Assisting Students in Distress: An Open Discussion

A Student Health & Counseling Services (SHCS) Training for UCSF Faculty and Staff

March 29, 2016 (Parnassus)
March 30, 2016 (Mission Bay)
Today’s Objectives:

- Learn about SHCS services
- Help you identify and refer students in distress
- Ask questions and engage in discussion with SHCS staff
Learn more about Student Health & Counseling Services...

studenthealth.ucsf.edu
SHCS Scope of Services:

- Comprehensive Primary Care
- Counseling and Crisis Intervention Services
- Psychiatric Services
- Nutrition Services
- Referral
- Consultation to Students, Faculty, & Staff
- Wellness and Outreach Programming
- Student Health Insurance Plan (SHIP) Support
We have **two locations**

[studenthealth.ucsf.edu/location-directions-hours](studenthealth.ucsf.edu/location-directions-hours)

Parnassus Clinic  
Millberry Union West  
Level P8, Room 005

Mission Bay Clinic  
William J. Rutter Center  
3rd Floor, Rm 330
We are the “C” in SHCS...
Administration/Leadership:

- Susan Rosen, M.D., Executive Director
- Jeff Prince, Ph.D., Mental Health Director
- Adele Anfinson, MHA, Director

Counselors:

- Lance Raynor, DMH
- Felicia De La Garza Mercer, PhD
- John Tighe, LCSW
- Lindsey Brooks, PhD

Psychiatrists:

- Julio Ozoares, MD
- Adam Frey, MD
Counseling Services include…

- Brief Counseling and Psychotherapy for Individuals and Couples *(Regardless of Insurance)*
- After Hours Call Line, 24/7, Crisis Counseling
- Groups
  - Stress/Anxiety Management
  - Courageous Caregiver/Vicarious Trauma
Psychiatric Services include…

- Psychiatric Evaluation and Management
- Medication Management and Counseling

Primary Care Services include…

- Medication Evaluation & Management
- Medical Consultation with Mental Health Team
Wellness & Outreach Services

- SHCS Workshops and Lectures:
  - Stress Management
  - Academic Success
  - Relationships
  - Surviving Qualifying Exams
  - Travel
  - Mindfulness
  - Nutrition
  - Alcohol and Drug Use

- Outreach to underrepresented student populations
- Collaborations with other student services
- Mental Health Awareness Campaign - “#It’sOkayTo…”
Consultation

Liaison Relationships

- Lance Raynor, DMH, Liaison to Graduate Division
- Felicia De La Garza Mercer, Ph.D., Liaison to School of Pharmacy
- John Tighe, LCSW, Liaison to School of Nursing
- Lindsey Brooks, PhD, Liaison to School of Dentistry
- Entire team consults with Medical Student Well-Being Program in School of Medicine, and with other schools and programs

Staff/Faculty Consultation Regarding Distressed Students
Your Role In Assisting Students

- You are on the ‘front line’.

- You may be the first person to become aware that a student is in distress. Or, you may be the first person they are contacting to reach out.

- You are not expected to provide counseling, but it is helpful to understand what your role is, what you can do, and what resources are available.
INDICATORS OF DISTRESS:

**Academic Indicators:**
Decreased Productivity/Functioning

**Diminished Self-care/Physical Indicators**

**Psychological Indicators**

**Poor Personal Interactions/Amplified Emotions**

*Look for clusters, frequency, duration, and severity— not just isolated symptoms*
3 Simple Steps to Helping a Student:

1. **SEE SOMETHING:** Notice students who may be in trouble

2. **SAY SOMETHING:** Show interest, *ASK* how they are doing, take time to *LISTEN*

3. **DO SOMETHING:** Connect Students to SHCS

**Note:** Consider Calling SHCS for Consultation
Promoting Student Mental Health

A GUIDE FOR UC FACULTY AND STAFF
# Assisting Students in Distress: An Open Discussion

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*Campus Insert: Education, Training & Resources
  Teaching Resources
  Mental Health Training Opportunities
  Resources
  Gold Folder
Questions & Discussion

• How Can WE Help You?
• Difficult situations you have encountered?
• What common problems you see?
How does a student get connected?: Several options

- Calls SHCS at 415-476-1281, speak with nursing staff to make appointment.
- Referred from Primary Care.
- Meets with a counselor during an urgent care hour.
  ✓ For students who are in crisis and/or require urgent support and assessment.
- Attends SHCS outreach event and seeks additional services
- Student is referred to SHCS as part of discharge plan after psychiatric hospitalization.
What happens during an initial consultation?

- It’s a starting point for any concern.
- 45-minute clinical interview and assessment.
- Based on student’s presenting concerns, the provider recommends and facilitates next steps for support, which may include:
  - Proceeding w/ brief counseling at SHCS
  - Referrals to community providers, who accept student’s insurance, for longer term psychotherapy
  - Referral for psychiatric medication evaluation at SHCS or in community, depending on availability
  - Combination of interim brief counseling for stabilization, with plan for referral within 9 sessions
How do I bring up counseling?

Bringing up counseling can feel awkward or intrusive. Here are some ways to bring it up:

- “Counseling is completely confidential”
- “Counseling is simply a resource where a trained professional can help support you and give you some tools and options”
- “There is no charge for counseling”
- “They can work with your schedule”
- “There is no commitment”
What happens when a student is referred?

- Given short list of providers in community who accept their health insurance.
- If they have SHIP, provider provides authorization.
- Student is responsible to follow up with the referrals, and to let their referring provider know if referrals work out.
- In situations where a student’s presenting concerns impair their functioning, providers will play a more active role.
- Referral for counseling and psychiatry involves numerous challenges for students (next slide).
Strengths & Limitations of SHCS Services:

**Strengths:**
- Expertise in working with graduate and professional students
- Multicultural competence
- “Free”
- Convenient
- Flexible

**Limitations:**
- Short-term counseling can be clinically contraindicated
- Due to demand, weekly appointments may not be possible
Steps we have taken to enhance access and referral

- Eliminated waitlist
- Each provider has multiple slots available for initial consultations each week.
- During peak times, providers add additional initial consultation openings.
- Offer an urgent/crisis hour each day.
- Developed a referral database of Anthem therapists and psychiatrists in SF, and the East Bay, as well as a list of lower cost agencies
  - Providers in database surveyed regularly to assess for openings
- Expanded our wellness and outreach programming
Assisting students: Resources and how to help
Assisting Students in Distress

see something? say something. do something!

> academic indicators
- Sudden decline in quality of work and grades
- Repeated absences
- Bizarre content in writings or presentations
- Student seeking more personal rather than academic counseling during office hours

> physical indicators
- Marked changes in physical appearance including deterioration in grooming, hygiene, or weight loss/gain
- Excessive fatigue/sleep disturbance
- Intoxication, hung over, or smelling of alcohol
- Disoriented or "out of it"

> psychological indicators
- Self-disclosure of personal distress; family problems, financial difficulties, contemplating suicide, grief
- Excessive tearfulness
- panic reactions, irritability, or unusual apathy
- Verbal abuse
- Expressions of concern about the student by his/her peers

> safety risk indicators
- Unprovoked anger or hostility
- Implying or making a direct threat to harm self or others
- Communicating threats via email, correspondence
- texting, or phone calls
- Academic assignments dominated by themes of extreme hopelessness, rage, worthlessness... a "cry for help"

As faculty or staff, you may be the first person to SEE something distressing in a student.
Graduate and professional students may feel alone, isolated, and even hopeless when faced with academic and life challenges. These feelings can disrupt academic performance and may lead to dysfunctional behaviors.

Trusting your instincts and SAY something if a student leaves you feeling worried, alarmed, or threatened.

Sometimes students cannot or will not turn to family and friends. DOing something, like expressing concern and/or informing a student of services available to them, may be a critical factor in getting them to seek help.

The Family Education Right and Privacy Act (FERPA) permits communication about a student of concern in connection with a health and safety issue.

With support from:
see something? say something. do something!

Is this student a danger to themselves or others or for any reason does this student need immediate assistance?

- YES. This student’s conduct is clearly and immediately reckless, disorderly, dangerous, or threatening including self-harm behavior.

- I’M NOT SURE. The student shows signs of distress but I’m unsure how serious it is. My interaction has left me feeling uneasy or concerned about this student.

- NO. I’m not concerned for the student’s immediate safety, but the student is having significant academic and/or personal issues and could use some support.

Call UC Police Department (UCPD) 9-911 (from campus phone) 415-476-6911 (from mobile)

After speaking with police, consult with UCSF Threat Management Team: 415-502-8057

During Business Hours:
- Call Student Health & Counseling Services (SHCS) for consultation: 415-476-1281, option #2

After Hours & Holidays:
- 415-476-1281, option #7

Refer student to an appropriate campus resource. (see table, right)

Call Student Life Success Liaison for general consultation about other available support: 415-502-3302

UCSF Campus Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>UC Police Emergency (from campus phone)</td>
<td>9-911</td>
</tr>
<tr>
<td>UC Police Emergency (from mobile)</td>
<td>(415) 476-6911</td>
</tr>
<tr>
<td>UC Police Non-emergency</td>
<td>(415) 476-1414</td>
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<tr>
<td>Student Health &amp; Counseling Services (SHCS)</td>
<td>(415) 476-1281</td>
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<tr>
<td>SHCS Mental Health After Hours Crisis Line</td>
<td>(415) 476-1281x7</td>
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<tr>
<td>Medical Student Well-Being Program</td>
<td>(415) 476-0468</td>
</tr>
<tr>
<td>Student Disability Services</td>
<td>(415) 502-2768</td>
</tr>
<tr>
<td>Office of Career &amp; Professional Development</td>
<td>(415) 476-4986</td>
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<tr>
<td>Student Financial Aid</td>
<td>(415) 476-4181</td>
</tr>
<tr>
<td>Affirmative Action, Equal Opportunity</td>
<td>(415) 476-7700</td>
</tr>
<tr>
<td>International Students &amp; Scholars Office</td>
<td>(415) 476-1773</td>
</tr>
<tr>
<td>Lesbian, Gay, Bisexual &amp; Transgender Resource Center</td>
<td>(415) 476-7700</td>
</tr>
<tr>
<td>Office of the Ombuds</td>
<td>(415) 502-9600</td>
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<tr>
<td>Learning Resource Services</td>
<td>(415) 502-0319</td>
</tr>
<tr>
<td>Multicultural Resource Center</td>
<td>(415) 502-1911</td>
</tr>
<tr>
<td>CARE Advocate (Sexual Assault/Domestic Violence)</td>
<td>(415) 502-8802</td>
</tr>
<tr>
<td>Office for the Prevention of Harassment and Discrimination</td>
<td>(415) 502-3400</td>
</tr>
<tr>
<td>Faculty &amp; Staff Assistance Program</td>
<td>(415) 476-8279</td>
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Assisting Students in Distress

updated: 3/23/2016
CAMPUS POLICE

Campus Police has the capacity to take a student for an evaluation to an in-patient psychiatric hospital and hold that person against his/her will (5150) if the individual presents as:

1. A danger to self
2. A danger to others, or
3. Gravely disabled

Call: 9-911 (campus) or 415-476-6911 (mobile)
Threat Management Team

TMT is a cross organizational team established to ensure the safety of faculty, staff, and students, by reducing and containing to the extent possible, intimidating or threatening workplace behaviors. TMT members provide consultation and education on violence risk assessment, threat management, Zero Tolerance, and Violence in the Workplace training.

Comprised of:

- UCSF Police Department
- Faculty and Staff Assistance Program
- Medical Center/ Campus Labor and Employee Relations
- Medical Center/Campus Risk Management
- Office of Legal Counsel
- Medical Center Security Services
Confidentiality

**SHCS**
- Cannot disclose protected health information to University officials.
- Generally not able to share information with you unless there is written permission.

**You (Faculty & Staff)**
- Family Educational Rights and Privacy Act (FERPA) permits communication about a student in connection with a health or safety concern.
How do we create a stronger campus safety net?

- **A Caring Community**: Train all campus community members in basic assessment and referral skills

- **A Collaborative Community**: Increase collaborations between faculty and mental health staff in developing healthy academic policies

- **Accessible Services**: Increase access points to mental health services, particularly for underrepresented student communities

- **A Focus on Prevention & Early Intervention**: Address mental health concerns before they reach crisis level
### SHCS or the Faculty Staff Assistance Program (FSAP)?

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<thead>
<tr>
<th>Activity</th>
<th>SHCS</th>
<th>FSAP</th>
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<tbody>
<tr>
<td>Inform a medical or mental health professional about a <strong>student</strong> of concern.</td>
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<tr>
<td>Refer a <strong>student</strong> for counseling.</td>
<td>☑</td>
<td></td>
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<tr>
<td>Consultation about a <strong>student</strong> issue.</td>
<td>☑</td>
<td>☑</td>
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<tr>
<td>Initiate/inquire about counseling for yourself or a colleague.</td>
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<td>☑</td>
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<tr>
<td>Concern about a post-doc</td>
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<td>☑</td>
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<tr>
<td>Consultation about how to handle an organizational issue.</td>
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All Available Local Providers

On Anthem Panel (SHIP)

Has requisite expertise

Accessible location

Openings in practice

Can work with student’s schedule

Student follows up, is willing/able to afford cost, and the clinician meets their expectations

In-network: $15 co-pay
Out of network: reimbursed at 70%, must pay out of pocket up front.