to provide the mandated assessments, such as an intern completing their internship or the departure of a staff clinician, the student can be transferred to an SIT member or referred to a community provider. (See section 3.05 Termination of Completed SIR sessions.)
- e. For a student, only one appointment per week will count towards the four mandated SIR sessions. For example, a student who is scheduled on a Monday and a Wednesday of the same week, only one of the sessions would count towards the completion of the mandate. The SIT team recommends that students be scheduled on a weekly basis, using clinical judgement. Mental health professionals may consult with the SIT if presented with extenuating circumstances.
- f. The mental health professional should keep the Suicide Intervention Team abreast of the student's progress. This includes activities such as appointment attendance, future appointments, community referrals, and overall status by informing a SIT member of the Administrative Assistant to the SIT program.

3.05 Termination of students who have not completed their SIR Mandate

I. Rational or background to policy:

The Suicide Intervention Team strongly encourages clinicians not to terminate clients who are in the process of completing their four mandated therapy sessions. However, the team recognizes that there may be certain situations where this needs to occur. These are detailed in the below policy and procedures.

II. Policy Statement:

Clinicians who have students who have not completed their mandated professional assessment on their caseload may choose to terminate the file only if absolutely necessary. Below are some examples of when this may occur:

- a. The clinician has had no recent contact with the client and they have not responded to multiple attempts to reach them. If this happens, the clinician would notify the chair of the Suicide Intervention team to discuss possible termination and future steps.
- b. The clinician is leaving the Counseling Center and will be unable to continue to meet with the student. If this happens, the clinician would notify the chair of the Suicide Intervention team to discuss possible termination and future steps.
- c. In a recent session, the client and clinician agreed the client would meet their mandate with another provider in the community. The provider needs to be identified and current contact information for them will need to be given. The client agrees to sign a consent to release information so their session attendance with the outside provider can be verified. If this happens, the clinician would notify the co-chairs of the Suicide Intervention team and a team member will be assigned to follow-up for compliance.

III. Procedures:

- a. If a clinician is considering terminating an active SIR student they should meet with the Suicide Intervention team chair to discuss the situation and future steps for the client.
- b. If the clinician and the Suicide Intervention team chair decide a termination is appropriate there needs to be a clear disposition on the case.
- c. Once the file has been terminated, the Suicide Intervention team chair will inform the group and take appropriate steps for the case.

3.06 Annual Reporting & Statistics

I. Rational or background to policy:

The Suicide Intervention Team keeps statistics on a monthly basis to ensure data and campus trends are being recorded and monitored for the program. This data is reviewed by the co-chairs of the team and may be used to determine or revise policies and procedures.

II. Policy Statement:

This procedure establishes guidelines for the administrative assistant to the SIR program on how to accurately record statistical information.

III. Procedures

- a. Statistics are kept on a monthly basis for each academic year. For SIR team purposes, the academic year starts with the first Summer term and goes through the Spring term of each year.
- b. Statistics are broken into two groups. SIR reports that are not activated or deactivated are recorded in number only. No other information from these reports is counted towards the statistics.
- c. For SIR reports that are activated, data recorded includes:
 - a. Class Year (Freshman, Sophomore, e.g.)
 - b. Gender
 - c. Type of Incident (Threat, Gesture, or Attempt)
 - d. International or Domestic Student status
 - e. Age
 - f. College (ACES, LAS, e.g.)
 - g. Referral Source (Housing, ODOS, UIPD, e.g.)
- d. Statistics are recorded on the Counseling Center O:Drive in the SIR team folder.
- e. Once completed, statistics are sent to the co-chairs of the Suicide Intervention team for review.

3.07 Suicide Intervention Team Coverage Schedule

I. Rational or background to policy:

The Suicide Intervention Team consists of clinicians at the Counseling Center, a representative from McKinley Health Center, and an administrative assistant. In order to share the workload of the Suicide Incident Referrals that come in, a coverage schedule has been implemented.

II. Policy Statement:

Suicide Incident Referral forms come in to the Counseling Center by fax, printed form, emails from area police departments, or are walked in. The Suicide Intervention Team clinicians that are based at the Counseling Center will rotate coverage every weekday to regulate who is responsible for viewing and following up on each referral. This coverage schedule is determined by the administrative assistant to the program.

III. Procedures:

- a. The administrative assistant to the program assigns each clinician a day of the week that will be their responsibility to cover.
- b. When putting together the schedule, the assistant will look at each clinician's vacation/sick leave for the month before assigning coverage. If a clinician will be out on a day where they would normally have coverage, adjustments will be made to ensure coverage is provided.
- c. The assistant will send out electronic copies of the schedule as well as add the information into each clinician's Titanium schedule.

3.08 Suicide Intervention Team – End of Semester Sessions

I. Rational or background to policy:

The Suicide Intervention Team recognizes that some students are not able to complete their four session mandate by the end of each semester, due to the date the incident occurs. In order to facilitate these students, the below policy has been made.

II. Policy Statement:

When a student is not able to complete their SIR mandate by the end of a semester due to time constraints, they can ask to be seen multiple times in a one week period. When this occurs, the four mandated sessions cannot take place in any less than a three week window. Ideally, this would apply to sessions three and four only. Clinicians can consult with the SIT Co-Chairs for additional information or exceptional circumstances.

III. Procedures:

- a. The student must ask their clinician or the SIT team to be seen multiple times in a one week period.
- b. This request will be reviewed by the clinician (with possible consultation of the SIT Co-Chairs) to determine if this is an appropriate course of action.
- c. If the request is approved, the SIT team will be notified and will mark this accordingly on all SIT documentation.

3.09 SIT Students who attend Counseling Center Groups

I. Rational or background to policy:

Occasionally, the Suicide Intervention Team will receive a SIRF on a student who is already being seen at the Counseling Center in a therapy group. In order to ensure these students are seen on a timely basis, the team has enacted the below policy.

II. Policy Statement:

When a current Counseling Center group client gets an active SIRF, the student's clinicians will be consulted. The group facilitators have several options when this occurs. They can count group therapy sessions towards the student's SIR mandate, if risk is assessed in or outside of group. If the facilitators believe addressing the SIR will be disruptive to the group setting, they can schedule individual sessions with the group client. If there are extenuating circumstances, the facilitators can consult with the SIT Team Co-Chairs.

III. Procedures:

- a. When a SIRF comes in the administrative aide to the program will check to see if the student is already a Counseling Center client.
- b. If the SIT student is identified as a current Counseling Center group client, the group facilitators will be notified and provided with a copy of the SIRF.
- c. The SIT team member on duty will consult with the facilitators about SIR student notification, and their plan to see the student in the future to address the mandate.

3.10 SIT Students who have Concurrent AOD and SIR Mandates

I. Rational or background to policy:

The Suicide Intervention Team has seen an increase in students who have concurrent AOD and SIR Mandates. The below policy was implemented to address these incidents.

II. Policy Statement:

When a student has an active AOD and SIR mandate, they will be scheduled for an AOD assessment using existing Counseling Center protocol. Instead of seeing two different clinicians (one for the AOD mandate and one for the SIR mandate), the student will see one clinician for both mandates. Clinically, this provides a constant for the student during the mandate process.

III. Procedures:

- a. When a SIRF comes in on a student that has an active AOD mandate, the administrative aide to the SIT program will notify the SIT team member on coverage. The administrative aide to the AOD program will notify the AOD program chair.
- b. If the student is already seeing an AOD clinician, their subsequent sessions will be counted towards the SIR mandate.
- c. If the student is not assigned to any Counseling Center clinician, the AOD assessment will be scheduled first, and the AOD clinician will continue to see the student for the SIR mandate.
- d. For any extenuating circumstances, clinicians can consult with the SIT Co-Chairs.



University of Illinois Suicide Incident Referral Form

Revised 05/2019

The University of Illinois Suicide Intervention Team coordinates the timely response, intervention, and support to students who are engaging in suicidal behavior in order to facilitate a safe, respectful and productive educational environment for all students.

As a member of the University of Illinois campus community you are strongly encouraged to notify the Suicide Intervention Team any time you receive credible information (e.g., messages or conversations you have exchanged with students; or behaviors you observed or become aware of where student(s) have engaged in actions or gestures that indicate suicidal intention or harm to themselves).

Please provide as much relevant information as possible about the incident. The information you provide will help the Suicide Intervention Team best assess the situation and respond appropriately to ensure the student(s) receive the support they may need.

For more information go to: [University of Illinois Suicide Intervention Policy](#)

Submission Instructions:

- 1. Consult with and submit over the phone with a clinician at 217-333-3704 or**
- 2. Print, Sign, and Fax to: Attention Suicide Intervention Team 217-244-7586**

Student Information

| | |
|-----------------------------|----------------------|
| First Name | <input type="text"/> |
| Last Name | <input type="text"/> |
| Age | <input type="text"/> |
| Race | <input type="text"/> |
| Gender | <input type="text"/> |
| Year in school | <input type="text"/> |
| College | <input type="text"/> |
| Major | <input type="text"/> |
| University ID Number (UIN) | <input type="text"/> |
| University Net ID or E-mail | <input type="text"/> |

Information about the incident

| | |
|----------------------------|----------------------|
| Date Incident Occurred | <input type="text"/> |
| Time Incident Occurred | <input type="text"/> |
| Location Incident Occurred | <input type="text"/> |

Please briefly describe the events that caused you to be concerned about the safety of the student

(e.g., messages you received, conversations, behaviors you observed or became aware of)

Based on the information you provided above, are you concerned that the safety of others is directly at risk?

If yes, please explain:

Please check the appropriate option below. These will assist the Suicide Intervention Team to identify additional support the student(s) may need.

| | Yes | No | I don't Know |
|--|-----------------------|-----------------------|-----------------------|
| To your knowledge, does the person have access to weapons that may be intended for of suicide or cause harm? (e.g., firearms, knives, etc.) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To your knowledge, does the person have access to other items that may be intended for suicide or to cause harm? (e.g., pills, ropes, propane, etc.) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To your knowledge, has the person attempted suicide in the past? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To your knowledge, has the person recently experienced a major loss? (e.g., loss of loved one, relationship, academic pursuit, etc.) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To your knowledge, are there concerns about the student's use of alcohol or other drugs? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To your knowledge, is the student currently receiving counseling or other mental health services? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| To your knowledge, has the student received counseling or other mental health services in the past? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please provide the following information:

Name of person completing report

Relationship to the student

Department

Phone Number

University E-mail Address

Date report submitted

Please Check

By submitting this referral, I confirm that the information provided above is accurate to the best of my knowledge.

University of Illinois Counseling Center
Suicide Incident Referral Form
Flow Sheet

SIRF # _____

Student Name: _____ UIN #: _____ Gender: Male Female Trans

Academic Status: Freshmen Sophomore Junior Senior Graduate International Student: Yes No Unknown

Student Age: _____ College: _____ Major: _____

Location: Emergency Room Hospital (OSF or Carle) Referral Source: _____

Date Incident Occurred: _____ Date SIRF referral(s) received: _____

Counseling Center: Active Client (Counselor _____) Previous client Not a CC client

MCHC: Active Client (Counselor _____) Previous client Not a MCHC client

SIT member to follow up: Gomez Grantham Hu Lofton McKinley Miebach Novinska

SIRF has been reviewed and was determined to be a: Threat Gesture Attempt

Activated Initial Notification Date: _____ Method: E-Mail Phone Verbal

Member(s) consulted: Gomez Grantham Hu Lofton McKinley Miebach Novinska

Not Activated - DOES NOT MEET CRITERIA: Ideation Only Other: _____

De-activated due to appeal Date: _____

De-Activated due to Other: _____

Student Email: _____

Additional Comments:

Miller, Sarah E

Cc: Miller, Sarah E; Gomez, Alejandro Jr; Grantham, Kamau I; Hu, Tzu-An; Novinska, Andrew; Miebach, Thomas Gage; Lofton, Christopher Parnell
Subject: **URGENT MATTER: UNIVERSITY OF ILLINOIS INITIAL NOTIFICATION - RESPONSE REQUIRED**

I ILLINOIS
Counseling Center

Response Required by _____

Dear _____,

I am emailing you as a member of the Suicide Intervention Team because we received information about you that occurred recently. We empathize with you as it appears you may be having a difficult time right now. We are concerned for your well-being and we are here for support. Here are the next steps for you to take within the next 7 days from receipt of this email:

- Call The Counseling Center at 217-333-3704 to schedule your first appointment. These assessments are provided to you at no cost.
 - You will be required to complete 4 mandated risk assessments on a weekly basis.
 - These 4 risk assessments can also be completed with a mental health therapist (e.g., LCSW, licensed psychologist, LCPC, etc.) at McKinley or your local/home community. If so, please email/communicate this to us.
- You may find more information on the Suicide Intervention Program at <https://counselingcenter.illinois.edu/outreach-consultation-prevention/outreach-consultation-teams/suicide-prevention-program/suicide>

Every effort is made to respect your confidentiality, and so all records of the referral and four subsequent mandated assessments are protected by federal and state laws regarding confidentiality.

Thank you for your prompt attention to this matter. Should you have any questions or concerns regarding this email, please contact me.

Sincerely,

Alejandro Gómez, MSW, LCSW

(pronouns: he, him, his)

Assistant Director

Clinical Counselor

Counseling Center, University of Illinois at Urbana-Champaign

610 E. John St., MC-306

Champaign, IL 61820

217-333-3704

jrquez@illinois.edu | counselingcenter.illinois.edu



I ILLINOIS
Counseling Center

Please be aware that email may not be confidential.

Miller, Sarah E

Subject: University of Illinois Counseling Center

I ILLINOIS
Counseling Center

Dear _____,

I am contacting you as a staff member of the Counseling Center at the University of Illinois. We received information about a situation that occurred recently. We wanted to make sure that you are aware of the resources on campus that are available to you, as it appears you may be having a difficult time right now. Below are the links to the Counseling Center, McKinley Health Center, Office of the Dean of Students and Disability Resources & Educational Services. I hope you will find a few moments to review the information about the support services each has to offer.

Should you have any questions about this email or would like to make an appointment to meet with someone at Counseling Center, McKinley Health Center, Office of the Dean of Students, or Disability Resources & Educational Services, I have provided the contact information below.

University of Illinois Counseling Center **217-333-3704 610 E. John Street (Turner Student Services Bldg. 2nd floor), Champaign**
<https://counselingcenter.illinois.edu/>

Self Help Brochures on a variety of topics
<https://counselingcenter.illinois.edu/brochures>

McKinley Health Center University of Illinois **217-333-2705 1109 S. Lincoln Ave., Urbana**
<http://mckinlev.illinois.edu/medical-services/mental-health>

Office of the Dean of Students **217-333-0050 610 E. John Street (Turner Student Services Bldg. 3rd floor), Champaign**
<https://odos.illinois.edu/ccss/>

Disability Resources & Educational Services **217-333-4603 1207 S. Oak St., Champaign**
<https://www.disability.illinois.edu/>

Crisis Line 217-359-4141

Sincerely,

Alejandro Gómez, MSW, LCSW

(pronouns: he, him, his)

Assistant Director

Clinical Counselor

Counseling Center, University of Illinois at Urbana-Champaign

610 E. John St., MC-306

Champaign, IL 61820

217-333-3704

jrgomez@illinois.edu | counselingcenter.illinois.edu



I ILLINOIS

Counseling Center

Please be aware that email may not be confidential.

I ILLINOIS
Counseling Center

206 Student Services Building
610 E. John Street
Champaign, Illinois 61820
(217) 333-3704 / fax (217) 244-7586

Dear Community Partner,

The University of Illinois takes the issue of suicide very seriously and wants to ensure the safety of all of our students and the Campus community. In the fall of 1984, the University of Illinois instituted a formal program to reduce the rate of suicide among its enrolled students. At the core of the program is a policy that requires any student who threatens or attempts suicide to attend four sessions of professional assessment with a qualified mental health professional. These sessions are designed to foster the student's willingness and ability to maintain a reasonable concern for their own welfare and receive recommendations for ongoing mental health treatment. You may read this policy in full at http://admin.illinois.edu/policy/code/article2_part1_2-102.html.

The Counseling Center and McKinley Mental Health Unit provide these four sessions free of charge to University of Illinois students. Students may also choose to complete these sessions with a qualified mental health professional outside of the University of Illinois. The Suicide Intervention Team (SIT) requires a student complete a valid authorization to release information with an outside provider so the SIT may confirm these sessions have been completed and the provider is fully informed of the incident that initiated this mandate.

All records associated with the reported incident are maintained separately and do not become part of a student's academic record. The Suicide Prevention Team is staffed by University of Illinois Counseling Center and McKinley Health Center staff. All records associated with this mandate are protected by federal and state laws regarding confidentiality.

The Suicide Intervention Team requires that the first session occur within one week of the attempt or threat and the remaining appointments occur on a weekly basis. Students who fail to comply with this mandate may be subject to possible academic hold.

The Suicide Intervention Team coordinates with local area hospitals, mental health professionals, and law enforcement to ensure that University of Illinois students maintain a safe and healthy collegiate experience and have access to quality mental health services.

As a mental health professional you may be requested by a student to complete these sessions with them. We appreciate your continued collaboration in our efforts.

Please feel free to contact us if you have any questions.

Alejandro Gomez, MSW, LCSW
Suicide Prevention Team Chair
610 E. John St.
Champaign, IL 61820
217-333-3704
jrgomez@illinois.edu

I ILLINOIS
Counseling Center

206 Student Services Building
610 E. John Street
Champaign, Illinois 61820
(217) 333-3704 / fax (217) 244-7586

Student Name: _____

UIN# _____

Dear Community Mental Health Provider,

The Suicide Intervention Team has been informed that the student referenced above is receiving counseling services in your office. As a result of recent events, the student has been referred to the Suicide Intervention Team in accordance with the University of Illinois Suicide Intervention Policy. This policy requires that any student at the University of Illinois who engages in a suicide threat, gesture, or attempt is required to complete four sessions of professional assessment with a licensed mental health provider. These sessions can be done outside of the University of Illinois and with a licensed mental health provider in the community at the student's choosing. After a release of information has been signed by the student, please contact us if you warrant more information. The University Suicide Intervention Team encourages that sessions occur weekly until this requirement is completed. Please complete the information below and return a copy to our office upon the completion of each session (Please re-use this sheet to document and fax over subsequent sessions). If the student does not complete these sessions they are subject to an academic hold being placed on their student account.

To review this policy in full please go to http://admin.illinois.edu/policy/code/article2_part1_2-102.html.

Provider Name: _____

License Number: _____ State: _____

Session # __: Date: _____

Signature of Provider

Date

Please fax form to: 217-244-9645
Or mail to:
University of Illinois Suicide Intervention Team
110 Turner Student Services Building
610 East John Street
Champaign, IL 61820
Telephone: 217-333-3704