

Student Mental Health: Managing Serious Issues Through Teamwork

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Hannah Ross, Middlebury College
Victor Schwartz, The Jed Foundation

Moderator: Heather Salko, United Educators


Today's Speakers

- **Hannah Ross**
 - General Counsel, Secretary of the Corporation, & Chief of Staff
 - Middlebury College, Vermont

- **Victor Schwartz, M.D.**
 - Chief Medical Officer
 - The Jed Foundation, New York
 - Clinical Assoc. Professor of Psychiatry at NYU School of Medicine



UE's 2018 Mental Health Claims Review



EduRisk
By United Educators

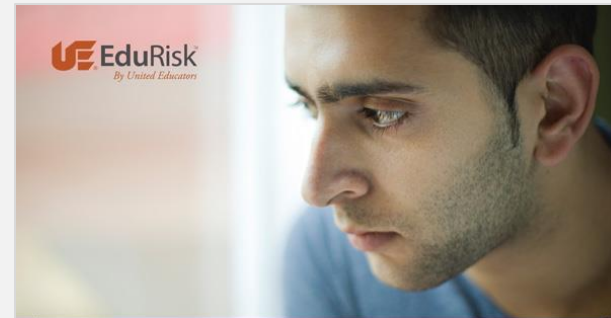
Risk Research Bulletin
**Student Mental Health on Campus:
A Review of Claims**

Over the past few years, an increasing number of college students have reported that their mental health issues—often anxiety, depression, or both—affect their academic work. In a 2017 national study, about 24 percent of students made that claim regarding anxiety and nearly 16 percent regarding depression¹. For the seventh consecutive year, another survey found an increase in students reporting “threat to self” characteristics², and death by suicide remains the second leading cause of death in youth ages 15-24³.

United Educators reviewed 223 student mental health claims to identify risks and management options.

¹ American College Health Association National College Health Assessment, Spring 2017 Executive Summary.
² Center for Collegiate Mental Health, 2017 Annual Report.
³ Centers for Disease Control, 2015, Suicide Fact Sheet.

101 Student Mental Health on Campus: A Review of Claims EduRiskSolutions.org



EduRisk
By United Educators

Risk Research Bulletin
**Student Mental Health on Campus:
Claims Involving Suicidal Students**

Student suicide remains a significant issue on college campuses and in United Educators' (UE) claims. Suicide is among the leading causes of death for college students, according to the Suicide Prevention Resource Center. A 2014 U.S. Department of Health and Human Services (HHS) report found that 8 percent of full-time college students had suicidal thoughts or seriously considered suicide.

college students shows that suicidal ideation (defined as considering whether to commit suicide within the past year) has been rising steadily since 2007¹.

UE's claims reflect these national trends. A review of 223 claims related to student mental health, "Student Mental Health on Campus: A Review of Claims," showed that suicide-related claims were among the most frequent and costliest. They accounted for nearly 70 percent of the study's claims and 43 percent of the losses. Responding to and recovering from a student suicide takes a significant toll on a campus community. Use the data and lessons from UE's review of its suicide-related claims to help your institution prevent and respond to this risk.

¹ Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings
² The Healthy Minds Study

102 Student Mental Health on Campus: Claims Involving Suicidal Students EduRiskSolutions.org



Updated 2019 Infographics

2019 UPDATE: General Mental Health Claims

In *Student Mental Health on Campus: A Review of Claims*, published in 2018, United Educators (UE) analyzed claims related to student mental health. The following includes updated data and lessons from the claims review through May 2019. Of 451 claims received from January 2011 through May 2019 from UE's 700 higher education members, 84 were considered "general mental health claims." Students brought these claims alleging that their own mental health condition, such as anxiety, depression, or an eating disorder, resulted in improper actions against them by the institution.

CLAIM INFORMATION

- \$18K** Average Cost per Claim
- 11 months** Average Length of Claim

Most Common Actions Taken Against a College

- Attorney Demand Letter: 31%
- OCR Charges of Discrimination: 29%

CLAIMANT INFORMATION

Gender

- 70% Women
- 30% Men

Class Year

- 30% Graduate Students
- 35% Undergraduate Students
- 33% Class Year Unreported

29% Seek Extra Time

Extra Time Was the Most Common Accommodation Requested

Most Common Diagnoses

- Depression: 44%
- Anxiety: 37%

Students Who Were Seeing a Campus Counselor

- 24%

COMMON SITUATIONS THAT LED TO A CLAIM

- Failure of a critical exam or program expulsion
- Disatisfaction with the disability accommodation process or outcome
- Discipline for inappropriate behavior

LESSONS FROM THE CLAIMS

To reduce liability institutions should:

- 1 Clearly communicate your accommodation process.
- 2 Ensure delivery of approved accommodations.
- 3 Implement a sound voluntary medical leave and return policy.
- 4 Include involuntary medical leave and return options in your policy.
- 5 Publicize counseling resources.
- 6 Clearly state accommodation limits for students in medical or other clinical programs.
- 7 Document student behavioral issues.

EduRisk™ Solutions provides education-specific risk management resources to colleges and schools, and is a benefit of membership with United Educators (UE) Insurance. As a member-owned company, UE is committed to helping educational institutions by offering stable pricing, targeted insurance coverage, extensive risk management resources, and exceptional claims handling.

To learn more, please visit UE.org.

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2019 UPDATE: General Mental Health Claims EduRiskSolutions.org

2019 UPDATE: Claims Involving Suicidal Students

In *Student Mental Health on Campus: Claims Involving Suicidal Students*, published in 2018, United Educators (UE) analyzed claims related to a student suicide attempt or death by suicide. The following includes updated data and lessons from the claims review through May 2019. Of 451 claims received from January 2011 through May 2019 from UE's 700 higher education members, 329 were considered "claims involving suicidal students."

Gender

- 63% Women
- 37% Men

Suicide Attempts

- 63% Women
- 37% Men

Deaths by Suicide

- 30% Women
- 70% Men

Details of Student Deaths by Suicide

Class Year

- 62% Undergraduate Students

Top Reported Majors

- Engineering
- Liberal Arts
- Science

Frequency of Claims

- 8% Deaths by suicide accounted for
- 19% of the claims, followed by general mental health at 73% and suicide attempts at 8%.

Deaths by Suicide Average Settlement Cost per Claim

\$173,650

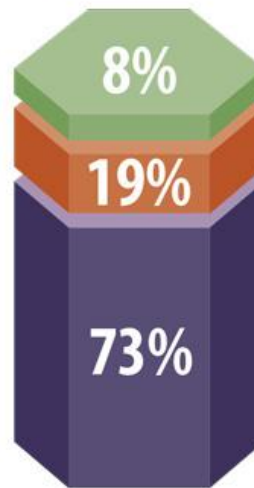
2019 UPDATE: Claims Involving Suicidal Students EduRiskSolutions.org

Frequency of Mental Health Claims

**451
claims**

All mental health claims received from January 2011 through May 2019; UE has more than 700 higher education members.

Frequency of Claims

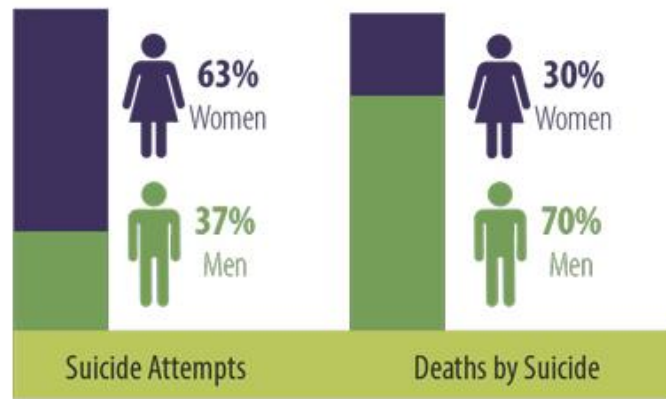


Deaths by suicide accounted for **73%** of the claims, followed by general mental health at **19%** and suicide attempts at **8%**.

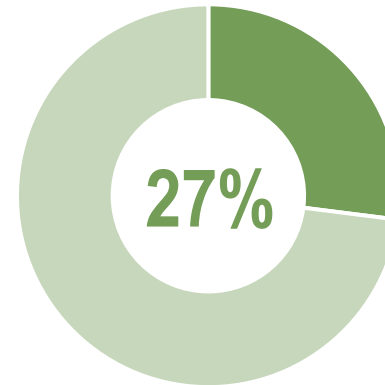


Suicide Attempts and Deaths

Gender



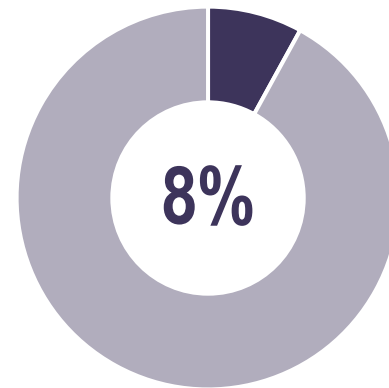
Students Who Were Seeing a Campus Counselor



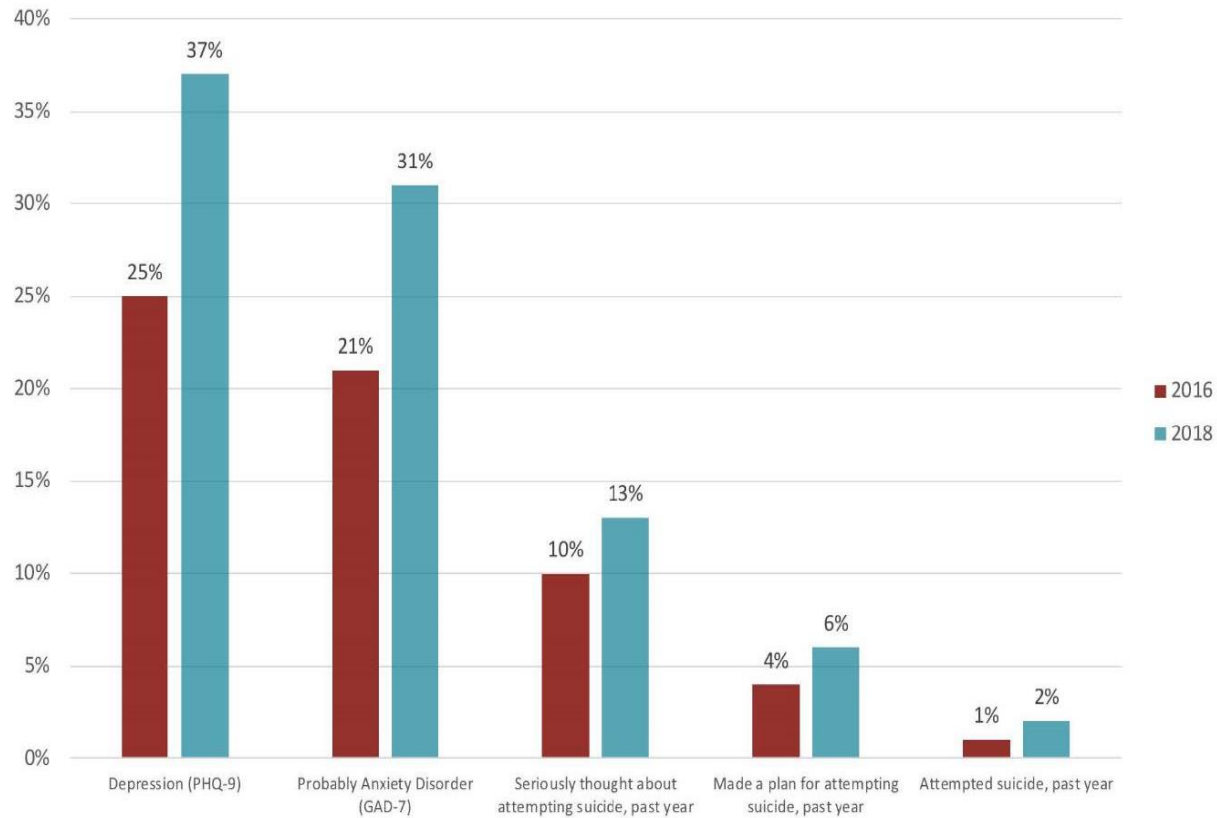
Involvement of Behavioral Intervention Team

Students at acute risk are rarely known beforehand.

UE Statistic: Behavioral Intervention Team Involved



Escalating Rates of Depression, Anxiety, and Suicidality Among College Students¹



¹ The Healthy Minds study is an annual survey-based study of more than 100 colleges and universities with more than 100,000 respondents (graduate and undergraduate).



Institutional Responsibilities to Students

- Recent cases: UCLA, MIT, Harvard, Stanford
- OCR Resolution Agreements
- Rutgers Policy & Stanford Leave Policy
- Avoid “direct threat” language
- Focus on individual assessments of students
- OCR Principles found here:
<https://www.higheredtoday.org/2019/09/04/helping-students-risk-self-harm-considerations-new-academic-year/>



January 2018: OCR Principles for Cases of Self-Harm

Best practice: Do not apply direct threat analysis to self-harming students

Focus instead on individualized assessments of health and safety risks

Prioritize voluntary actions

Ensure your policies are non-discriminatory

Involuntary separations may be a last resort

Institutional Responsibilities to Students

- Make individual decisions
- No blanket policies
- Use good clinical judgment
- Explain reasons for your institution's policy:
 - Not punitive



Set Expectations Early

- Create Transition of Care Plan
- Understand need for specialists
- Help parents find information
 - Counseling
 - Disability services office
- Releases of Information/Advanced Directives



Set Expectations Early

- Can't treat way out of issue—focus on wellbeing
- State clearly what it means to be a successful student at your institution
- Not residential care facilities
- Overview of incoming student health
- Communicate academic and other community standards
- Educate on change in privacy rights (FERPA)



Practical Tip: Contact with Parents

- FERPA permits disclosures to parents:
 - In a health & safety emergency
 - With the student's consent
 - If student is a tax dependent
 - If information disclosed is not from an "education record"

Question & Answer Session #1



A Team Approach to Student Mental Health On Campus

- Improving student mental health is a campus-wide endeavor
- Think through the campus-wide approach at every level
- How aware is the family of a student's struggles?
- Clinicians limited in disclosure



Individualized Assessments Are Group Work

- Risk should be assessed by a team, including input from:
 - Medical staff
 - Campus security
 - Student affairs
 - Faculty
 - Legal counsel



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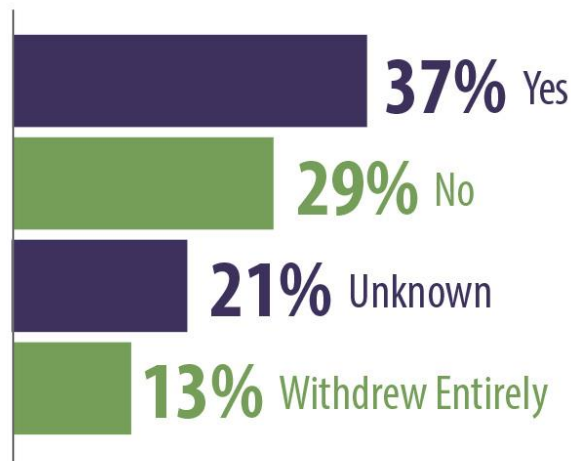
A Team Approach to Mental Health on Campus

- Limitations placed on campus clinicians
 - State law



Involuntary Medical Leaves of Absence

UE Statistic: Student Placed on Leave Following a Suicide Attempt



Permissible Involuntary Leave Policy Process

1. State requirement that student must be able to safely and effectively participate including appropriate self-care.
2. When concern is identified, let student know concern and do advising and counseling
3. Prioritize voluntary actions
4. Gather information, including medical records, including from student's preferred provider for **INDIVIDUALIZED ASSESSMENT**
 - a) Ask clinician – what level of treatment?

Permissible Involuntary Leave Policy Process

5. Evaluate it as a team (whether BIT or other)
6. Dean or equivalent make decision about enrollment and communicate right to appeal
7. If conditions are imposed on reinstatement/readmission, they should be written and provided at time of departure

Helping Students Make the Right Choice

- Student may need leave for 2 reasons
 - Can't function academically or take adequate care of self
 - Medically unsafe
- Understand why student is hesitant to take leave
- Flexible, student-friendly leave policy is important
- Review decision of serious risk or extremely risky choices



After a Leave

- Returning to School
 - Can impose conditions
- Individualized review and decision
- Review focus of time away—did it enhance health?
 - Written conditions with expectations
- **KEY QUESTION:** Can the student safely and effectively participate in academic program?



Helping a Student Return to School

- Home clinician may not be well-versed in campus life
 - Need clearance from campus counseling services or student life
- Balance timing of assessment for return
 - Close enough to show progress
 - Too close and student may miss financial aid and other student benefits
- Most students who take leave return to have success



Key Takeaways

- Mental health should be a campus-wide enterprise
- Be aware of limits of your campus policies and procedures

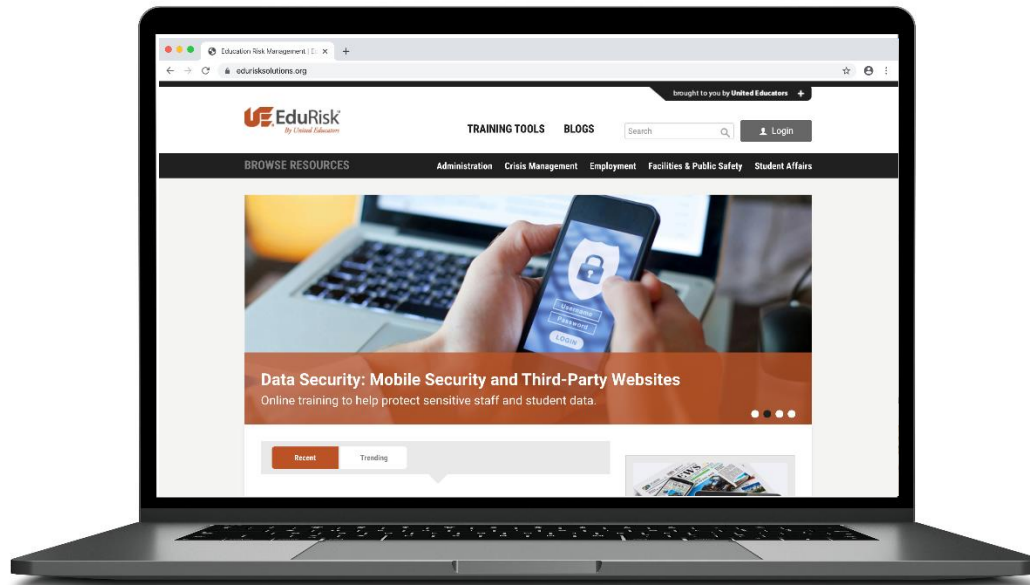


Question & Answer Session #2



Thank you

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