

Mental Health Coalition (MHC) Meeting Minutes
Minutes from April 4th, 2017

- I.** Attendees – Randolph Brooks, Sarah Cardwell, CC Curtis, Mary Devins, Erin Duran, Darcie Folsom, Scott Harvey, Claudia Highbaugh, Alex Hybel, Liz Longley, Deb MacDonnell, Catherine Moffett, Sara Rothenberger, Janet Spoltore (Chair), Nikita Terry
- II.** Introduction of members and guests from JED Campus here to provide feedback to campus on self-assessment of mental health network on college. Dr. Doris Yaravitch provided the feedback and facilitated the discussion and Mr. Lee Swain (on conference line), the Assistant Director of JED Campus and the Connecticut College advisor
- III.** The Report
 - a. JED compiled a report based on the campus survey self-assessment that Connecticut College compiled and submitted. The Campus was awarded the JED Campus Seal. The Mental Health Coalition assisted in the review and data gathering for the self-assessment. The report is not prescriptive and not all recommendations will work for Connecticut College
 - b. Strategic Planning
 - i. Connecticut College has a defined strategic plan inclusive of health and mental health
 - ii. There is a well-established Mental Health Coalition that meets twice a semester with good representation at all levels of college staff/faculty
 - 1. Senior administrators are on the committee
 - iii. The small campus environment allows for good communication
 - iv. Health and Wellness is part of the strategic plan, e.g., PEEPS – Peer Educators are working to improve effectiveness around mental health wellbeing
 - v. A needs assessment was carried out by the Student Counseling Services (SCS) at the beginning of this semester to help with determining how SCS can continue to meet the demands and needs of the students
 - c. Developing and Supporting Life Skills
 - i. Connecticut College has a multitude of programming supporting Life Skills and presented by a large number of diverse departments
 - ii. How is information about these events disseminated and coordinated?
 - 1. Departments in the division frequently collaborate
 - 2. More cross-division collaboration would be beneficial
 - a. Student Experience Group could be utilized as a method for this
 - 3. More use of social media to disseminate information
 - iii. Staff and faculty could benefit from more education about student mental health and information about self-care especially since academic struggles could be a sign of more in-depth difficulties

- iv. SCS is investigating the potential for Dialectical Behavior Therapy (DBT) Group
- d. Social Connectedness
 - i. Peer mentorship programs are common for students
 - 1. Active Minds
 - 2. ALANA
 - 3. Safety Net
 - 4. Student Advisors
 - a. Reach 100% of students and are trained to ask about loneliness and social connection on campus
 - b. Very active during the first month of classes and are built into the FYE classes
 - ii. Student Athletes
 - 1. Close to 50% of Connecticut College students are student athletes at either the club or varsity level
 - 2. There is a lot of collaboration with athletics and mental health & wellness programming, e.g., Green Dot Training
 - iii. Families get mental health information at orientation
 - 1. Families might benefit from occasional refreshers of information during their time at Connecticut College
 - a. There is a weekly family newsletter – “Just One Thing” which could be utilized for disseminating mental health information to families
 - iv. REF events
 - 1. There are several REF events every week about a variety of topics
 - v. Active Minds is very active student lead club on campus which provides education and awareness of mental illness and stigma reduction
- e. Identification of at-risk students
 - i. Connecticut College holds a number of screenings during the year to identify at-risk students (depression, eating disorders, anxiety, alcohol)
 - ii. All first-year students take an alcohol disorders survey
 - iii. REAL staff do Camel Chats to identify at-risk students
 - iv. SCS has helpful online mental health screenings; need to link to the Student Life and Student Health Services (SHS) webpages
 - v. SHS does a screening to all students (PHQ-2/9)
 - vi. SHS does self-care plans
 - vii. Gatekeeper trainings
 - 1. Trainings performed by the SCS staff at least once a semester to inform faculty and staff on identifying at-risk students, working with at-risk students, and referring to SCS
 - 2. Trainings are also performed on request
 - 3. Student Support Network (SSN) trains students in the same type of topics over a period of 6 weeks, once per semester

4. Any concerns about a student can be forwarded to the Senior Associate Dean OSLOr a Maxient report can be made to the CARE team.
- viii. Coaches and Athletic training
 1. The coaches are proactive with referring to SCS/SHS and providing information to their students
 2. Received a department-wide gatekeeper training during the Fall 2016 semester.
- f. Increasing Help-Seeking Behavior
 - i. The SCS website is well-made and easy to navigate
 1. Can easily be found from the main college website
 2. It would be helpful to make emergency contact numbers stand out more
 - ii. How is information disseminated?
 1. Health & Wellness engage in a number of initiatives each semester
 2. "I Have A Therapist" campaign by Active Minds/SCS
 3. Green Dot
 4. PEEPS are very active
 5. There is currently a lot of work to properly evaluate these programs and their impact
 - iii. Substance Use Messaging
 1. There could be more communitiy programs around stimulant drugs
 2. SHS has students sign a contract discussing the need to not share stimulant medications
- g. Clinical Services and Mental Health
 - i. There are psychiatric services available on-campus
 1. The psychiatrist is available seven hours per week at SCS
 - a. Currently sufficient and can be increased as needed
 2. Students seeing the psychiatrist sign an ROI to SHS for improved communications
 3. SHS also provides limited psychiatric services to students
 - a. Provide most of the ADHD medications on campus
 - ii. Primary care on campus is comprehensive
 - iii. Counseling Services
 1. There are no session limits for counseling
 2. Adequate staffing
 3. Low wait time
 4. Urgent appointments are handled quickly
 - a. Fit into schedules by availability
 - iv. Off-campus referrals
 1. Very uncommon
 - a. ~4 per year

2. Most require a higher level of care or a specialization not available at SCS
3. Could be helpful to have a Memorandum of Understanding with local facilities
- v. Medical Leave Policies
 1. Very accessible and understandable
 2. Needs to be fair
 - a. Academic deans are currently in charge of the process
 - b. There is a question about what is legally permitted in terms of gatekeeping of returning students
 3. It is good that Connecticut College has tuition reimbursement insurance
 - a. Needs to be parity with physical and mental health leaves
 - i. Current policy requires a day of hospitalization before coverage kicks in
 - ii. This has been an ongoing discussion with the insurance company over best policy
- h. Substance Use
 - i. Connecticut College has good policies in place
 1. These policies need to be included in the faculty handbook so they can be more aware of them
 - ii. If students are reported for substance use they will be mandated to meet with OSL staff
 1. May be required to go to SCS for assessment
 2. Parents will be contacted with multiple offenses
 - iii. Medical Amnesty policy
 1. Do students understand this?
 2. There is currently no limit to the number of times a student can use medical amnesty
 - iv. Student athletes and substance use
 1. OSL staff works with the teams
 2. Worked with the Gordie Foundation for a period of time
 - v. Most substance use treatment is handled on-campus
 1. Some referrals are made to off-campus providers
 2. There are AA meetings on campus
 - vi. Opioid use on campus
 1. Campus safety is trained on Naloxone and are equipped with it
 2. Student EMTs do not provide Naloxone treatment
 3. SHS does not prescribe opioids
 4. Need to provide more programming about opioids
 - vii. Pill Collections
 1. Connecticut College has done them in the past
 2. Very expensive

3. Local police stations will accept expired medications
- viii. Crisis Management
 1. Connecticut College handles this well
 2. It can be helpful to review crisis policies annually
 3. Make numbers more visible online

- ix. Means Restrictions
 1. Good to do an environmental scan every year
 2. The gun restriction on campus is good
 3. Renovations should include attention to suicide prevention

IV. Next Steps-Mr. Lee Swain and Dr. Janet Spoltore will confer by telephone in the near future to discuss plans and next steps.