

<https://www.uhs.wisc.edu/suicide-prevention/>

If any self- or other-harm action has been taken by the student, call 911 immediately.

START

Is student at acute risk for suicide?

- Saying they wish they were dead
- Talking about a suicide plan
- Access to lethal means
- Talking about wanting to kill themselves

Refer to back for more information about risk levels.

Note: If you are able to, get a colleague for support at this point.

NO

Encourage student to seek help

Share campus resources

If still concerned:
Consult with UHS about next steps

YES

How was this information shared?

PHONE

EMAIL

IN-PERSON

Between 8:30 am – 5 pm:

- Walk student to UHS Counseling on 7th floor (333 E. Campus Mall)
- If can't walk to UHS, call 911
- Stay with student until help arrives

After hours or if student unwilling to walk to UHS:

- Call 911
- Stay with student until help arrives
- Consult with UHS

Refer to back for notes on what to do while waiting for help.

Forward student's email to DoSO:
dean@studentlife.wisc.edu

Consult with UHS

Respond to email using guidelines on back of this sheet

Ask student:

- Name?
- Phone number?
- Location?
- Alone?
- Self- or other-harm action taken?

If lose contact, call back. If no answer, call 911.

Have a colleague call 911.
Keep student on the phone until help arrives.
Refer to back for notes on what to do while waiting for help.

NOTIFY:

- DoSO
- Supervisor

AFTER crisis is resolved:

- Consult with UHS about next steps for you or your office
- Option to follow up with DoSO to confirm student was connected to resources
- Contact Employee Assistance for additional staff support: 608-263-2987

CONTACT INFORMATION & ACRONYMS

University Health Services (UHS) — Mental Health

- 608-265-5600, option 2: M–F, 8:30 am – 5 pm
- 608-265-5600, option 9: available 24/7

Dean of Students Office (DoSO)

- 608-263-5700, option 2: M–F, 8 am – 4 pm

UW Police Department (UWPD)

- 608-264-2677, available 24/7

What to do while you wait (in person or on phone) with the student for assistance

Questions you can ask:

- How can I best support you right now?
- When you have experienced difficulties in the past, what has helped?

Things you can say:

- You are not alone in this. I'm here for you.
- While I might not understand exactly how you feel, I care about you and I want to help.
- Share information about campus resources.

Listen without judgment:

- Remain patient and accepting. The conversation might seem negative and uncomfortable, but talking is always a positive step.
- **It's not about saying exactly the right words. The important thing to do is show that you care.**

Explain what to expect after 911 is called:

- Except in cases of medical emergency, the police will respond.
- Typically there will be one to two squad cars. The officers will want to have a conversation to understand the situation and the needs of the student.
- The police will transport student to the hospital if needed (not an ambulance).
- Police officers care first and foremost about your safety and are here to support students in these difficult situations. Explain to the student that they are not in trouble.

Guidelines for responding to at-risk student via email

- Sincerely express concern/empathy.
- Direct the student towards appropriate resources.
- **Always include the UHS mental health crisis line, 608-265-5600 (option 9) for 24-hour help.**
- Encourage student to continue reaching out.
- Request that the student respond to your email so you know they received it.
- Be transparent about your actions. Tell student that you want to ensure they receive the most comprehensive services available at UW–Madison, so you have reached out to UHS and DoSO.
- Inform the student that they are not in trouble.

For samples of email responses, visit:

<https://www.uhs.wisc.edu/prevention/suicide-prevention/facstaff-suicide-resources/>

RISK LEVELS

High Risk

(acute – seek help immediately)

- Direct statement about self- or other-harm with immediate thoughts/plan/means/access/intent
- Under the influence of alcohol or drugs that could lead to harm

Moderate Risk

- Direct statement about self- or other-harm without immediate thoughts/plan/means/access/intent
- On-going mental health issues
- Psychosis without threatening statement(s) or behavior(s)

NOTE: In this situation, you must often make a judgment call. For assistance, call UHS.

Mild Risk (non-acute)

- Mental health concerns about self or others *without risk of suicide*
- Situational event concerning self or other contributing to stress



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For more information visit:

<https://www.uhs.wisc.edu/suicide-prevention/>