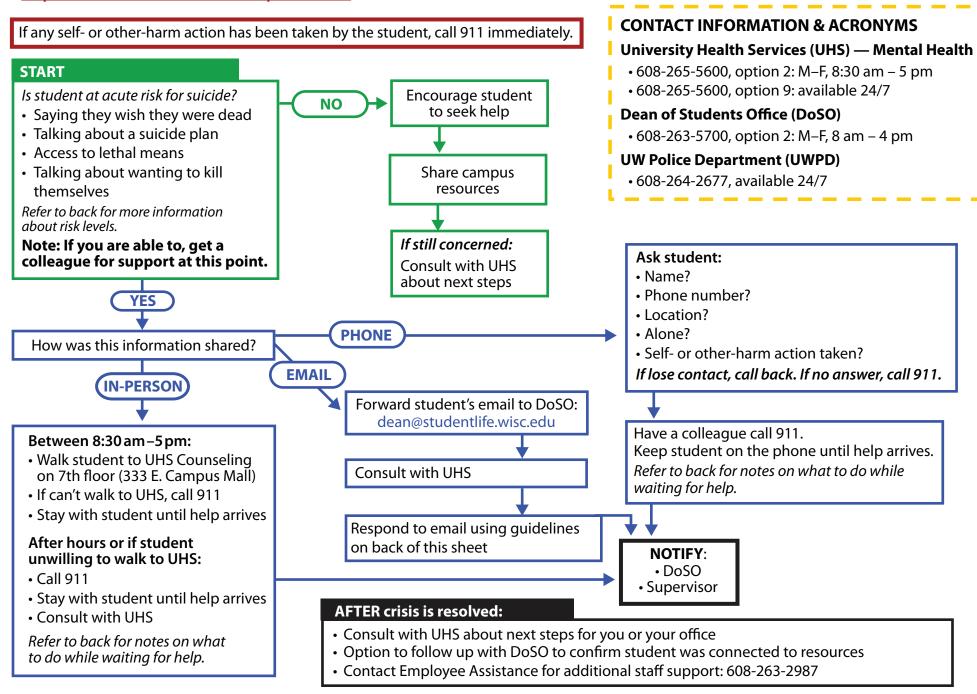
https://www.uhs.wisc.edu/suicide-prevention/



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 selfor 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 selfor 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