



# Creating a Safety Net with On and Off Campus Partners

February 11, 2019, 2:00-3:30pm ET

- ✓ Welcome! We will begin shortly.
- ✓ Type in the chat: **your name, your campus, and the names of anyone else on the phone line with you.**
- ✓ Please type in **one thing you hope to learn during today's webinar.**
- ✓ Please do not put us on hold as you wait, as the hold music may play for everyone.

# Technical Tips

- Please type any questions or comments into the chat text box.
- Please mute your computer speaker and mute your phone if you are not talking to eliminate background noise.
- Click  on the upper right to make the presentation larger. Click  again to return to normal view.
- Please do not put us on hold as background music will play for everyone.

# Creating a Safety Net with On and Off Campus Partners

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February 11, 2019  
Suicide Prevention Resource Center



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**The Suicide Prevention Resource Center at EDC** is supported by a grant from the U.S. Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), under Grant No. 5U79SM062297.

The views, opinions, and content expressed in this product do not necessarily reflect the views, opinions, or policies of CMHS, SAMHSA, or HHS.

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# Meeting Agenda

- ✓ SPRC's Effective Suicide Prevention Model model
- ✓ Presentation: St. John's University
- ✓ Presentation: Feather River College
- ✓ Presentation: University of Michigan
- ✓ Resources



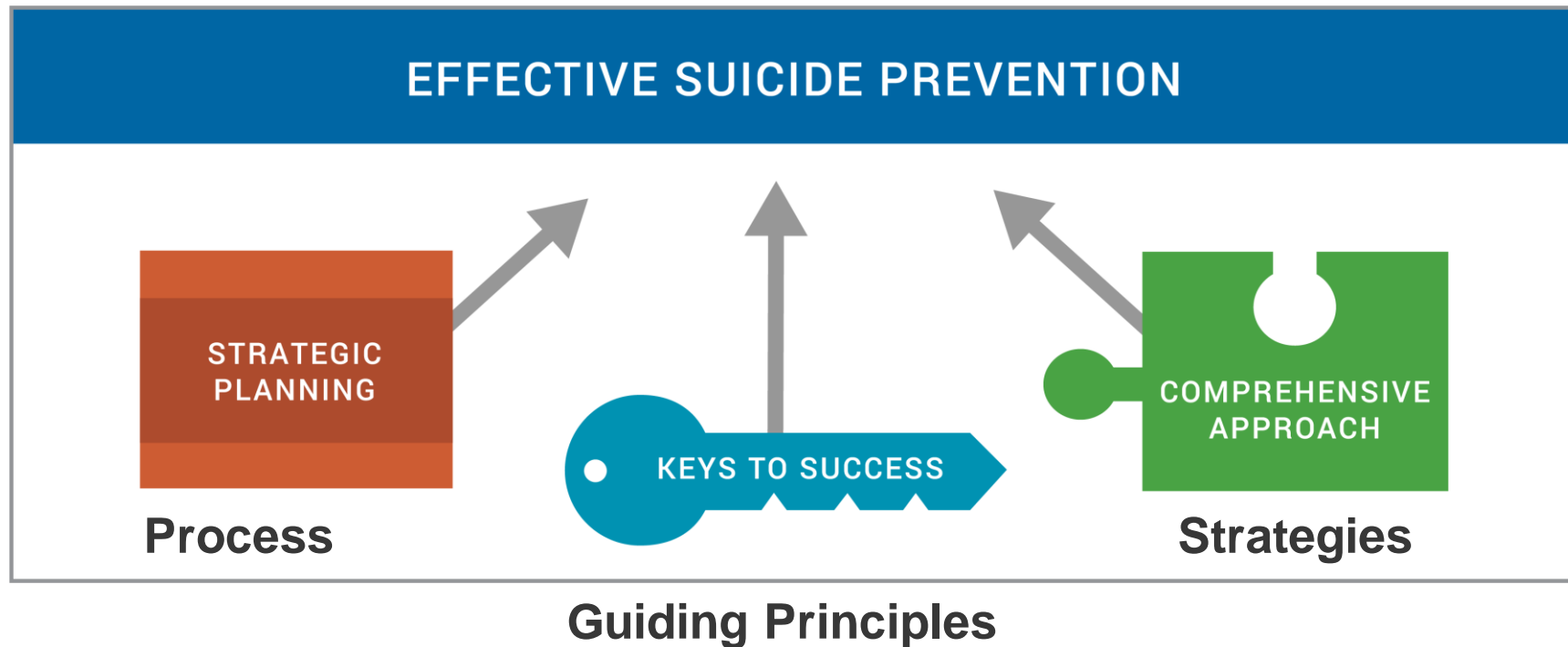
# Effective Suicide Prevention



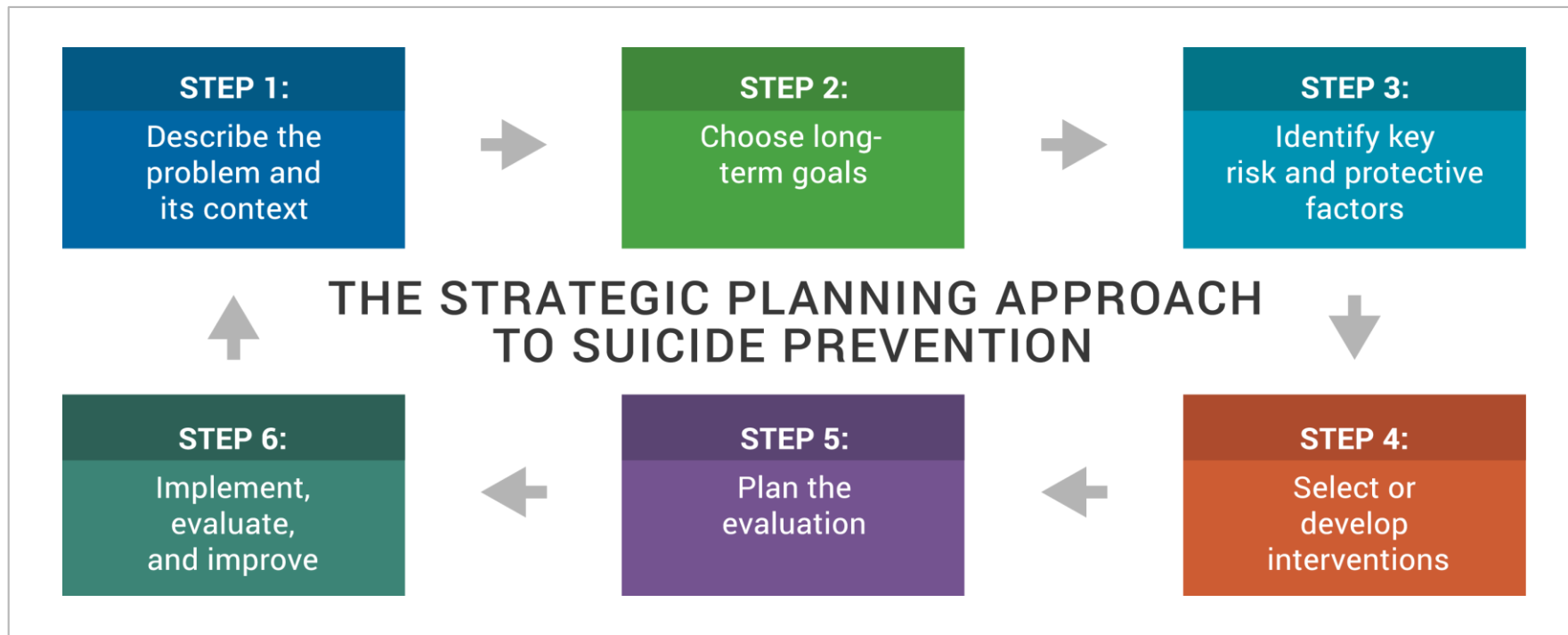
<http://www.sprc.org/micro-learning/effective-suicide-prevention>



# Effective Prevention



# Effective Prevention: Strategic Planning



# Effective Prevention: Keys to Success



# Effective Prevention: Comprehensive Approach



Luis Manzo, Ph.D.  
Executive Director of Student  
Wellness and Assessment  
St. John's University





ST. JOHN'S  
UNIVERSITY

## Care Transitions: Creating a Safety Net with On and Off Campus

Luis G. Manzo, Ph.D.

St. John's University

Executive Director of Student Wellness and Assessment

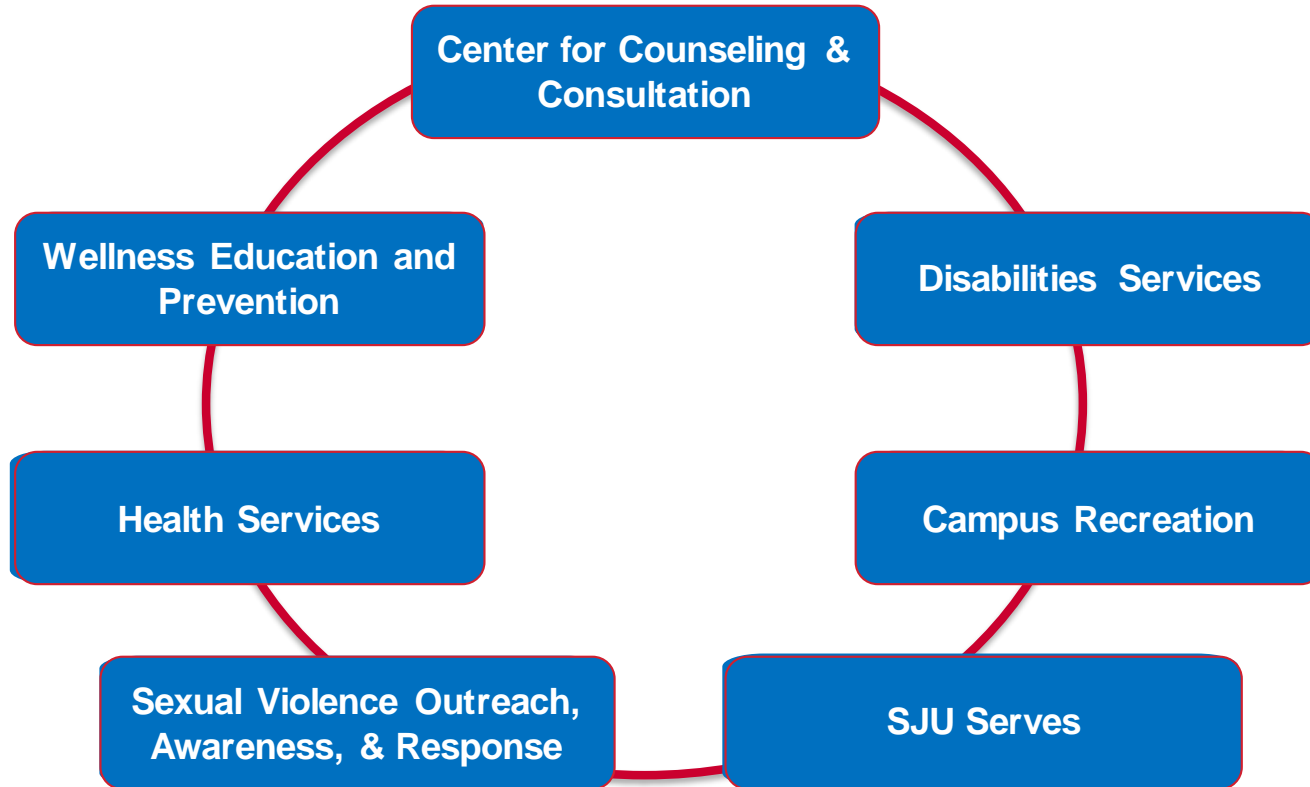
*The views, opinions, and content expressed in this publication do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS)*



- Private, Catholic university
- +20,000 Students
- Highly Diverse Student population
- 43% Pell-eligible/Very High Need
- 72% from NYC metropolitan area
- 3400 live in residence
- Six Campuses



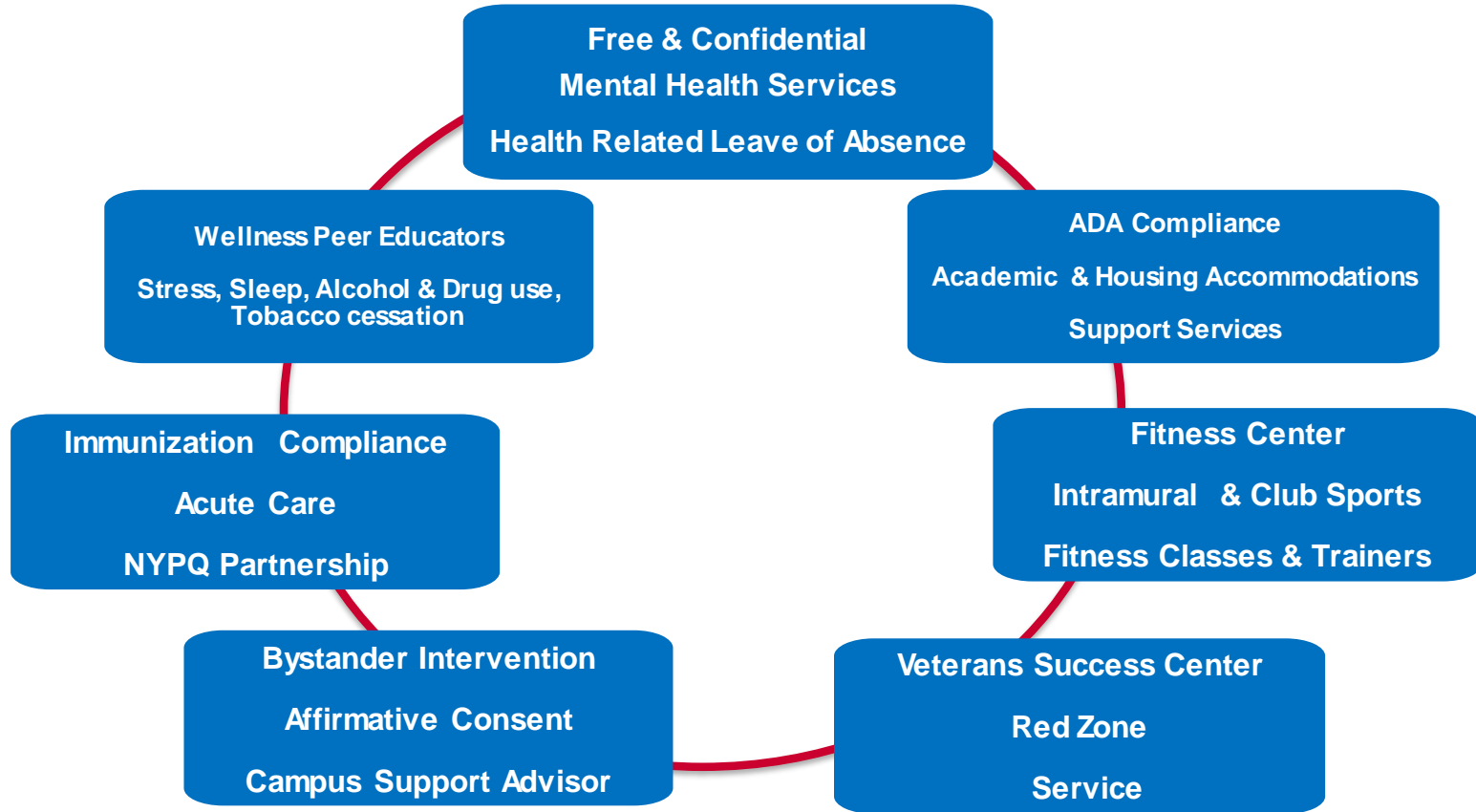
# Student Wellness





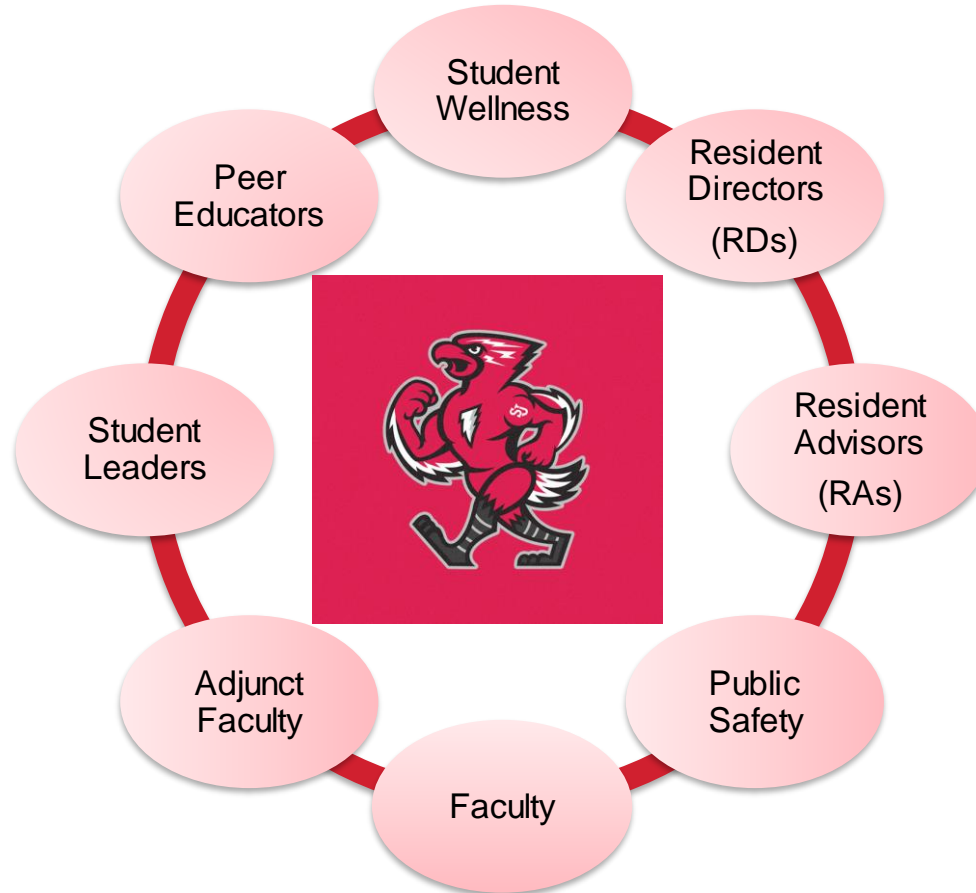


# Student Wellness





# Gatekeepers





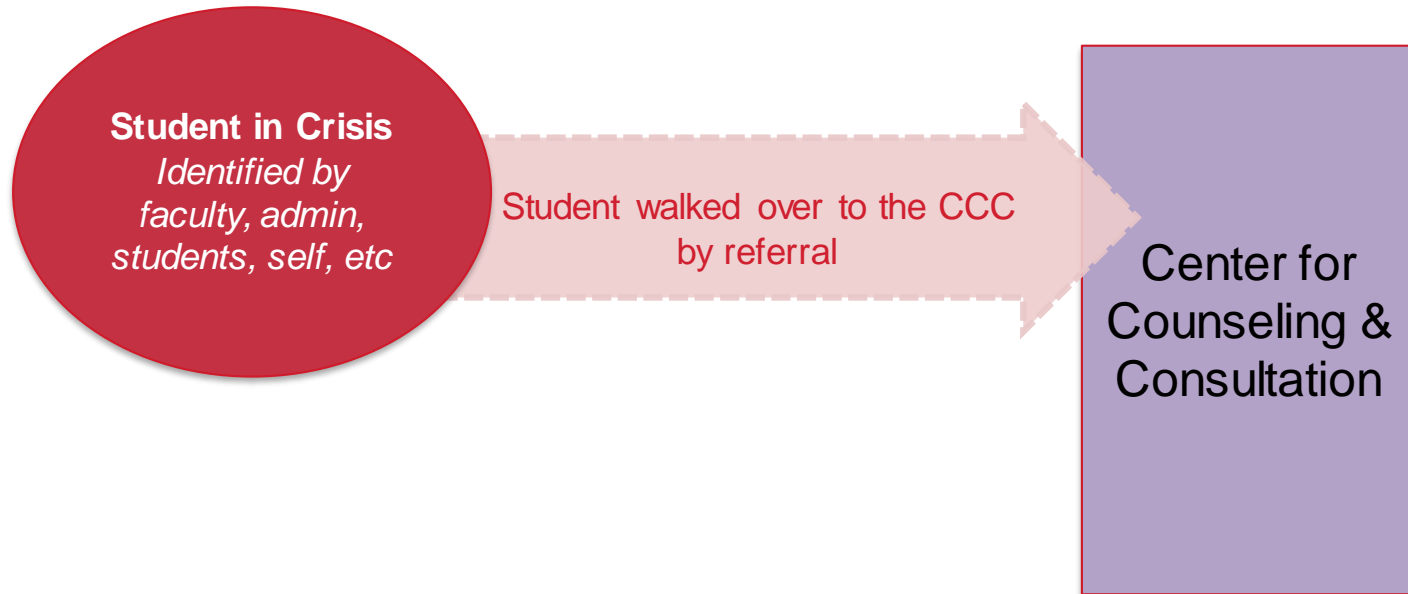
Veterans Integration to Academic Leadership

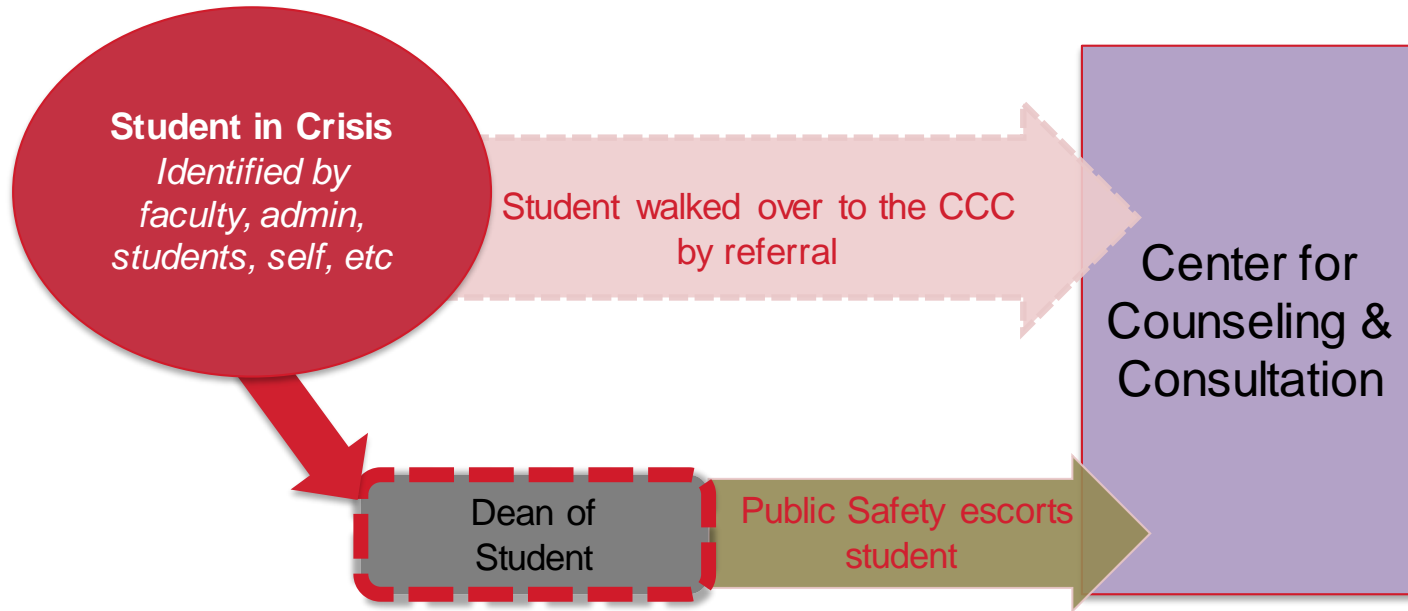


Community Providers Networking Meetings



Behavioral Health College Partnership







**Student  
calls  
helpline**

Connected to an  
on-call licensed mental  
health counselor

We are here for you.



**Mental Health Helpline**

**718-990-6352**

Available after 4:30 pm,  
weekends, and when the  
University is closed

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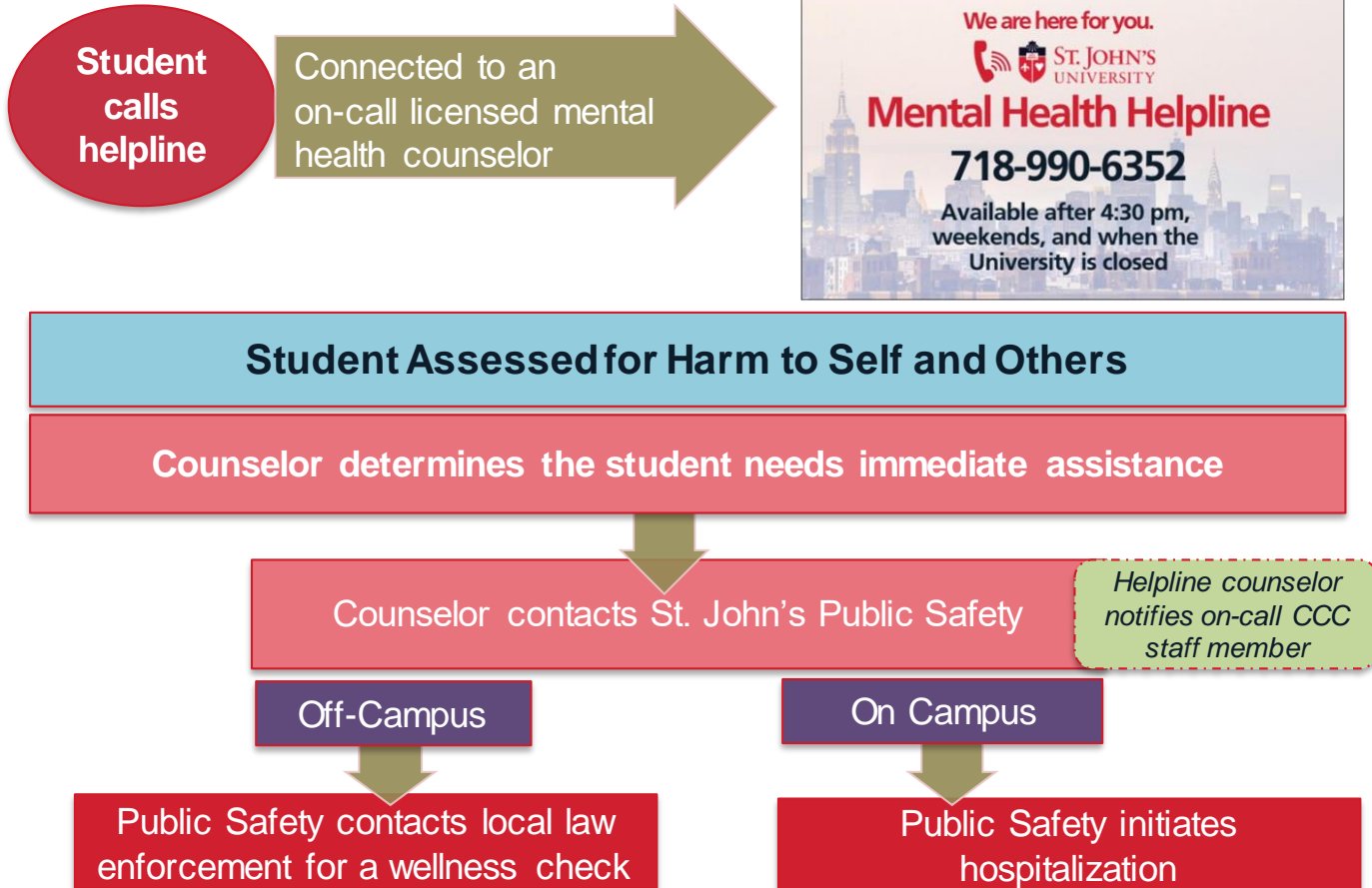
## Student Assessed for Harm to Self and Others

### Non-Crisis Situations

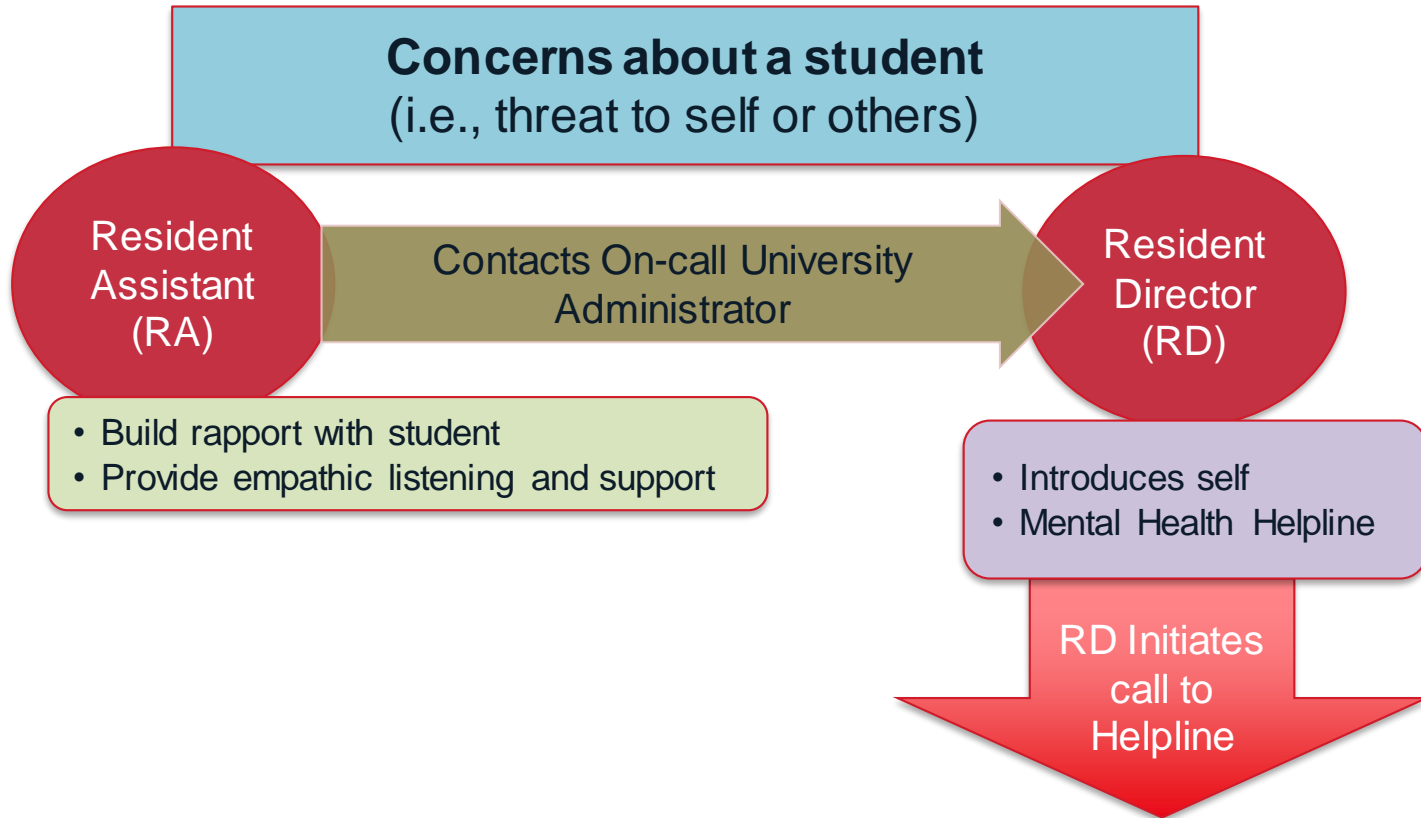
- Provide support & empathetic listening
- Review self-care interventions to help cope with the situation.

Clinical Report is filed with the Counseling Center

Counseling Center contacts each student  
who called the Mental Health Helpline







**Concerns about a student**  
(i.e., threat to self or others)

**RD calls  
helpline**

Connected to an on-call licensed  
mental health counselor

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weekends, and when the  
University is closed

- 1. RD identify themselves and their role at St. John's to Helpline Counselor**
- 2. RD provides the Helpline counselor with the following information:**
  - Why they are calling the After Hours Mental Health Helpline.
  - Why they believe the student may be a risk for suicide, harm to others, and/or self-injurious behaviors.
- 3. Request that the After Hours Mental Health Helpline counselor speak with you following their conversation to communicate disposition**

- Phone is handed to the student so they can speak directly with the After Hours Mental Health Helpline counselor



Counselor determines the student needs immediate assistance

*Helpline Counselor shares disposition to RD*

Counselor contacts St. John's Public Safety

*Helpline counselor  
notifies on-call CCC  
staff member*

Off-Campus

On Campus

Public Safety contacts local law  
enforcement for a wellness check

Public Safety initiates  
hospitalization

Public Safety arranges  
transportation to Hospital ER



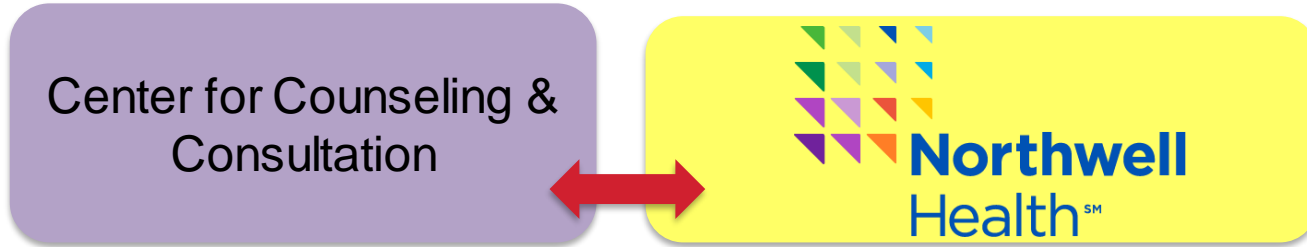
Behavioral Health  
College Partnership



- RD contacts student's emergency contact
- When a student is transported to the hospital Public Safety enters a "campus restriction" in the incident University's tracking system.
- Students returning from the hospital are restricted campus & University buildings until they have met with CCC staff member.
- Students returning to campus are asked to first go to Public Safety, and are escorted to the CCC



- Discreet and sensitive ambulance transport with psychiatric and college expertise
- Psychiatric emergency assessment of college students at Emergency Department that emphasizes efficiency and family and school input
- Specialized groups focusing on college student related concerns
- State-of-art Young Adult Inpatient Unit for young adults, specializing the college population
- Post-hospitalization outpatient services for college students with BHCP outpatient program introduction and verbal handoffs between providers to prevent relapse



## On-going contact with NorthWell Health to:

- Exchange information *(if appropriate releases are received)*
- Facilitate aftercare
- Coordinate return to campus or Health Related Leave
- Schedule *Hospital Discharge Review Appointment* at St. John's CCC



## *Hospital Discharge Review Appointment*

- Ensure that the student is no longer an imminent danger to self or others.
  - To assess the student's current level of functioning and readiness to return to the University.
  - To confirm that a treatment plan is in place.
  - After conducting this appointment, the staff member will notify the Dean of Students and Office of Judicial Affairs staff that the student has been cleared to return.
- ✓ *The student are asked to sign a "mandated assessment" consent form, so Public Safety and the Dean of Students can be notified that the student has attended a Hospital Discharge Review appointment*



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Executive Director, Student Wellness and Assessment

[manzol@stjohns.edu](mailto:manzol@stjohns.edu)

718-990-6911



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# SJUOK?



# Q&A



Dana Nowling  
Community Training Manager  
Plumas Rural Services





# FEATHER RIVER COLLEGE QUINCY, CA





# FEATHER RIVER COLLEGE QUINCY, CA

- 2 year community college sitting on more than 400 acres
- 2700 enrolled (many part-time) – equivalent to 1700 full-time
- Plumas County – Rural – Less than 20,000 residents
- Wellness Center on Campus – One full-time therapist



# Partnerships – how we work together

## Northern Sierra Opioid Safety Coalition

regional five-county coalition to reduce opiate overdose death through access to Naloxone, safe prescribing, and medication-assisted treatment

## Suicide Prevention Group

a local collaboration of public and private agencies and concerned community members focused on reducing the amount of suicides in Plumas County.

## Veterans Collaborative

serving the public through local governments and non-profits helping provide better outreach and connections to services available for our vets.



A coalition of active community members, organizations, businesses, and government agencies that collaborate to improve the quality of life in Plumas County through active work groups focused on addressing community needs.

## Intervention Guidelines & Resources

Immediate Threat: CALL 911 or  
Campus Security (Nick Boyd): 530.394.7503

Is this an Academic, Behavioral, or Wellbeing Intervention?

### ACADEMIC

- Poor or low grades
- Sub par basic skills
- Attendance
- Missing work
- Takes more time than others to complete work
- Writes disjointed and fragmented essays as though cannot maintain logical sequence

Academic Intervention Referral Form  
530-283-0202, X316

### BEHAVIORIAL

- Disruptive
- Abusive actions
- Failure to comply
- Academic dishonesty
- Misuse of college property
- Under the influence
- Trespassing
- Violation of service animal policy
- Criminal behavior
- Violation of weapons policy

Student Incident Report Form  
530-283-0202, X273

### WELLBEING

- Displays withdrawn/ isolated behavior
- Unprovoked anger or hostility
- Implying or making threats or harm to others
- Academic assignments dominated by themes of hopelessness, rage, isolation, despair, or violence.
- Self-disclosure of distress
- Substance abuse

Call Wellness Center  
530.283.9406

After Office Hours  
530.283.6307

Plumas County Behavioral Health line is staffed 24/7 by a mental health specialist



Feather River College



### On Campus Resources

CAMPUS SECURITY	530.394.7503
Chief Student Services Officer	X273
Chief Instructional Officer	X321
Campus Mental Health & Wellness Center	530.283.9406 or X234
Director of Athletics	X295
Director of Human Resources	X280
Director of Disability Support Program for Students	X318
Student Housing Manager	X414
Student Services Admin. Assistant	X317
Instructional Services Admin. Assistant	X242

### Community Resources

Plumas County Sheriff's Office	530.283.6375
National Suicide Prevention Lifeline	800.273.8255
Plumas County Behavioral Health	530.283.6307
Plumas District Hospital	530.283.2121
Plumas Sierra Crisis Line	530.283.4333
Plumas Crisis Intervention & Resources	530.283.3564

July 2018

### Contacts for Student Behavioral Concerns (numbers suggest who to call first)

	Student Intervention Form (On-line) Michelle Petroelje X 316	Campus Wellness Dr. Kelsie Foster X 234	CSSO Carlie McCarthy X 273 Connie X 317	Instruction Derek Lerch X 321 Virginia X 242	Campus Security Nick Boyd 530. 394. 7503	Sherriff 911	HR David Burris X 280	Director DSPS Marci Lang X 318
Takes more time than others to complete exams or has difficulty staying focused	1							2
Writes disjointed & fragmented essays as though s/he cannot maintain a logical sequence	1							2
Seems to work harder than most students but can't pass exams.	1							2
Displays marked change in academic performance, including grades and attendance	1							2
Is caught cheating or plagiarizing			1	2				
Displays withdrawn/isolated behavior or a high level of anxiety and stress		1	2					



# Feather River College Referral



Please complete and fax this form so that we can expedite scheduling of your patients. Please contact our office with any questions or concerns. Thank you for your referral. Use this form in place of a fax cover sheet.

Attention: New Patient Referrals	From: _____	
Date: _____	Number of Pages: _____	
Referring Physician: _____		
Primary Care Physician: _____ <i>(If different from referring physician)</i>		
Phone: _____	Fax: _____	
Mailing Address: _____		
<i>Street</i>	<i>City, State</i>	<i>Zip</i>

## PATIENT INFORMATION

Name: _____	DOB: _____		
<i>First</i>	<i>Middle</i>	<i>Last</i>	
Physical Address: _____			
<i>Street</i>	<i>City, State</i>	<i>Zip</i>	
Mailing Address: _____			
<i>Street</i>	<i>City, State</i>	<i>Zip</i>	
Phone: _____	Email: _____		
Parent/Guardian: _____ <i>(If patient is a minor or dependent on insurance)</i>			
Parent Home Phone: _____		Cell Phone: _____	
Primary Insurance: _____		ID#: _____	
Secondary Insurance: _____		ID#: _____	
Has patient submitted a <i>Confidential Communications Request</i> to his/her insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## REASON FOR CONSULTATION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## FOR HOSPITAL USE ONLY

Does patient's insurance have a mental health carve-out? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If so: _____		
Insurance Company Name: _____		
Mailing Address: _____		
<i>Street</i>	<i>City, State</i>	<i>Zip</i>
Insurance Company Phone: _____		
Separate phone for Auths? <input type="checkbox"/> Yes <input type="checkbox"/> No If so: _____		

# Engaging Local Agencies and Non-Profits



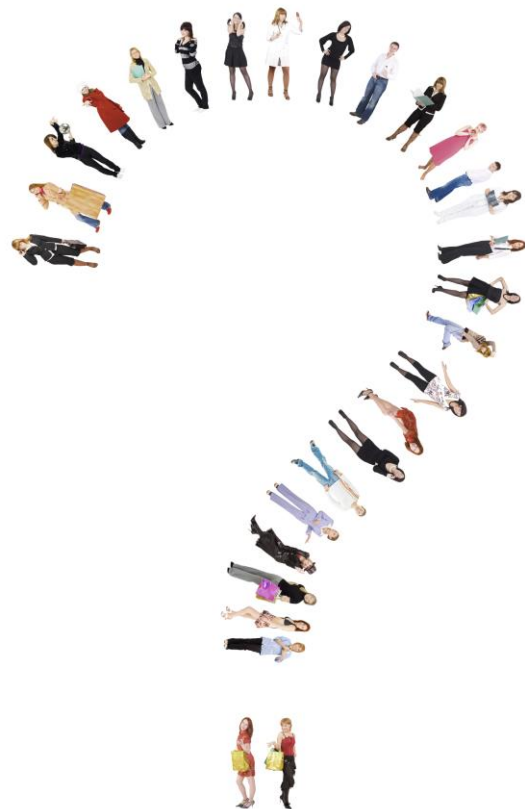
- Identify common goals
- Could what they offer tie into your objectives?
- What outreach & education activities are they involved in that relate to your topics?
- Do they have experienced facilitators/trainers?

**Thank you!**



Dana Nowling – Community Training Manager  
[dnowling@plumasruralservices.org](mailto:dnowling@plumasruralservices.org)  
530-927-5833

# Q&A





Amanda Byrnes, LMSW  
Coordinator of Case Management  
University of Michigan



Diana Parrish, LMSW  
Care Manager  
University of Michigan

# Care Transitions: Creating a Safety Net with On and Off Campus Partners

Amanda Byrnes, LMSW, Diana Parrish, LMSW

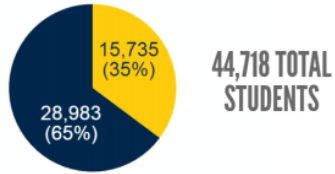


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## ANN ARBOR CAMPUS SNAPSHOT - FALL 2016

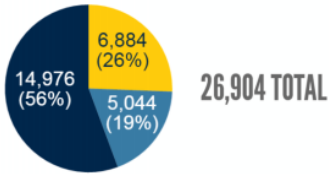
\*Unless otherwise noted, Snapshot data is from U-M data warehouses

### Students



■ UNDERGRADUATE  
■ GRADUATE / PROFESSIONAL

### Faculty & Staff



■ STAFF  
■ SUPPLEMENTAL STAFF  
■ FACULTY

### Domestic Students - Race/Ethnicity

**12.3%**  
Underrepresented  
Minority



■ Native American (0.17%) ■ Asian (14.60%) ■ Black (4.66%)  
■ Hispanic (5.55%) ■ Hawaiian (0.04%) ■ Unknown (5.42%)  
■ Two or More URM (1.84%) ■ Two or More non-URM (2.24%)  
■ White (65.49%)

**30% INTERNATIONAL**

**HAILING FROM  
108 COUNTRIES**

**MORE THAN 1/3 LIVE IN U-M HOUSING**

Source: Common Data Set 2015-2016



**97% ENROLLED FULL-TIME**

**12% ARE FIRST-GENERATION COLLEGE STUDENTS**

**88% FEEL THAT THEY BELONG AT U-M**



Source: UMay 2015



Source: FAFSA 2015



Source: UMay 2015



**21%** of graduate students

**28%** of undergraduate students

**Reported some degree of suicidal ideation  
in the past 2 weeks**

# CCMT: Clinical Care Management Team

## *Purpose:*

*Provide a regular opportunity for continuity of care planning for high-risk students who are experiencing challenging mental health situations at the University of Michigan. Ensure that students receive the care they need and that no one is inadvertently lost to care.*

Care Managers in student counseling center and health services

Coordinated follow up for students who are evaluated or admitted at the hospital

Coordination for students who are seen at counseling center and health service

# Context for program development

## ***Rationale:***

***The distributed nature of communication, funding, and structures have led to risks in the delivery of behavioral health care to University students. This may be improved through new strategies for communication and greater familiarity between the numerous mental health and clinical providers within the University of Michigan and Ann Arbor community.***

**student deaths by suicide in 2013-2014 academic year that received news coverage**

**University Regents supportive of enhanced coordination**

**CAPS & UHS administrators**

**demonstrated need in care management work**

**Post-psychiatric hospitalization suicide risk 100 times the global suicide rate (JAMA Psychiatry, 2017).**

**38% of CAPS clients and 26% of UM Students report some degree of suicidal thoughts (CAPS Annual Report, 2017, & CSMHS, 2018).**

**Weekly meeting to review and discuss student discharges from PES**

**Email outreach to students**

**Regular contact with PES staff**


**Continuity of care consultation for shared clients; streamlined services**



Psychiatric Emergency Services



Therapeutic and psychiatric providers

secure email 

MRN  
DOB  
Initials  
Date of discharge



secure email



- opportunity to connect with Care Manager
- assistance with connecting to discharge plan
- risk reduction through clinical outreach



**Hello, Meagan. I am writing on behalf of the Clinical Care Management Team (CCMT), as follow up to your recent ER visit. The CCMT works to ensure that students are connected to the resources they need. Please reply to this email to let us know how you are doing and if you need any assistance in connecting with the resources offered at the time of discharge from the ER.**

**Take care,**

**Amanda**

# Collaboration with other student support teams on campus

**Dean of Students Behavioral Intervention Team**

**clinical case management and student affairs case management**

**CCMT vs us as individual care managers**





Student admitted to area hospital  
1

Obtain permission to contact DOS as soon as possible

DOS is contacted and connects with student. DOS coordinates with various departments and provides support for:

- academics
- housing
- financial needs
- insurance issues
- employment concerns
- family involvement
- visa/international concerns
- case management referral to CCMT
- social support

2

Hospital staff make discharge plan  
3

**Key**  
DOS: Dean of Students Office  
CCMT: Clinical Care Management Team

Fax plan to CCMT  
734.763.0454  
5

DOS see student for follow up  
4

CCMT assists every student to enact clinical discharge plan post-hospitalization  
6

As needed, CCMT

- schedules appointment with student
- coordinates connections to treatment providers
- provides clinical support while connections are made
- follows up as needed to ensure student is not lost to care

7

DOS refers to CCMT if clinical follow up needs arise

# Documentation

**Mbox**

**HIPAA and Michigan Mental Health Code compliant**

**Accessible across email platforms**

**Customizable**

# Implementation

**CAPS/UHS and hospital administrators met first**

**Information and protocol did not trickle down to front-line social work staff**

**Later meetings with hospital social workers to clarify protocol and address points of confusion**

# Memorandum of Understanding (MOU)

**Developed to streamline communication among hospital and student life units**

**Determined by hospital Compliance that releases of information still needed**

**Memorandum of Understanding  
Between  
University of Michigan Hospital System Psychiatric Emergency  
Services  
and Clinical Care Management Team**

This Memorandum of Understanding is designed to outline the process of making referrals of University of Michigan students from University of Michigan Hospital Psychiatric Emergency Service, to the Clinical Care Management Team. It provides a specific protocol to follow during the aftercare process, ensuring that students connect with providers and engage with discharge plan. This memorandum offers clear expectations of all parties as well as consistent points of contact, ensures appropriate dispositions and discharge planning, eliminates replication of services, and enhances a collaborative relationship.

As of May, 2015, approximately 200 UM students are seen at PES annually. The responsibilities and plans laid out herein are based on this number and the anticipated time required to effectively serve those 200 students.

The Clinical Care Management Team (CCMT) is composed of Care Managers from UHS and Case Manager(s) from CAPS. Psychiatric Emergency Services (PES) operates under the University of Michigan Hospital System, while University Health Service (UHS) and Counseling and Psychological Services (CAPS) belong to the University of Michigan division of Student Life. PES is under HIPAA regulations, UHS is under blended HIPAA/FERPA regulations, CAPS is under FERPA regulations, and all of these units are also regulated by the Michigan Mental Health Code. All are engaged in providing clinical mental health services to University of Michigan students. The CCMT seeks to address the needs of students who are experiencing challenging mental health situations at the University of Michigan, and who are seen at multiple units among PES/UHS/CAPS.

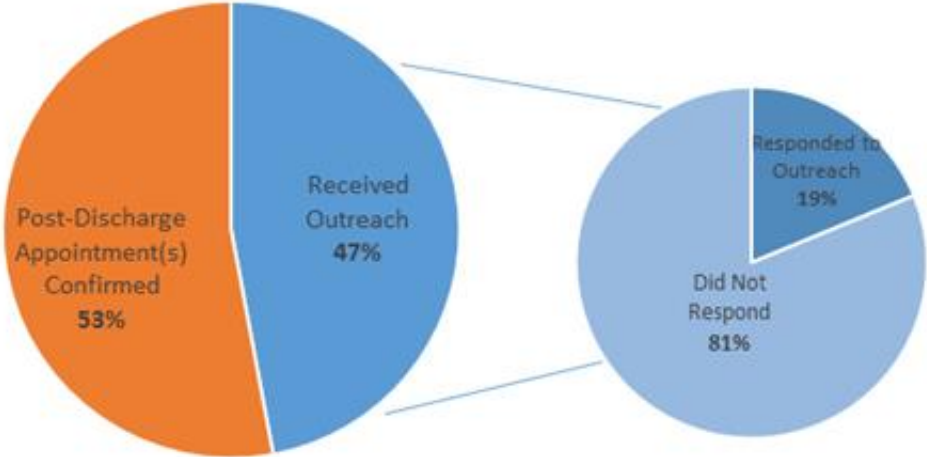
CCMT goals:

- Ensure that students receive needed care, and that no student is inadvertently lost to care
- Streamline and improve communication between units about shared clients
- Follow up with students to ensure that connections for ongoing treatment are made

PES staff, in addition to standard discharge planning, will also refer all University of Michigan students seen at PES to the CCMT via [email referral form](#), whether or not students are admitted to an inpatient unit or discharged from PES. This is based on ensuring continuity of care.

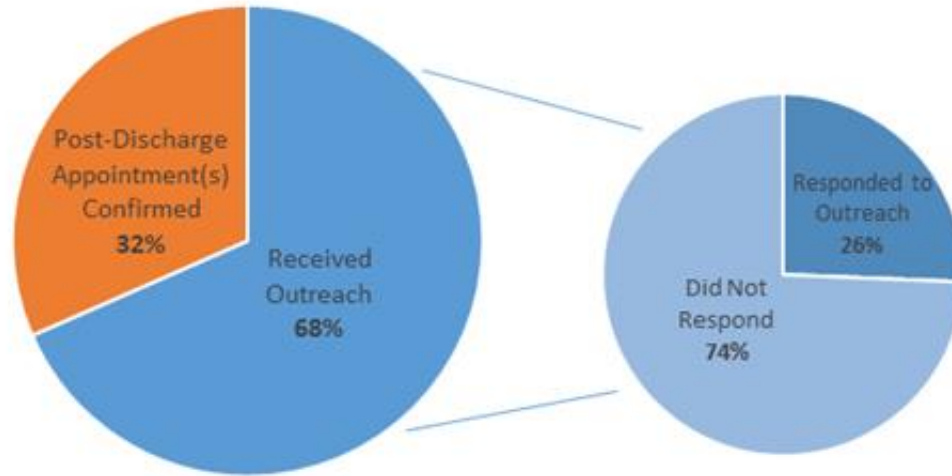
# Data: Pilot Year

34 total referrals



# Data: Year Two (YTD)

97 total referrals



\*One student who responded to outreach requested assistance

# Barriers encountered and lessons learned

**challenges to front line staff empowerment and direct communication**

**traditional hierarchy/administration and the impact of that on communication, decision-making, and the planning process**

**difficulty of communicating consistently between systems**

**technology for information sharing & documentation**

**secure email**

**medical record access (currently resolving)**

**fax machines**

**limited functionality of database**



# Things to consider for your campus

**access to secure email**

**access to medical record**

**different email platforms, different EMR systems**

**integrated vs siloed**

**sharing/release of information**

**physically close, somewhat integrated health system  
with an inpatient psychiatric unit**

# Sustainability

- CCMT and our Care Manager roles are matching funds under our campus grant
- The work will continue beyond the campus grant

# References

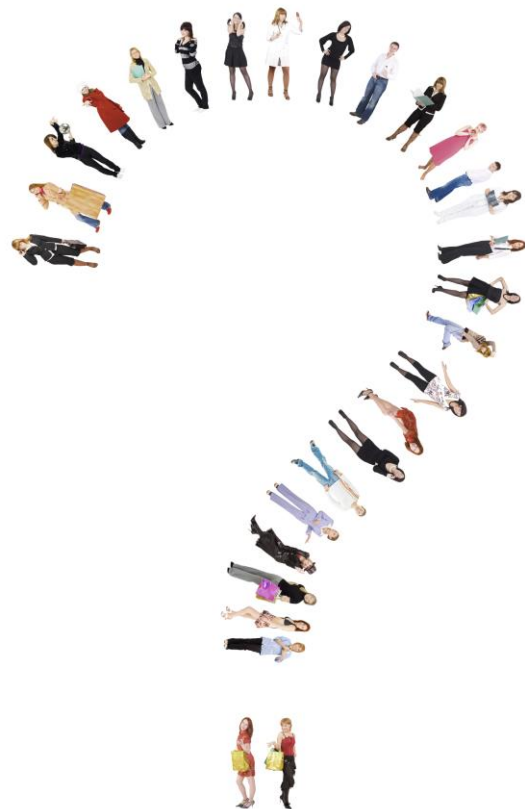
**Chung, D.T., Ryan, C.J., Hadzi-Pavlovic, D., et al. (2017). Suicide Rates After Discharge From Psychiatric Facilities: A Systematic Review and Meta-analysis. *JAMA Psychiatry*. 2017;74(7):694-702. doi:10.1001/jamapsychiatry.2017.1044**

**Office of Budget and Planning, University of Michigan. (2016). 2016 DEI Infographic. [http://obp.umich.edu/wp-content/uploads/pubdata/factsfigures/2016\\_DEI\\_Infographic.pdf](http://obp.umich.edu/wp-content/uploads/pubdata/factsfigures/2016_DEI_Infographic.pdf)**

**University of Michigan Counseling and Psychological Services. (2018). Annual Report 2016-17.**

**University of Michigan Counseling and Psychological Services (2018). College Student Mental Health Survey Phase V.**

# Q&A



# Discussion Time

- What takeaway(s) resonated with you from this webinar?
- What do you plan to implement from this webinar?



# Resources

- Campus Virtual Learning Lab – Mental Health Resources:  
<http://www.sprc.org/mental-health-resources>
- Zero Suicide Toolkit – Transition: <http://zerosuicide.sprc.org/toolkit/transition>
- Care Transitions – Best Practices and Evidence-Based Programs:  
<https://www.chrt.org/publication/care-transitions-best-practices-evidence-based-programs/>

고맙습니다

Gomapseumnida Mahalo

Na gode O se 谢谢 Spasiba Asante

Obrigado Arigato

Thank You

Grazie

Danke sehr

Ngiyabonga

Gracias

धन्यवाद

Merci

# Thank you!

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