the Imperative to Prevent
Topics

National context of student mental health
UTHSC Information
Call to action
Formal assessment of prevention and intervention services
The CARE Team
Resources for students
#TakeCare and Prevention
The way forward
A last word
Demand for campus mental health and wellness services continues to grow

Nationally Counseling Center usage has grown at a rate 5 times greater than enrollment growth between 2009 and 2015

On a positive note:
- Reduced stigma and increased awareness of services and the need for services have increased demand
- Suicide prevention programming more pervasive

Challenges:
- Service expectations have increased
- Social Media creates isolation
- Concerns: student debt, rigor of programs, and employment
- Concerns: political climate, the environment and economic future
The National Context

Most important: It is the right thing to do

Campuses face risks if they do not meet students’ mental health needs

Reputational Risk
- FERPA and HIPAA issues
- Written notification procedure for involuntary leave
- Individually assess whether a student is a significant risk to self or others
- Insure parity between physical and mental health reentry requirements
- Stanford's Involuntary Leave of Absence Policy

Financial Risk

Campus Safety
- Failure to implement fair and appropriate policies and practices can negatively impact campus culture around mental health issues
Who We Are

UTHSC is a Separately-Accredited Academic Health Center

Six Colleges: Dentistry – Graduate Health Sciences – Health Professions – Medicine – Nursing - Pharmacy

<table>
<thead>
<tr>
<th>Total Enrollment</th>
<th>Faculty Numbers</th>
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<tbody>
<tr>
<td>Undergraduate</td>
<td>Regular 1511</td>
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<tr>
<td>Graduate/Professional</td>
<td>Temporary 213</td>
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<tr>
<td>297</td>
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<td>2955</td>
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Student Mental Health Services
Student Academic Support Services and Inclusion
University Health Services
A Call to Acti
Our Behavioral Intervention Team Was Broken

✓ Roles were not clearly defined
✓ Relied on phone tree communication rather than F2F
✓ Leadership was not clearly defined
✓ Lack of common agreement regarding information sharing to protect students
✓ Services were not integrated
First Steps

Campus Training
- General Training for the BIT and Academic/Student Affairs Administrators
- Threat Assessment Training for BOT

Campus Assessment
- SASSI Counseling Services
- University Health Mental Health Services

JED Campus Assessment

Campus Visit
JED Campus Assessment Team met with campus stakeholders
How has your campus integrated mental health services?

What barriers impact integration of services?

What has worked in eliminating barriers to accessing mental health services?

Service Integration
NaBITA
NCHERM
Audit
Findings

• Scheduling and availability of services
• Communication
• Scheduling and wait times
• Information on websites
• Training of front-line staff, counselors, nursing staff
• Consistent protocols across service providers
• Crisis care
• Services for LGBTQ students, students seeking Christian care, and URM
• A need for online scheduling
Shoring up Mental Health Services

Responding to the experts

NaBITA recommended

• Hiring of 2 mental health counselors and a case manager

• Locating new staff in SASSI with:
  • Administrative supervision by Assistant Vice Chancellor of SASSI
  • Clinical supervision by the UHS Counseling Psychologist

An additional counselor was added for residents with funding from GME
Establish broad ownership and a shared commitment
• Develop easier access to Counseling Services website
• Gatekeeper training across campuses
• Coordinate of data analysis among offices
• Create regular, ongoing communication channels on shared cases to facilitate continuity of care
• Establish and maintain a comprehensive list of community mental health resources
The Evolution to CARE TEA
Improving Our Approach

✓ Rebranded the Behavioral Intervention Team as the CARE Team
✓ Added the CARE Navigator to the CARE Team
✓ Based team membership on recommendations from NaBITA
✓ Scheduled weekly meetings of the CARE Team
✓ Developed resource website including a Student of Concern Portal
✓ Implemented training on the purpose of the CARE Team offered to the campus community
✓ Sought NaBITA certification for members of the CARE Team
The University of Rochester graciously granted permission for use of their site as a framework for development of the UTHSC site.
Targeting Wellness and Resilience: The #TakeCare Campaign

#Take Care Events
Warrior Within Faculty and Student Panels
Suicide Prevention Training
Student 1-on-1 Wellness Check-Ins
Thriving Not Just Surviving Week

Join the #takecare movement
Sept. 12, 11:30 am - 1:30 pm
STUDENT-ALUMNI CENTER

FREE FOOD AND PRIZES!
FREE WELLNESS SERVICES!
FREE T-SHIRTS TO FIRST 100 STUDENTS!

Zen Studio | Delta Groove Yoga | Alive Rescue Memphis
Joanna Landrum Center for Energy Medicine | 901 PT
Harbor Town Day Spa | Memphis College of Arts

BROUGHT TO YOU BY SASSI AND STUDENT LIFE
Suicide Prevention

How to Save a Life
Suicide Prevention Events

The Ripple Effect Screening
Friday, September 14th (SAC Auditorium, 11:30AM)
Free popcorn provided by Student Rec

Warrior Within Faculty/Staff Panel
Tuesday, September 18th (GEB A203, 11:30AM-1PM)

Suicide Prevention & Awareness Conference
Thursday, September 20th (Hope Church)

#TAKECARE
This film is presented in partnership with the Tennessee Suicide Prevention Network
Brought to you by
STUDENT ACADEMIC SUPPORT SERVICES AND INCLUSION
Questions? Contact SASSI (901)448-5056
UTHSC # TAKECARE Afterhours Counseling Line (901)649-0-CARE
http://uthsc.edu/take-care
National Suicide Prevention Hotline 1-800-273-TALK
Warrior Within

Faculty and students share their stories of struggle including mental health issues

Goals of these panels are to
• Destigmatize mental health issues
• Normalize self-care

"COURAGE is to tell the story of who you are..." - Brené Brown

ANXIETY
STRESS
URM

Warrior Within Faculty Panel

Join us to hear lived experiences of professionals and leaders in handling the demands of health sciences while pursuing academic success

October 31, 12:00-1:00pm
GEB A103

Brought to you by SASSI & Student Life | (901) 448-5056 | HTTP://UTHSC.EDU/SASSI

Free lunch to the first 50 students!
Preventive Resources and Support

✓ Outreach to Off-Campus Inpatient Treatment Partners
✓ Mental Health Providers at Distance Locations
✓ Online Resources
✓ COP Wellness Curriculum
✓ Revised Substance Abuse/Leave of Absence Policies
✓ Suicide Prevention Events and QPR training
✓ Sexual Assault Prevention Awareness Events
What prevention campaigns have been successful on your campus?

What efforts have been most successful on your campus to destigmatize accessing mental health services?
Evaluating our Efforts

<table>
<thead>
<tr>
<th>Prior to 2018</th>
<th>After 2018</th>
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<tbody>
<tr>
<td><strong>Mental Health Providers</strong></td>
<td><strong>Demand</strong></td>
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</table>
| • 0.5 FTE in SASSI  
• 1.5 FTE in University Health Services  
• Student Assistance Program (SAP) through ENI – a third party vendor | • 2 Part-Time counselors in SASSI with a wait time of 2 weeks  
• The Student Assistance Program via ENI had 528 sessions in 2016 |
| • 3.5 FTE in SASSI  
• 1.0 FTE Case Manager  
• 1.5 FTE in University Health  
• SAP declining usage (248 in 2018; 106 in 2019) | • Student cases are triaged at intake  
• Urgent cases are seen immediately;  
• Other cases referred to educational specialists if academics impacted; Informed of existing support groups while waiting to see a counselor  
• Wait time for less serious cases is two weeks  
• Students began scheduling appointments with the counselors without any advertisement of the added services. |
Evaluating our Impact

<table>
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<th>Year</th>
<th># of Counseling Visits</th>
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<tbody>
<tr>
<td>2017</td>
<td>159</td>
</tr>
<tr>
<td>2018</td>
<td>374</td>
</tr>
<tr>
<td>2019</td>
<td>665</td>
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<table>
<thead>
<tr>
<th>Counseling Issue</th>
<th># of Students within the last 12 months</th>
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<tbody>
<tr>
<td>Suicidal Ideation (with fleeting considerations)</td>
<td>23</td>
</tr>
<tr>
<td>Seriously Considering Suicide</td>
<td>11</td>
</tr>
<tr>
<td>Self-Harming Behaviors</td>
<td>9</td>
</tr>
<tr>
<td>Previous Suicide Attempt</td>
<td>3</td>
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Timeline

2017
- NaBITA Training
- Jed Campus Plan
- Student Experience Survey
- NaBITA Counseling Services Audit
- Proposal for BIT/CARE Team Reboot

2018
- #Take Care Campaign Launch
- Student of Concern Portal
- COP Wellness Curriculum
- Warrior Within Faculty Panel
- Warrior Within Student Panel
- CARE Team Policies and Procedures
- Proposal for BIT/CARE Team Reboot
- Prioritized in the UTHSC Strategic Plan
- Student 1-on-1 Wellness Check-Ins - Ongoing
- Landing Page for Campus & Online Resources
- Outreach to Off-Campus Inpatient Treatment Partners

2019
- Wellness Council
- Suicide Prevention Training
- Revised Substance Abuse Policy
- Implementation of #TakeCare 2.0
- Student Support and Resiliency Groups
- Mental Health Providers at Distance Locations
What’s Next? 2020

• Implement a revised Scope of Services Document
• Educate students on local resources for more intense services
• Provide connections and refer students who need higher level care
• Increase the number of support groups
• Open a wellness center with yoga, meditation and Pilates
• Provide faculty and staff development around communication, sensitivity, suicide prevention, and awareness
• Hire a CARE Intake Manager
The Way Forward
Campus-Wide Approaches are Necessary

• Training across campus for faculty and staff focusing on front line staff (facilities, front office staff, faculty, student leaders)
• Create a “No Wrong Door” adage to service
• Penn integrated all health and wellness programs into one unit
• Communication Model
  Self-Awareness
  Evaluation and Direction
  Empathy/Listening Skills
  Multi-generational Approaches
Creating a Sustainable Model

- Growing staff is not a sustainable model
- Focusing on a campus-wide approach
- Connecting with high schools to support and assist students in transitions/adjustment
- Creating a clear scope of practice – triage
- Creating and maintaining community connections
- Planning for needs of future students with creative delivery models
How do we respond to the growing need for counseling on our campuses?

What innovative approaches have you implemented or plan to implement?

How do we address higher level care for students when needed?

Demand and Capacity
A Last Word
Caring for the Caregivers

- “Weekly, paid one-hour supervision” for counselors
- Oversee “the number and type of cases assigned to any one counselor”
- “Open-door policies during sessions so that counselors can reach out for guidance”
- Develop the culture where reaching out for help is viewed as a strength
- “Create a culture of camaraderie and free exchange of ideas”
- “Pay for clinicians’ continuing education
- Establish flexible family, personal, and sick leave

Kafka, 9-18-19, CHE
What strategies have you implemented or plan to implement to ensure counselors and front-line staff are being supported?
References


Glass, G. (May 29, 2019). Colleges should focus more on community and connections to address student mental health issues (opinion). Inside Higher Ed.


Kafka, A.C. (October 10, 2019). Stanford’s new policy for student mental-health crises is hailed as a model. The Chronicle of Higher Education.


Snyder, S. (November 12, 2019). Penn moves mental health and wellness programs under the direction of the provost. The Philadelphia Inquirer.


For More Information

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