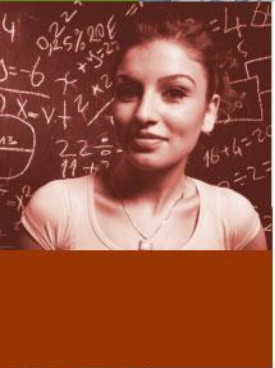




Promoting emotional health and preventing suicide among college & university students





College Behavioral Intervention Teams: A brief overview

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The HEMHA Guide



- https://www.jedfoundation.org/professionals/programs-and-research/campus_teams
- Brief review of history: HEMHA, campus teams and guide
- HEMHA: ACHA, ACCA, AUCCCD, NASPA, ACPA, APA, APA, TJF

Introduction: 5 Sections



- **Team mission**
- **Naming the Team**
- **Team composition, size, and leadership**
- **Team functions**
- **Common pitfalls and obstacles**

Team Mission



“Connecting the Dots” is integral to mission and purpose (2 components):

- Info may exist in several different areas-need for coordination**
- Each piece of info alone may not seem enough to indicate risk but aggregate info might**

Team Mission (II)



- Central decision point: **At risk** team or **threat assessment** team
- At risk: wider net, looking for students in academic and/or psychosocial trouble
- Concept of “upstream” intervention (cardiology metaphor)-strong advantage
- Challenge of too much data, wider team membership, coordination

Team Mission (III)



- **Threat assessment model is much more focused**
- **Smaller amount of data and can work with smaller committee**
- **Risk of not having enough experience (which is a good thing!)-team can become stale**

Team Mission (last one)



- **Team mission/philosophy will to some extent determine team participation, name, procedures etc.**
- **In either case, TRUST is fundamental to the process and program (more on this later)**
- **Some schools have both types of team which interface**

Naming the Team



Rockland and Eells (2011):

- Students of Concern Committee
- Campus Assessment Team
- Campus Assessment, Response and Evaluation (another CARE acronym) Team
- Student Behavior Consultation Team (SBCT)
- Assessment and Care Team (ACT)
- Behavioral Assessment Team (BAT)
- College Concerns Team

Name (II)



- **Teams must have an entertaining acronym (just joking)**
- **It is helpful for the name to reflect the team function (and certainly not to contradict or confuse)**

Team Composition



Most common members:

- **Dean/VP of student affairs**
- **Counseling Center directors**
- **Directors of public safety (esp. when team has threat function)**
- **Housing director**
- **Student conduct officer**

Team Composition



Less frequently:

- Health service director
- Faculty
- Additional team members: representatives of Academic Advising, Financial Aid, the Disabilities Office, Legal Counsel, University Ministry, Athletics, International Office, Women's Services, the Registrar, Wellness Director, and Career Services.

Team composition (III)



- **This will depend on team philosophy/mission**
- **Some may be intermittent participants when particular issues relevant to them emerge**
- **Consideration should be given as to whether threat team deals with faculty/staff issues as well (HR participation)**

Team Functions (planning)



- **Assess and review relevant campus policies (discipline, LOA, weapons on campus)**
- **Orientation and training must be cross-discipline**
- **Table-top practice exercises**
- **Creating an open culture of communication**
- **Identifying a team leader (most often senior student affairs officer)**

Team Functions



- **The team must create orderly conduit (or multiple) for receiving information: online, phone, members collect from constituents (RA's, faculty, other students are very important)**
- **Whether to and how to publicize team (easier when team is focused on at risk support)**

Functions: Info review



- Information brought to team must be **assessed** (What kinds of info reported?)
- **Plan of action** developed (observation, meeting, direct action if acute danger)
- In general, best to work from surface down-start with most simple/benign and least intrusive (remember that trust issue)
- Process is often not linear

Team Functions



- **Follow up** and tracking of outcome are essential
- Team should receive reports back that problem has been addressed or resolved or determine next steps
- Health/safety and academic status of student need to be considered and health/safety of community as well
- Teams need to be familiar with relevant legal issues

Team Functions (legal)



- **Need to consider issues related to documentation**
- **Clinicians need to be mindful of privacy issues-but can play important consultant role**
- **FERPA does not include observations of behavior until recorded**
- **FERPA has exclusions for legitimate educational interest and health and safety emergency**

Team Function (legal)



- **Clinicians have higher threshold for privacy than administrators**
- **ADA might have ramifications (limit action purely on the basis of illness or disability)**
- **Comments on OCR's "direct threat" analysis**

Pitfalls and Obstacles



- **Poor planning: picking team members badly, training and managing badly**
- **No clear pathways for reporting**
- **Poor follow-up and tracking**
- **Misunderstanding the legal issues**
- **Lack of flexibility**
- **Missing team dynamics and stresses**

Conclusion



“When people care about each other and feel their institution cares about them, the odds of detecting someone who is emotionally disturbed and intervening before a tragedy occurs become much better” (The Academy for Critical Incident Analysis, 2010b).