East Georgia State College  
Suicide Prevention Protocol  
Response Procedure

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Review Committee: Tim Goodman, Paul Egbe, Wiley Gammon, Sherrie Helms, Donald D. Avery, Mary Smith

East Georgia State College (EGSC) is a partner with our students, faculty and staff in the pursuit of both mental and physical well-being, good practices, and practical education. College campuses across the state and country are facing more frequent issues involving individuals in psychological distress. While we can hope for a limited number of these situations to occur on our college campus, preparedness and proper response is one key to successful resolution in these situations.

Training
The Office of Student Affairs at EGSC in collaboration with the Office of Counseling and Disability Services will provide an annual training program for students, faculty and staff of general need to know information at the beginning of the academic year starting with Fall ‘17.

- For students the training will be on a voluntary basis with the exception of information provided to all students through the Basic Skills course.
- Faculty and staff will receive annual training of general need to know information to prepare them for interactions in the classroom and across campus.
- Certain groups of individuals’ resident assistants (RA’s), student life personnel, intramural workers, housing staff, and athletics personnel will receive additional training as they may be more likely to come in close contact more often with these type situations.

Observer - Common Warning Signs of Student Distress
- Uncharacteristically poor performance or preparation for that student
- Disruptive classroom behavior
- Excessive absence or tardiness
- Avoiding or dominating discussions
- References to suicide or homicide in verbal statements or writing
- Asking instructor for help with personal problems
- Inability to get along with others
- Complaints from other students
- Change in personal hygiene
- Dramatic weight gain or loss
- Frequently falling asleep in class
- Irritability
- Impaired speech
- Tearfulness
- Intense emotion
- Inappropriate responses
- Physically harming self
Observer - Suicidal Ideations – Signs and Symptoms
Suicide warning signs or suicidal thoughts include:
- Talking about suicide — for example, making statements such as "I'm going to kill myself," "I wish I were dead" or "I wish I hadn't been born"
- Getting the means to take your own life, such as buying a gun or stockpiling pills
- Withdrawing from social contact and wanting to be left alone
- Having mood swings, such as being emotionally high one day and deeply discouraged the next
- Being preoccupied with death, dying or violence
- Feeling trapped or hopeless about a situation
- Increasing use of alcohol or drugs
- Changing normal routine, including eating or sleeping patterns
- Doing risky or self-destructive things, such as using drugs or driving recklessly
- Giving away belongings or getting affairs in order when there's no other logical explanation for doing this
- Saying goodbye to people as if they won't be seen again
- Developing personality changes or being severely anxious or agitated, particularly when experiencing some of the warning signs listed above.

Warning signs aren't always obvious, and they may vary from person to person. Some people make their intentions clear, while others keep suicidal thoughts and feelings secret.

Respondent - Defining and Identifying a Crisis Situation
A person is a clear and present danger to himself/herself if:
- The person expresses suicidal/homicidal ideations with a plan and/or intent that could be reasonably executed if intervention is not ordered; or
- The person has threatened to inflict serious bodily injury on themselves and there is a reasonable probability that such conduct will occur if intervention is not ordered; or
- The person's behavior demonstrates that they lack the capacity to care for their own welfare leading to a reasonable probability of death, serious bodily injury, or serious physical or mental debilitation if intervention is not ordered; or
- The person has inflicted, attempted to inflict or threatened to inflict serious bodily harm on another, and there is reasonable probability that such conduct will occur if intervention is not ordered.

Respondent - Suggestion for Intervention
- Speak to the student privately to minimize embarrassment and defensiveness
- Avoid making promises to keep shared information confidential
- Discuss your observations and perceptions of the situation directly and honestly with the student
- Express your concern in a non-judgmental way; respect the individual's value system
- Be honest with students about the limits of your ability to help them and let them know you can help them get to someone who can help address their concerns
- Provide counseling center staff with the individual's name, date of incident, and a description of the incident that has caused concern

Respondent - Psychiatric crisis necessitating assessment for inpatient treatment:
- A student says they are thinking about suicide/homicide and they have a clear plan, access to items needed to go through with a plan and intent to follow through with the plan.
• A student is exhibiting signs of psychosis which include: paranoia/delusions (thinking others are out to get them, the government is tapping into their brain etc), mania (ability to stay awake for days on end without feeling tired, engaging in high risk behaviors, euphoria), impairment in reality testing (cannot identify what is real or not, unable to accurately state who they are, where they are, the date etc), confusion/disorientation, hallucinations (seeing things, hearing voices, feeling like bugs are crawling on them), bizarre/odd behaviors etc. These symptoms can often be confused with/similar to intoxication and are often exacerbated by drug/alcohol use.

• A student reports a rape and/or sexual assault.

• A student reports a physical assault.

**Respondent – Determination Immediate Assistance is NOT Necessary…**
The individual may have some suicidal feelings, but aren't immediately thinking of hurting themselves…suggest the person:
- Reach out to a close friend or loved one — even though it may be hard to talk about your feelings
- Contact a minister, spiritual leader or someone in your faith community
- Call a suicide hotline
- Make an appointment with your doctor, other health care provider or mental health provider
- Suicidal thinking doesn't get better on its own — so get help.

**Respondent - When to pursue immediate help…**
If you think you may attempt suicide, get help now:
- Call 911 or your local emergency number immediately.
- Call a suicide hotline number. In the U.S., call the National Suicide Prevention Lifeline. Use that same number and press "1" to reach the Veterans Crisis Line.

**Respondent – What Should You Do?**
Should you become concerned about the personal welfare of an individual or others as a result of potential suicidal thoughts an individual may be having…
- Be responsive
- Take the individual seriously
- Talk calmly to the individual
- Attempt to ascertain if the individual is experiencing suicidal ideations
- Contact EGSC Campus Police in Swainsboro or Statesboro
- Contact Augusta University Police in Augusta
- Other off-site location (i.e. high school campus) – refer to local administrative authority
- Provide as much information as currently available:
  1. name person of concern,
  2. location,
  3. name respondent
- At the point EGSC police arrive on the scene, the Respondent passes care of the individual and incident to the campus police.

**EGSC Police – Will Take the Following Action…**
- They will assess the situation
- Make a determination of the need for additional assistance (911)
- Contact, if necessary, Director Counseling and Disability Services
- Stay with the individual until such time as they leave campus or it is determined additional assistance is not necessary
Communicate incident to the Direct Counseling and Disability Services, if not previously done, and Director Student Conduct
If housing student, contact Director of Housing.

**Housing Staff – In Support of the Incident Will Take the Following Action...**
- If housing student, Director of Housing will contact Emergency Contact provided in the Banner Student Information System and provide them with information concerning the incident. If non-residential student Director Student Conduct should contact Emergency Contact information. (A FERPA is NOT required to release this information)
- If circumstances warrant, Emergency Contact will be requested to travel to campus to assume responsibility for the student.
- If the resident is determined by the EGSC Police not to require additional medical assistance, the Housing staff will perform wellness checks for the upcoming 24 hours at 8 hour intervals.

**Individual in Distress...**
If it is determined the individual needs additional assistance by the EGSC Police, but decline this assistance...
- The individual will be reasoned with
- All possible scenarios will be communicated to individual
- Effort will be made to contact the Director Counseling and Disability Services for assessment concerning forced observation of student (1013)
- Emergency Contact information should be contacted and requested to travel to campus to assume responsibility
- If an individual determined to require additional assistance (911), declines that assistance, and repeated Emergency Contact attempts fail to identify responsible parental figure to assume custody...
- The Director of Student Conduct may place the student on Interim Suspension. See [http://www.ega.edu/policy/04-interim-suspension-policy.pdf](http://www.ega.edu/policy/04-interim-suspension-policy.pdf)

**Individual in Distress is Hospitalized...**
- Clearance of a medical or psychiatric professional will be required prior to return to campus.
- Individual will be required to communicate with the Director of Student Conduct upon request to return to campus.
- Director of Student Conduct will communicate with faculty concerning the absence of the student from campus. Details will not be communicated only the necessity of the forced absence.
- Upon receipt of the request to return to campus and the proper documentation, consideration will be given to the return of the student by the Behavioral Recommendation Team.

**Interventions – Behavioral Recommendation Team (BRT)...**
The purpose of the Behavioral Recommendation Team (BRT) is to provide support and behavioral response to students, faculty and staff displaying varying levels of concerning behaviors indicative of a non-emergency mental health crisis.

**Augusta**

- Effective Fall Semester 2013, The Director of Counseling and Disability Services will be meeting with students in Augusta on the Summerville campus. Counseling services will be a combination of the following: weekly visits, using electronic resources such as Skype or Face Time when needed, and using resources such as the **Georgia Crisis and Access Line** in the event of a student mental health crisis.

- Counseling services will need to be provided in a confidential location. Some ideas may be the Compass computer lab or the AU purchasing office. An accessible location will need to be available in the event that a student can’t access our Payne Hall location.

- EGSC Augusta students may access themselves of services provided through the Augusta University Counseling Services Office located in the Student Counseling and Psychological Services location on the Summerville campus in the Central Utilities Building Annex, 2nd floor (CE -201) during normal operating hours Monday–Friday 8am–5pm.

**Assistive Resources**

EGSC Campus Police 478-289-2090  
EGSC Counseling Office 478-289-2039  
Statesboro – EGSC Campus Police 912-623-2462  
Statesboro - Counseling Office 912-623-2406  
GSU Campus Security 912-478-5234  
Augusta University Police Department 706-721-2911  
Augusta University Counseling Office 706-737-1471  
[**National Suicide Prevention Lifeline**](https://www.suicidepreventionlifeline.org) 800-273-TALK (8255)  
Georgia Crisis and Access Line 800-715-4225