



Colorado Higher Education Student Suicide Prevention Report

JANUARY 2010

Introduction:

During the 2006 legislative session the General Assembly passed and the Governor signed into law the, “Colorado Higher Education Student Suicide Prevention Act” (Appendix A) and Senate Joint Resolution 13, “Concerning the Promotion of Suicide Education Programs in Higher Education” (Appendix B). Both the Act and the Resolution intended to promote awareness and educational programs to prevent suicide at institutions of higher education.

The Act called for the Colorado Commission on Higher Education to select one or more willing institutions of higher education to participate in a two-year pilot program, which would create a campus-wide program to allow all students the option to fill out a consent form containing the contact information of a person who can be notified in case a student exhibits suicidal behavior. The Commission selected Adams State College, Colorado State University, and Northeastern Junior College to implement the program.

The Suicide Prevention Act also requires the Commission to report on the implementation of these efforts to the House and the Senate Education Committees on or before February 1, 2010. Below are the responses of the three institutions which participated in the pilot program detailing their implementation efforts.

Adams State College:

As one of the Colorado campuses invited to be pilot programs in SB 06-067 which was later codified as C.R.S. 23-19.5-101 *et seq.*, (Colorado Higher Education Student Suicide Prevention Act), Adams State College adopted a comprehensive Mental Health and Suicide Prevention Policy in 2007, now in its fourth revision (Appendix C) which includes a voluntary student emergency contact provision (paragraphs 61 – 64 of Appendix C). The voluntary student emergency contact provision gives students the opportunity to designate the person(s) the student would like Adams State College to contact in the event that concerns arise about the student’s general state of mental health and potential suicidality specifically. The Student Consent for Release of Information forms (Appendix C) are provided to students at check-in to residence halls, and upon intake to services through the Counseling & Career Center.

Adams State College also founded a Students of Concern Committee (SOC) in the summer/fall of 2007 for the purpose of proactively identifying students who may be becoming a threat to themselves or others. The Mental Health and Suicide Prevention Policy provides the foundation for the SOC. The Guiding Principles for the SOC are included as attachment C.

The process of creating the SOC led Adams State to create clearer protocols with the San Luis Valley Comprehensive Community Mental Health Center and area law enforcement including the ASC Police Department in responding to students who are suicidal. These protocols have now been functioning for over a year. The process of implementing these protocols has also resulted in greater information sharing between on-campus entities such as the ASC Police Department, the Incident Management Team, and academic departments with the SOC.

Lastly, Adams State has increased the training available to students, faculty, and staff regarding identification and intervention with students who may be suicidal. This training has included improvements to Resident Assistant training including the ‘Behind Closed Doors’ experiential training component, outside speakers such as Brett Sokolow from the National Center for Higher Education Risk Management, and sending students and employees through the two-day Living Works Applied Suicide Intervention Skills Training (ASIST). In January of 2010 Adams State produced a pamphlet aimed at

faculty, staff and students entitled “Guidelines for Responding to Disturbing Writing and Behavior” (Appendix C).

Results

The initiatives described above have provided Adams State a systematic means for taking a proactive stance in preventing suicidal behavior on campus, as well as protocols for intervening with students who are expressing suicidality or who have made a suicidal gesture. Emergency contacts provided through the Student Consent for Release of Information have been contacted a total of five times since the initiation of the project. One of the reasons for the relatively low number of emergency contacts is due to the success that has been experienced in identifying and intervening with students prior to their behavior becoming overtly suicidal.

Looking at records from the Counseling Center, Residence Life, and Student Affairs, the incidence of intervention with suicidal students has seen a gradual increase since 2000-01 (see chart below):

Academic Year	Interventions with Suicidal Students
2000-01	2
2001-02	5
2002-03	2
2003-04	1
2004-05	1
2005-06	3
2006-07	5
2007-08	5
2008-09	7
2009-10	9

We believe this gradual increase represents progress in identifying students with mental health issues and an improvement in record-keeping as opposed to representing a failure in the protocols put in place. An additional factor in the increase is likely the increase in students coming to college with significant mental health issues that has been seen and documented at colleges and universities across the nation.

Conclusion

Adams State has been at the forefront of efforts by Colorado colleges and universities in implementing protocols for proactive identification of suicidal students as well as intervening with students who have expressed suicidality verbally or behaviorally. At the 2009 Colorado Campus Forum on Mental Health held in Breckenridge last October, Adams State was fully 2 years ahead of other institutions in the development of policy to undergird efforts such as those described in this report, and one of ASC’s SOC members presented at the National Behavioral Intervention Team Association meeting held in San Antonio in December, 2009.

Colorado State University:

Pursuant to C.R.S. 23-19.5-101 et seq, Colorado State University (CSU) adopted an Emergency Contact Policy in September of 2007. This was previously provided to the DHE in CSU’s compliance dated March 18, 2008. The policy provides that the University will ask students to disclose emergency contact

information through the on-line Registration Ready system where students go to register for their classes each semester. Students pass through a screen where they are given the option to provide, change, or delete their emergency contact information before they are allowed to register for classes. Students continue to have access to, and the ability to change, their contact information throughout the semester through the on-line system.

On the emergency contact screen, students see the following language:

- (a) I hereby authorize Colorado State University to notify my designated emergency contact in the event of an emergency, which may include, but is not limited to, an accident, injury, hospital transport, urgent health issue, or the reasonable belief by a designated staff person that I am considering suicide or may be a danger to myself or others.
- (b) I understand that refusing to provide emergency contact information now does not preclude me from later providing the information. The option to provide, change, or revoke my emergency contact information is always available to me through the Registration Ready system.
- (c) I understand that in the event of an emergency, CSU will release to my designated emergency contact person only such otherwise confidential information that is directly related and minimally necessary to convey to the contact person the nature of the emergency.
- (d) I understand that CSU, its governing board, officers, and employees are not liable for notifying or failing to notify my designated emergency contact person and I release CSU from any liability associated with the information I have provided here.

The policy designates the employees on campus who have access to the emergency contact database. The Vice President for Student Affairs has further designated the individuals on campus who have the authority to determine when it is appropriate to notify an emergency contact person.

Additional Suicide Prevention Efforts

CSU is proud to report on its suicide prevention efforts on campus. CSU has many dedicated employees and systems in place to identify students who may be at risk to themselves or others and provide support. Following is a non-exhaustive summary of the efforts and programs on campus:

1. Student Consult Team

The Student Consult Team is chaired by the Dean of Student Affairs, and is comprised of employees from the CSU Police Department, CSU Health Network, Victims Assistance Team, Student Conduct/Dispute Resolution, the Student Case Manager, and the Office of the General Counsel. The team meets every week, and additional times as necessary, to discuss students of concern. The team has a wide range of expertise, and works together to explore the level of risk and develop a plan to support the student and prevent potential tragedies. The team is very dedicated, handles hundreds of cases, and has had a lot of success in supporting students such that they remain on campus with the support they need, or in extreme and rare cases, leaves campus to receive more intensive support with the hope they can return to CSU.

2. Employee Consult Team

The Employee Consult Team is similar to the Student Consult Team, but focuses on employee issues and seeks to identify and support employees who may pose a threat to themselves or others.

3. Case Manager

CSU hired a Case Manager in 2007 who plays an integral role in referring students to on-campus or off-campus support. It was one of the first Universities in the United States to take the approach of having a full time Case Manager who would be the primary contact point for students of concern. The Case Manager has strong relationships across campus and in the local community that allows her to utilize numerous resources and connections for student support. While CSU's Case Manager is not the only point of contact for faculty, staff or other students who have concerns about a student, she is the primary point of contact and her position is well publicized on campus.

4. Health Network/Counseling Center

The CSU Health Network includes a counseling center with licensed, professional counselors and psychiatrists who provide one on one counseling services, as well as oversee various support groups and programs related to student mental health. In the event of a student suicide, it quickly responds to students who are known to be impacted and works to establish a relationship to help affected students.

It also has extensive information on its website regarding depression, anxiety and stress management to try and educate students on how to cope.

5. Public Safety Website

The CSU Public Safety Team website provides information about the many campus resources that are available to report or respond to distressed students.

6. ROTC Program

The campus ROTC program also has a program of educating students/cadets regarding suicide issues and strives to have a culture of reporting and mentorship to prevent suicide.

Conclusion

CSU devotes extensive resources to student mental health and seeks to educate students, staff and faculty about suicide, and fosters a culture of reporting so students of concern can be reported, contacted and supported. It has extensive resources on campus to assist students who may be a threat to themselves, and also connections to local community resources in the event the student needs support CSU is unable to provide. While there are not specific statistics on the number of emergency contacts that are used, CSU has an "err on the side of caution" approach to reporting concerns about students to their emergency contacts if there are serious concerns about a student's mental health and possible suicides.

Northeastern Junior College:

NJC has taken several steps to implement the Suicide Prevention Act pilot program. The institution has sent out a notification letter and consent release form (Appendix D) to every student with their early billing notice. In the second year of the pilot NJC received a total of 87 responses back and the rate of response in the first year was 67. We have these on a data base also for quick reference and should we have the need to act on a threat, would reference this file. We have had a number of parents call to inquire further and those conversations have been well received.

NJC also took the opportunity to revisit our procedures and to update our training with staff regarding response to suicide ideation/attempt during these two years. This procedure is outlined on page 57, Section 3.31 of Student Handbook and is referenced in the information sent to students (Appendix D).

NJC spends time at the beginning of each year training the residence hall staff regarding suicide prevention measures. The Counseling / Advising department has updated themselves on a regular basis including making sure of the community resources available to support this effort. The campus works closely together when potential problems show up. The counseling area has added links and information to their website that include resources for individual students. This area does programming in residence halls and informational materials are offered through the Peer Helper/Educator group through the year. The Residence Life area also provides programs on community resources and health lifestyle issues through the year.

This last year as part of the Emergency Management- Prevention work for the campus, we developed a "Care Team" that follows up with troubled students and situations (Appendix D). This basically encourages all staff to be aware and alert to those who seem to have escalating problems. It encourages bringing those situations to the Care Team to offer proactive assistance and intervention.

NJC also has an Ombudsperson who reached out to students from diverse backgrounds that are showing signs of trouble.

APPENDIX A:
COLORADO HIGHER EDUCATION STUDENT SUICIDE PREVENTION ACT

NOTE: This bill has been prepared for the signature of the appropriate legislative officers and the Governor. To determine whether the Governor has signed the bill or taken other action on it, please consult the legislative status sheet, the legislative history, or the Session Laws.

An Act

SENATE BILL 06-067

BY SENATOR(S) Hanna, Shaffer, and Groff;
also REPRESENTATIVE(S) Kerr, Berens, Hefley, King, Massey, Penry,
Rose, Stafford, Stengel, Todd, White, and Frangas.

CONCERNING SUICIDAL BEHAVIOR AMONG STUDENTS IN HIGHER EDUCATION.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. Title 23, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW ARTICLE to read:

ARTICLE 20 **Colorado Higher Education Student Suicide Prevention Act**

23-20-101. Short title. THIS ARTICLE SHALL BE KNOWN AND MAY BE CITED AS THE "COLORADO HIGHER EDUCATION STUDENT SUICIDE PREVENTION ACT".

23-20-102. Definitions. AS USED IN THIS ARTICLE, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "CONSENT FORM" MEANS A CONSENT FORM, SIGNED PURSUANT TO SECTION 23-20-103.

(2) "CONTACT PERSON" MEANS A STUDENT'S PARENT, PARENTS, OR FAMILY MEMBER OR ANOTHER PARTY DESIGNATED BY A STUDENT ON HIS OR HER CONSENT FORM.

(3) "STATE INSTITUTION" MEANS AN INSTITUTION OF HIGHER EDUCATION SUPPORTED IN WHOLE OR IN PART BY GENERAL FUND MONEYS.

(4) "STUDENT" MEANS AN UNDERGRADUATE STUDENT ENROLLED AT A STATE INSTITUTION.

23-20-103. Limited implementation - consent to release confidential information - policy - revocation. (1) ON OR BEFORE JULY 1, 2007, THE COLORADO COMMISSION ON HIGHER EDUCATION SHALL SELECT ONE OR MORE WILLING STATE INSTITUTIONS TO IMPLEMENT THE PROVISIONS OF THIS ARTICLE FOR A TWO-YEAR PERIOD.

(2) (a) ON OR BEFORE SEPTEMBER 1, 2007, THE STATE INSTITUTIONS SELECTED PURSUANT TO SUBSECTION (1) OF THIS SECTION SHALL ADOPT A POLICY TO DISTRIBUTE A CONSENT FORM TO EACH STUDENT ENROLLED IN THE INSTITUTION AND MAINTAIN THE CONSENT FORM AS DESCRIBED IN PARAGRAPH (b) OF THIS SUBSECTION (2). AT A MINIMUM, THE POLICY SHALL IDENTIFY:

(I) THE MOST EFFECTIVE MEANS OF DISTRIBUTING THE CONSENT FORM CONSISTENT WITH THIS ARTICLE;

(II) THE LANGUAGE OF THE CONSENT FORM;

(III) WHERE AND IN WHAT MANNER THE INSTITUTION SHALL MAINTAIN THE CONSENT FORM TO PROVIDE THE GREATEST ACCESS TO AUTHORIZED PERSONNEL;

(IV) THOSE PERSONNEL WHO SHALL HAVE ACCESS TO THE CONSENT FORM; AND

(V) THOSE PERSONNEL WHO SHALL HAVE AUTHORITY TO NOTIFY THE CONTACT PERSON DESIGNATED IN THE CONSENT FORM AND THE PROCESS BY WHICH THE NOTIFICATION IS MADE.

(b) ON OR BEFORE SEPTEMBER 1, 2007, THE STATE INSTITUTIONS

SELECTED PURSUANT TO SUBSECTION (1) OF THIS SECTION SHALL INCLUDE WITH MATERIALS PROVIDED TO EACH MATRICULATING STUDENT A CONSENT FORM THAT:

(I) AUTHORIZES THE STATE INSTITUTION TO NOTIFY A DESIGNATED CONTACT PERSON IN THE EVENT THAT A PERSON WHO HAS BEEN DESIGNATED BY THE STATE INSTITUTION HAS A REASONABLE BELIEF THAT THE STUDENT IS CONSIDERING SUICIDE OR MAY BE A DANGER TO HIMSELF OR HERSELF; AND

(II) AUTHORIZES THE STATE INSTITUTION TO RELEASE TO THE DESIGNATED CONTACT PERSON ONLY SUCH OTHERWISE CONFIDENTIAL INFORMATION THAT IS DIRECTLY RELATED TO THE REASONABLE BELIEF THAT THE STUDENT IS CONSIDERING SUICIDE OR MAY BE A DANGER TO HIMSELF OR HERSELF AND SUCH INFORMATION AS IS MINIMALLY NECESSARY TO CONVEY TO THE CONTACT PERSON THE GROUNDS FOR THE REASONABLE BELIEF.

(c) THE CONSENT FORM SHALL INCLUDE NOTIFICATION TO THE STUDENT THAT, IF HE OR SHE WANTS THE CONSENT FORM TO BE KEPT ON FILE WITH THE STATE INSTITUTION, HE OR SHE MUST RETURN THE FORM TO THE LOCATION DESIGNATED ON THE FORM BY THE STATE INSTITUTION VIA SUCH DELIVERY METHOD AS DESIGNATED BY THE STATE INSTITUTION ON THE CONSENT FORM.

(3) REFUSING TO SIGN A CONSENT FORM AT THE TIME OF REGISTRATION SHALL NOT PRECLUDE A STUDENT FROM LATER REQUESTING AND SIGNING A CONSENT FORM, NOR SHALL IT PRECLUDE THE STATE INSTITUTION FROM LATER PROVIDING THE STUDENT WITH THE OPTION OF SIGNING A CONSENT FORM.

(4) A STUDENT WHO HAS PREVIOUSLY SIGNED A CONSENT FORM MAY, AT ANY TIME, CHANGE THE CONTACT PERSON OR REVOKE THE CONSENT FORM ENTIRELY. REVOCATION OF A CONSENT FORM SHALL NOT PRECLUDE THE STUDENT FROM SIGNING A CONSENT FORM AT A LATER DATE.

(5) NOTWITHSTANDING THE PROVISIONS OF THIS ARTICLE, THE RELEASE OF INFORMATION CONCERNING A STUDENT WHO IS TAKEN INTO CUSTODY OR RECEIVING CARE AND TREATMENT UNDER THE PROVISIONS OF ARTICLE 10 OF TITLE 27, C.R.S., SHALL BE GOVERNED BY THE PROVISIONS OF ARTICLE 10 OF TITLE 27, C.R.S.

23-20-104. Duty - immunity from liability. THIS ARTICLE SHALL NOT IMPOSE A NEW DUTY ON A STATE INSTITUTION OR MODIFY AN EXISTING DUTY UNDER LAW TO EITHER MONITOR BEHAVIOR OR IDENTIFY CIRCUMSTANCES UNDER WHICH A STUDENT POSES A RISK TO HIMSELF OR HERSELF. A STATE INSTITUTION OR EMPLOYEE OF A STATE INSTITUTION THAT NOTIFIES OR PROVIDES INFORMATION TO A CONTACT PERSON PURSUANT TO THIS ARTICLE SHALL BE IMMUNE FROM SUIT FOR ANY ACT OR OMISSION RELATED TO NOTIFICATION OR DISCLOSURE OF INFORMATION PERTAINING TO A STUDENT WHO HAS SIGNED A CONSENT FORM.

23-20-105. Report - repeal. (1) ON OR BEFORE FEBRUARY 1, 2010, THE COLORADO COMMISSION ON HIGHER EDUCATION SHALL REPORT TO THE EDUCATION COMMITTEES OF THE SENATE AND THE HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, REGARDING THE IMPLEMENTATION OF THE PROVISIONS OF THIS ARTICLE BY THE STATE INSTITUTIONS SELECTED PURSUANT TO SECTION 23-20-103 (1).

(2) THIS ARTICLE IS REPEALED, EFFECTIVE JULY 1, 2010.

SECTION 2. Safety clause. The general assembly hereby finds,

determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Joan Fitz-Gerald
PRESIDENT OF
THE SENATE

Andrew Romanoff
SPEAKER OF THE HOUSE
OF REPRESENTATIVES

Karen Goldman
SECRETARY OF
THE SENATE

Marilyn Eddins
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

APPROVED _____

Bill Owens
GOVERNOR OF THE STATE OF COLORADO

APPENDIX B:
SJR06-013 “CONCERNING THE PROMOTION OF SUICIDE EDUCATION PROGRAMS IN
HIGHER EDUCATION”



SENATE JOINT RESOLUTION 06-013

BY SENATOR(S) Hanna, Bacon, Brophy, Dyer, Entz, Evans, Fitz-Gerald, Gordon, Groff, Grossman, Hagedorn, Isgar, Johnson, Jones, Kester, May R., McElhany, Mitchell, Owen, Sandoval, Shaffer, Spence, Takis, Tapia, Taylor, Teck, Tochtrop, Traylor, Tupa, Veiga, Wiens, Williams, and Windels;

also REPRESENTATIVE(S) Kerr, Balmer, Benefield, Berens, Borodkin, Buescher, Butcher, Cadman, Carroll M., Carroll T., Cerbo, Clapp, Cloer, Coleman, Crane, Curry, Decker, Frangas, Gallegos, Garcia, Gardner, Green, Hall, Harvey, Hefley, Hodge, Hoppe, Jahn, Judd, A., Kerr J., King, Knoedler, Larson, Lindstrom, Liston, Lundberg, Madden, Marshall, Massey, May M., McCluskey, McFadyen, McGihon, McKinley, Merrifield, Paccione, Penry, Plant, Pommer, Ragsdale, Riesberg, Romanoff, Rose, Schultheis, Solano, Soper, Stafford, Stengel, Sullivan, Todd, Vigil, Weissmann, Welker, White, and Witwer.

CONCERNING THE PROMOTION OF SUICIDE EDUCATION PROGRAMS IN HIGHER EDUCATION.

WHEREAS, In 2004, Patrick Thomas McKee, a Colorado resident, as well as the approximately 2,000 other college students in the United States who committed suicide, died too soon, leaving grieving family and friends behind; and

WHEREAS, Over the past 60 years, the overall rate of suicide among adolescents and young adults has tripled, making suicide the third leading cause of death among young people ages 15 to 24 years; and

WHEREAS, The suicide rate peaks among young adults ages 20 to 24 years; and

WHEREAS, Suicide claims as many lives as drugs and alcohol among young people ages 15 to 24 years; and

WHEREAS, Suicide is the second leading cause of death among college students; and

WHEREAS, A 2003 survey conducted by the American College Health Association found that 9.4% of the 16,000 students surveyed had seriously contemplated suicide, and 1.4% of those students had made a suicide attempt; and

WHEREAS, A *USA Today* analysis of the deaths of 620 four-year college and university students since January 1, 2000, found that freshmen are uniquely vulnerable to suicide; and

WHEREAS, Freshmen on college and university campuses are more likely to commit suicide than any other class, and they account for 40% of all undergraduate suicides; and

WHEREAS, Adolescents and young adults often experience stress, confusion, and depression from situations occurring in their families, schools, and communities, and such feelings can overwhelm young people who, as a result, consider suicide to be the only option; and

WHEREAS, The suicide rate is generally twice as high among young adults ages 20 to 24 years as it is among adolescents ages 15 to 19 years, suggesting that additional education and prevention efforts need to be targeted toward the young adults at high risk of suicide; and

WHEREAS, An insufficient number of schools and communities have suicide prevention plans that include screening, referral, and crisis intervention programs for young people; and

WHEREAS, Research has found that the suicide rate drops when certain protective factors are present, including effective clinical care for mental, physical, and substance abuse disorders; easy access to clinical intervention and support; family and community support; skills in problem solving, conflict resolution, and nonviolent handling of disputes; and cultural and religious beliefs that discourage suicide and support self-preservation instincts; and

WHEREAS, Representatives of organizations that work in the suicide

prevention field agree that general suicide education, awareness, and prevention programs strengthen protective factors and thereby reduce the risk of suicide among young people; and

WHEREAS, Suicide education, awareness, and prevention programs are designed to dispel myths and increase knowledge about suicide; promote open, peer-to-peer discussions about suicide and suicidal feelings; provide descriptions of warning signs to young people as well as adults; provide young people with information about mental health resources and how to access those resources; encourage young people to seek help for themselves or their friends; educate young people on alternatives to suicide for solving problems; and develop important protective skills, including listening and interpersonal skills, stress management, and coping skills; now, therefore,

Be It Resolved by the Senate of the Sixty-fifth General Assembly of the State of Colorado, the House of Representatives concurring herein:

(1) That we, the members of the Sixty-fifth General Assembly, encourage each institution of higher education in the state to develop and implement general suicide education, awareness, and prevention programs on campus in order to create environments for students that are rich in protective factors.

(2) That we encourage each institution of higher education in the state to make available to students and parents on campus and electronically through the internet valuable information about suicide awareness and prevention, including the resources available to students and parents on the campus and in the community.

Be It Further Resolved, That copies of this Joint Resolution be sent to Governor Bill Owens, the executive director of the Colorado Commission on Higher Education to be distributed to each institution of higher education in the state, each member of Colorado's delegation to the United States Congress, and Mr. and Mrs. Richard McKee.

Joan Fitz-Gerald
PRESIDENT OF
THE SENATE

Andrew Romanoff
SPEAKER OF THE HOUSE
OF REPRESENTATIVES

Karen Goldman
SECRETARY OF
THE SENATE

Marilyn Eddins
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

APPENDIX C:
ADAMS STATE COLLEGE SUPPLEMENTAL INFORMATION

ASC Mental Health and Suicide Prevention Policy

Guiding Principles

1. Adams State College (“the College”) is committed to the success of all students, including those with depression or other mental health conditions. For the purposes of this policy, “mental health condition” means a mental impairment that substantially limits one or more major life activities qualifying the student for protection under Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, or sections 24-34-301, C.R.S. *et seq.*
2. The College will:
 - Acknowledge but not stigmatize mental health conditions;
 - Make suicide prevention a priority;
 - Encourage students to seek help or treatment that they may need;
 - Ensure that personal information is kept confidential as required by law;
 - Allow students to continue their education as normally as possible by making reasonable accommodations for qualifying students with mental health conditions; and
 - Not tolerate discrimination against students with mental health conditions, including punitive actions toward those in crisis.

Counseling and Mental Health Services

3. Students are encouraged to seek counseling and mental health treatment through campus services or other available avenues.
4. Counseling services and mental health treatment are available to members of the campus community affected by a student’s depression or other mental health condition as well as to the student.
5. Various student groups are available on campus to support students with depression or other mental health conditions.
6. Emergency psychiatric services are available to students at all times through the San Luis Valley Community Mental Health Center.
7. Counseling and mental health treatment provided by the College will be based on the student’s preferences, strengths, and needs.
8. All services are provided on a voluntary basis and it remains the student’s decision whether or not to seek services. In some circumstances, and as the law permits, the College may seek involuntary treatment of the student.
9. The College will refer a student to the Counseling Center¹ when it learns that:
 - The student exhibits academic, behavioral or other difficulties that appear to be due to mental health issues, or
 - The student has made a suicidal gesture or is known to have contemplated suicide.

¹ For convenience the term “Counseling Center” is used throughout to refer to counseling and mental health services provided by or through the College.

10. If a referred student does not seek services through the Counseling Center or another service provider, the Counseling Center will make individualized efforts, including direct outreach, to encourage the student to access services.
11. In the event a student is hospitalized, the Counseling Center, if requested by the student, will work with the student and the hospital as part of the hospital treatment team to, among other things, ensure appropriate aftercare planning.

Confidentiality

12. Counseling and mental health services are confidential. The Counseling Center will not share information about a student with faculty, staff, administrators, or others unless the student consents, except as discussed in paragraph 15 below or as otherwise authorized by law.
13. The student, not the College, is the client of the Counseling Center.
14. As appropriate, the Counseling Center may encourage the student to consent to sharing information with the student's family, or other school or community officials.
15. As permitted by law, the Counseling Center may disclose information about a student to the extent needed to warn or protect the student or others from a serious and imminent threat to safety, for example, by making disclosures to administrators, crisis intervention or emergency personnel.² If a student communicates to a Counseling Center employee a serious threat of imminent physical violence against a specific person or persons, the employee shall adhere to the requirements of section 13-21-117, C.R.S. in taking appropriate action and making disclosures as s/he deems necessary to warn or to protect against the threat and making reasonable and timely efforts to notify any person or persons specifically threatened, as well as notifying an appropriate law enforcement agency.
16. When a student enrolls, and when a student becomes a client of the Counseling Center, the student will be asked to consent, or to formally decline to consent, to a release of information pursuant to a FERPA waiver as related to the Colorado Higher Education Student Suicide Prevention Act, SB 06-067, codified at C.R.S. §§ 23-19.5-101, *et seq.* This statutory provision allows an official from the College to contact the student's designee if officials from the College become concerned about the student's mental health or potential or actual suicidal impulses. This consent will be on file in the Office of Student Affairs. Students will be encouraged to update this information regularly. Additional information on this program is provided in the portion of this policy entitled "Colorado Higher Education Student Suicide Prevention Act".

Accommodations

17. The College will reasonably accommodate students with depression or another mental health condition supported by sufficient documentation, and as required by the Rehabilitation Act of 1973, the Americans with Disabilities Act, sections 24-34-301, C.R.S. *et seq.* and the College's

² See American Counseling Assn, ACA Code of Ethics (2005) B.2.a (The general requirement that counselors keep information confidential does not apply when disclosure is required to protect clients or identified others from serious and foreseeable harm or when legal requirements demand that confidential information must be revealed.); Family Education Rights and Privacy Act (FERPA), 20 U.S.C. 1232g(b)(1)(I), 34 C.F.R. 99.36 (disclosures permitted in emergency to protect health or safety of student or others).

Disability Services Handbook.³ Accommodations will be designed to enable the student to safely remain in school and in College housing, if applicable (see the portion of this policy entitled “Alternative Housing While Enrolled”), and to enable the student to meet academic standards and program requirements.

18. Accommodations may be granted only to the extent that they do not alter or waive essential academic requirements, and to the extent that they do not fundamentally alter the nature of a service, activity or program. The following accommodations are examples of the measures that may be requested under the College Disability Services Policy:
 - Allowing the student to take a reduced course load or complete alternative assignments;
 - Allowing the student to postpone assignments and exams;
 - Allowing the student to work from home or take online courses, if available;
 - Allowing the student to drop courses;
 - Allowing the student to change roommates or rooms;
 - Allowing guests to stay in the student’s room;
 - Withdrawals from courses if academic difficulties are due to documented depression or another mental health condition.⁴
19. Requests for accommodation need not be made in any particular form or in writing. A student will be considered to have requested an accommodation when the student attends an appointment with the Student Disability Coordinator to help the student devise an accommodation. The duties of the Student Disability Coordinator are handled by the Office of Equal Opportunity (“OEO”). The OEO will document any request for accommodation and will seek appropriate documentation of a mental health condition from the student.
20. The OEO will work with the student, Student Support Services, the Testing & Learning Center, the Counseling Center, and/or specific faculty members, as appropriate, to determine an effective and reasonable accommodation.⁵
21. Absences for treatment, including hospitalization, will be considered excused absences upon providing the Office of Student Affairs with acceptable supporting documentation.
22. When a student takes a leave pursuant to this policy, the student may be permitted, for each class in which he/she is enrolled, to withdraw from the class or to postpone assignments and exams, upon providing the Office of Student Affairs with acceptable supporting documentation.⁶
23. The student need not have disclosed his/her condition prior to requesting an accommodation, including a leave of absence. The College will not deny an accommodation on the ground that the student failed to previously disclose his/her condition; however, accommodations will not be made retroactively, but will commence from the time the student requests the accommodation, provides acceptable supporting documentation of the disabling condition, and a determination of a reasonable accommodation is made.

Leaves of Absence

³ The Disability Services Policy is located at www.adams.edu/ada.

⁴ The list is not exhaustive. Other accommodations will also be considered and provided if needed and reasonable.

⁵ Please refer to the College’s Disability Services Policy, located at www.adams.edu/ada.

⁶ This applies to either a voluntary or an involuntary leave. Grades designated as “incomplete” will not be averaged into the student’s GPA as failures for the duration of the designation of the incomplete status.

24. Leaves for mental health reasons, whether voluntary or involuntary, entail a complete absence from the College campus, except for authorized appearances that are a part of the process for evaluating a student's request to return from leave. A student may request a modification of this requirement by providing the Dean of Student Affairs or his/her designee⁷ with written documentation from a treating mental health professional that the student is fit to undertake visits to campus friends and/or meet with teaching, residence, counseling, and administrative staff and/or attend specified campus events and activities. The Dean of Student Affairs, in consultation with the Students of Concern Committee shall determine whether and to what extent to grant such a modification of the standard terms of leave for health reasons.⁸

Voluntary Leave

25. Students are permitted to take voluntary leaves of absence for documented mental health reasons, upon providing appropriate documentation to the Office of Student Affairs. The Office of Student Affairs will provide the student with written authorization for the leave and forward the authorization to the instructors for each class in which the student is enrolled. A student may be granted voluntary leave for mental health conditions as defined by this policy or for other mental health reasons to promote the health and welfare of the student, as approved by the Dean of Student Affairs.
26. If a student so requests, the Counseling Center will help the student decide whether to take a leave of absence and, as appropriate, help the student with the process for securing a leave.

Concerns about a Student's Mental Health

27. Concerns regarding a student's mental health should be brought to the attention of the Dean of Student Affairs. Such concerns may also be brought to the attention of any member of the Students of Concern Committee.⁹ The Dean of Student Affairs shall make such decisions and take such actions in accordance with College policy as s/he deems necessary in light of such concerns. The Dean of Student Affairs may consult with the committee and/or refer such matters to the committee for review. In cases where involuntary leave from the College or required leave from College housing is being considered, responsibility for providing the student with notice and an opportunity to confer in accordance with applicable paragraphs of this policy may be delegated to the committee. At any point in the process of evaluating concerns about a student's mental

⁷ Any reference to the Dean of Student Affairs shall be read to mean the Dean of Student Affairs or his/her designee.

⁸ Extended leaves from the College whether voluntary or involuntary may not result in amelioration of student financial responsibility for previously contracted meal plans and housing.

⁹ For convenience the term "committee" is used throughout to refer to the Students of Concern Committee at the College. The committee's standing membership consists of the Dean of Student Affairs, the Associate Provost for Academic Affairs, an appointed faculty member, the Director of First Year Experience & Engagement, the Director of Auxiliary Services, the Director of the Counseling Center, the Director of Public Safety, the Student Disability Coordinator, and the Director of Student Support Services, though other members may be appointed by the Dean of Student Affairs as the need arises or when a standing member is unavailable. The committee, acting as a body and through its individual members, assists in identifying students of concern, identifying intervention and/or referral options for such students, and making recommendations for treatment and/or actions to the Dean of Student Affairs or other campus officials, as appropriate, toward the ultimate goal of student health, safety, success, and retention. The committee, under the direction of the Dean of Student Affairs, is the College's mechanism for gathering and evaluating information about disturbing behavior and threat assessment. It is not a decision-making body. Its activities are not disciplinary but rather, are intended to assist College administrators to make decisions that protect the safety and welfare of the student who is the subject of concern and the campus community.

health, the Dean of Student Affairs, or such other administrators as appropriate, may seek the committee members' assistance in making decisions and determining actions appropriate to the circumstances.

Involuntary Leave

28. In circumstances where evidence suggests a likelihood that a student is engaging in or is likely to engage in behavior which poses a high probability of causing substantial harm to him/herself, to another, or which renders the student unable to meet academic standards or program requirements, and it appears that the risk cannot be eliminated or reduced to an acceptable level through accommodations, pursuant to this policy, the College may impose an involuntary leave of absence after conducting an individualized assessment of the student.
29. The Dean of Student Affairs will make a determination on involuntary leave, or such other actions as s/he deems necessary.
30. A determination on involuntary leave shall:
 - Consider whether there are reasonable accommodations that would allow the student to meet academic standards and program requirements and remain safely in school, and
 - Consider the nature, duration, and severity of any risk, the probability that injury will actually occur, and whether reasonable accommodations can sufficiently mitigate the risk.
31. Before being placed on involuntary leave, whenever possible, the student shall:
 - Be notified in writing that the involuntary leave is being considered and the basis for the belief that the student may need to be placed on involuntary leave,
 - Be provided with the opportunity to confer with the Dean of Student Affairs or the committee and to provide relevant information. If conducted by the Dean of Student Affairs, the conference may include such members of the committee as he/she deems appropriate to act in an advisory capacity to the Dean. The student may be accompanied by a representative and/or his/her treating mental health professional, and
 - Be referred for a mandatory mental health evaluation by the San Luis Valley Community Mental Health Center, at the College's expense. The evaluation must be completed within five business days from the date of the referral unless an extension is granted by the Dean of Student Affairs. A student who fails to complete the evaluation in accordance with this policy and/or who fails to give permission for the results to be shared with appropriate administrators of the College may be placed on an interim involuntary leave pursuant to further consideration of the duration and/or permanency of leave. If circumstances warrant an emergency interim leave, the student may be placed on emergency interim leave while the mandatory mental health evaluation and report is being completed, delivered, and considered by the Dean of Student Affairs (see the portion of this policy entitled "Emergency Interim Leave"). Students may also seek their own mental health evaluation, at their own expense, and give permission for the results to be shared with appropriate administrators of the College if they choose.
32. Consideration of involuntary leave may involve inquiry into a student's current condition, including requesting recent mental health information and records, but the inquiry must be confined to information and records necessary to make a determination and may not require unlimited access to confidential information or records.

33. Involuntary leave may also include a requirement restricting the student's interactions with the campus community during the period of the leave as appropriate to the circumstances. Such restrictions may include limits on the student's communications with faculty, staff, or other students and on the student's access to the campus, for example, to visit friends or attend campus events.
34. Prior to making a decision on involuntary leave, the Dean of Student Affairs may refer the matter to the committee for assistance in making his/her decision. The Dean of Student Affairs may request a written report of the committee's recommendation, which shall include any necessary factual determinations and the relevant factors that form the basis of its recommendation. It is not the role of the committee to assess the mental health of the student.
35. The student may appeal the decision of the Dean of Student Affairs to the Provost.
36. The same arrangements for refunds of tuition or other costs will be available to a student who takes a leave of absence for mental health reasons, whether voluntary or involuntary, as are available for a student who takes a leave of absence for physical health reasons.

Returning from Leave

37. A student on leave from the College or College housing pursuant to this policy, whether voluntary or involuntary, may request at any time to return to the College as a student and/or return to College housing.
38. The College may require the student to provide sufficient, acceptable documentation to the Dean of Students indicating that the student is fit to return to the academic environment and/or to College housing, as appropriate, and stating accommodations, if any, deemed to be necessary for a safe return. When indicated, the College may seek a second opinion from a health professional selected by the College.
39. This documentation should incorporate the reasonable medical judgment of the mental health professional in relying on the most current medical knowledge or the best available objective evidence that the student's unconditional return to the College and/or College housing will not create a high probability that the student will cause substantial harm to him/herself or another, or alternatively, that such risk can be eliminated or reduced to an acceptable level through a return with accommodations and the recommended duration of such accommodations. If accommodations are recommended, the committee will review the possible accommodations in consultation with the OEO to determine their reasonableness. This opinion should also include any recommended course of treatment and/or medication prescribed and the recommended duration of such steps.
40. Based on an individualized assessment of the student, a student's return may be conditioned on the student's commitment to continue a recommended course of treatment and/or medication for a specified time. If a student fails to follow through on any part of this commitment, involuntary leave or required leave from College housing may be reinstated.
41. In evaluating a student's request to return from an involuntary leave or required leave from College housing, the final decision will be made by the Dean of Student Affairs or the Director of Auxiliary Services, as appropriate. A student's request to return will be denied only if the Dean of Students/Director of Auxiliary Services finds that the student will not be able, upon return, to

safely be at school or in College housing and meet academic or housing standards and program requirements even with reasonable accommodations.

42. A student who desires to return to school or College housing after taking a leave of absence for mental health reasons will not be subject to more rigorous standards or procedures than a student who desires to return to school after taking a leave for physical health reasons.

Emergency Interim Leave

43. If, for reasons that appear to pertain to mental health, a student's behavior poses an immediate and direct threat to him/herself or others, the Dean of Student Affairs may place the student on emergency interim leave or restrict the student's access to the College campus, College housing, services, and activities, as appropriate, for an interim period before final determination of the matter.
44. The Dean of Student Affairs will attempt to meet with the student and confer with the student's mental health care provider before deciding on emergency interim leave or restricted access. If the student does not have a mental health care provider, the College may require that the student take emergency interim leave until such time as the student consults with a mental health care provider and the mental health care provider confers with the Dean of Student Affairs in determining whether the student presents a direct threat to self or others.
45. Emergency interim leave or restricted access will remain in effect until a final decision on leave is made or until the Dean of Student Affairs determines that the reasons for imposing the emergency interim leave no longer exist.

Alternative Housing While Enrolled

46. In the circumstance that a student does not meet the standard for imposition of involuntary leave from the College but cannot safely remain in College housing and meet the essential requirements for participation in the College's housing program, even with reasonable accommodations, the College may require the student to take required leave from College housing and live in housing other than College housing while enrolled. Authorized non-student residents in College housing may also be required to find alternative housing in accordance with this policy.
47. Required leave from College housing may be imposed if, after an individualized evaluation of the available information, it is determined that there is a high probability that the student will cause substantial harm to him/herself or another, and that the risk cannot be eliminated or reduced to an acceptable level through reasonable accommodations.
48. The Director of Auxiliary Services will make a determination on required leave from College housing, or such other accommodations or actions as s/he deems necessary.
49. In determining whether to impose required leave from College housing, the Director of Auxiliary Services shall:
 - Consider whether there are reasonable accommodations that would allow the student to meet housing standards and program requirements and remain safely in College housing, and
 - Consider the nature and severity of any risk, the probability that injury will actually occur, and whether reasonable accommodations can sufficiently mitigate the risk.

50. Before being required to leave College housing, whenever possible, the student shall:
 - Be notified in writing that required leave from College housing is being considered and the basis for the belief that the student may need to leave College housing, and
 - Be provided with the opportunity to confer with the Director of Auxiliary Services or the committee and provide relevant information. If conducted by the Director of Auxiliary Services, the conference may include such members of the committee as he/she deems appropriate to act in an advisory capacity to the Director of Auxiliary Services. The student may be accompanied by a representative and/or his/her treating mental health professional.
51. Consideration of required leave from College housing may involve inquiry into a student's current condition, including requesting recent mental health information and records, but the inquiry must be confined to information and records necessary to make a determination and may not require unlimited access to confidential information or records.
52. Required leave from College housing may also include a requirement that restricts the student from entering College housing – for example, to visit friends – as needed to prevent a significant risk that the student will harm him/herself or others.
53. A student required to leave College housing may continue to attend classes, extracurricular activities and campus events; maintain normal contact with teaching, administrative and other staff; and otherwise visit friends on campus subject to any restrictions on entering College housing.
54. Prior to making a decision on required leave from College housing, the Director of Auxiliary Services may refer the matter to the committee for assistance in making his/her decision. The Director of Auxiliary Services may request a written report of the committee's recommendation, which shall include any necessary factual determinations and the relevant factors that form the basis of its recommendation. It is not the role of the committee to assess the mental health of the student.
55. The student may appeal the decision of the Director of Auxiliary Services to the Dean of Student Affairs.

Disciplinary Action

56. Disciplinary action will not be used as a pretext for discrimination.
57. The College does not bring disciplinary action against a student for suicide attempts, suicidal thoughts, or self-injury, including self-cutting.
58. A voluntary or involuntary leave pursuant to this policy is not considered a disciplinary action, though a prior voluntary or involuntary leave pursuant to this policy may be considered in subsequent disciplinary hearings involving the student.
59. Disciplinary charges against a student for conduct which is separately being considered will be entitled to have such disciplinary action stayed as outlined below:
 - If the student takes a voluntary leave for mental health reasons under this policy, disciplinary proceedings will be stayed until the student returns.

- If the College is considering whether to require the student to take an involuntary leave or to leave College housing pursuant to this policy, disciplinary proceedings will be stayed while the decision is being made.
 - If a student is placed on involuntary leave, the stay will continue until the student returns unless the student violates the terms of the involuntary leave.
 - If the student is required to leave College housing pursuant to this policy, the stay will continue until that restriction is lifted unless the student violates the terms of the required leave from College housing.
60. Students with mental health conditions will be held accountable for compliance with the Code of Conduct and all other College policies, even when any violations of said Code or policies do not rise to the level of a direct threat to him/herself or to another. In appropriate circumstances, the Dean of Student Affairs may decide to forego disciplinary action in favor of other actions designed to achieve acceptable behavior, or may recommend mitigated disciplinary sanctions when s/he determines that the offense was the product of depression or other mental health condition in the same manner that the Dean of Student Affairs may consider mitigating factors or take extenuating circumstances into account for students without mental health conditions. This is especially true when, as a result of treatment or other interventions, the student is likely to comply with the Code of Conduct and other College policies in the future.

Colorado Higher Education Student Suicide Prevention Act

61. In accordance with the Family Educational Rights and Privacy Act of 1974, and Colorado Senate Bill 06-067 (Colorado Higher Education Student Suicide Prevention Act – codified at C.R.S. §§ 23-19.5-101, *et seq.*), the College maintains voluntary consent forms from students authorizing the College to contact the specified individual(s) in the event that a designated College official has a reasonable belief that the student is considering suicide or may be a danger to himself or herself.
62. Consent forms will be disseminated and collected from all incoming transfer and first year students with the student vaccination records. Forms will also be completed at official check-in to the residence halls and intake to the Counseling Center as well as required at the advent of athletic seasons for student athletes. Forms will also be completed at various times in the Student Union Building. Specific students will be contacted via mail/email to ensure that forms are collected from all ASC students.
63. Consent forms are maintained in the Student Affairs office. Consent form information is entered into a database on a shared drive accessible by the Dean of Student Affairs, the Associate Provost for Academic Affairs, the Director of the Counseling Center, and the Director of Auxiliary Services.
64. Anyone in the College community with serious concerns about the health and safety of a student is encouraged to bring such information to the attention of the Dean of Student Affairs. The Dean of Student Affairs, the Associate Provost for Academic Affairs, the Director of the Counseling Center, and the Director of Auxiliary Services are empowered to decide that notification will be made and to make the notification. Once the decision has been made to use notification, the notification may be carried out by a designee. Decisions to use notification must be documented. Certain offices, such as the Counseling Center, which practice under separate legal, professional, and ethical standards, make such notifications within the scope of their relevant clinical and legal standards of care. Notifications will be made by phone or by the means specified on the individual students' consent forms.

**Policy on Student Consent for the Release of Information
(Excerpted from the ASC Mental Health & Suicide Prevention Policy)**

SB06-067 Colorado Higher Education Student Suicide Prevention Act

51. In accordance with the Family Educational Rights and Privacy Act of 1974, and Colorado Senate Bill 06-067 (Colorado Higher Education Student Suicide Prevention Act), Adams State College maintains voluntary consent forms from ASC Students authorizing ASC to contact the specified individual(s) in the event that a designated ASC official has a reasonable belief that the student is considering suicide or may be a danger to himself or herself.
52. Consent forms will be disseminated and collected from all incoming transfer and first year students with the student vaccination records. Forms will also be completed at official check-in to the residence halls and intake to the Counseling & Career Center as well as required at the advent of athletic seasons for student athletes. Forms will also be completed at various times in the Student Union Building. Specific students will be contacted via mail/email to ensure that forms are collected from all ASC students. Students who do not complete the form may have a hold placed on their registration until the student reports to Student Affairs and completes the form.
53. Consent forms are maintained in the Student Affairs office. Consent form information is entered into a database on a shared drive accessible by the Dean of Students, the Associate Provost, the Director of the Counseling & Career Center, and the Director of Auxiliary Services & Housing.
54. It is expected that anyone in the College community with serious concerns about the health and safety of a student brings such information to the attention of the Dean of Students. Therefore, the Dean of Students is made aware of when the notification procedure is used and documentation is recorded regarding the reasons the notification procedure was used. The Dean of Students, the Associate Provost, the Director of the Counseling & Career Center, and the Director of Auxiliary Services & Housing are empowered to decide that notification will be made and to make the notification. Once the decision has been made to use notification, the notification may be carried out by a designee. Decisions to use notification must be documented. Certain offices, such as the Counseling & Career Center, which practice under separate legal, professional, and ethical standards, make such notifications within the scope of their relevant clinical and legal standards of care. For example, most notifications made by the Counseling & Career Center would remain internal to those offices and not be brought to the attention of Student Affairs. Notifications will be made by phone or by the means specified on the individual students' consent forms.

Students of Concern Committee

Purpose & Guiding Principles (revised 9/19/07)

Purpose: The purpose of the Students of Concern Committee (hereafter referred to as “the committee”) is to proactively identify Adams State College students of concern, to identify treatment and/or referral options for the student, to make recommendations for treatment and/or actions to the Dean of Students or other campus official as appropriate, toward the ultimate goal of student health, safety, success, and retention.

Guiding Principles: The committee reviews student behavioral situations where the student’s behavior exhibits academic, behavioral, or other difficulties that appear to be due to depression or another mental health condition, or situations where the student has made a suicidal or is known to have contemplated suicide gesture (i.e., written about suicide in a paper, made a suicide attempt, discussed suicide with a friend or RA). The committee identifies treatment options or appropriate institutional response and makes recommendations to the Dean of Students or other appropriate campus official.

The committee makes recommendations to the Dean of Students or other appropriate campus official on student behavior issues with implications around voluntary or involuntary leaves and alternative housing while enrolled (see also the ASC Mental Health & Suicide Prevention Policy). The committee conducts student notifications and obtains student input as outlined in the ASC Mental Health & Suicide Prevention Policy.

- Definitions & Procedures:**
- 1. Confidentiality:** The committee adheres to the Family Educational Rights and Privacy Act of 1974 (FERPA) which makes it illegal to disclose a student’s records to family members or other individuals outside the college without the student’s authorization except in certain situations. Various committee members are bound by additional confidentiality requirements such as the Director of the Counseling Center, the Director of Public Safety, and any campus member bringing information to the committee who has promised confidentiality to another individual.
 - 2. Composition:** The committee is composed of the following members: The Dean of Students (co-chair), the Associate Provost (co-chair), a faculty member (one year renewable term), the Director of First Year Experience & Engagement, the Director of Auxiliary Services, the Director of the Counseling Center, the Director of Public Safety, and the Director of Student Support Services.
 - 3. Meetings:** The committee meets every two weeks throughout the fall and spring semesters. The committee meets on an abbreviated schedule in the summer semester and during academic breaks. Meetings will be for a duration of one hour. Additional meetings will be scheduled as needed.
 - 4. Emergency Meetings:** Behavioral emergencies may require the committee to develop recommendations outside the regular meeting schedule. Attempts will be made to contact all committee members with the details of the emergency and to establish a consensus on what recommendation should be made in response to

the emergency. The co-chairs or their designees will coordinate this emergency communication.

- 5. Documentation & Follow-up:** Each student discussed in a committee meeting is logged in a database as an “open” case. The committee will determine follow-up actions and responsible committee members. The case will remain “open” until such time as the committee agrees that the appropriate institutional response has been taken and the student is no longer a concern at which time the case will be “closed.” The committee will review each “open” case during each regular meeting.
- 6.** The committee works in support of and in conjunction with the academic early alert system. As early indications of academic struggle may be an indication of a present or future behavioral problem, the Director of First Year Experience & Engagement will escalate early-alerted students to the committee when the student’s struggles warrant discussion.
- 7.** The committee is an avenue for faculty, staff, and students to communicate concerns regarding a student’s behavior with the assurance that each instance will be discussed and the appropriate institutional response taken. Concerns can be communicated to any standing member of the committee. In extraordinary circumstances, concerns can be communicated directly to the committee by attendance at a regularly scheduled meeting. Information regarding the committee, the committee’s purpose, and the committee’s composition will be regularly communicated to students, faculty, and staff.
- 8.** The committee is not a decision making body but rather makes recommendations to the Dean of Students or other appropriate campus official. Nevertheless, students retain appeal rights as detailed in the Student Handbook regarding any decisions made on recommendation by the committee.

APPENDIX D:
NORTHEASTERN JUNIOR COLLEGE SUPPLEMENTAL INFORMATION



Office of the President of Student Services
100 College Avenue
Sterling CO 80751
(Office) 970-521-6673
(Fax) 970-521-6818
email: judy.giacomini@njc.edu
www.njc.edu

Dear NJC Student:

Northeastern Junior College is one of the Colorado colleges that were selected by the Colorado Commission on Higher Education to participate in a two year pilot project, initiated by our state legislature. The purpose of this initiative is to encourage students to **voluntarily** grant authorization that a designated family member would be contacted should they become at risk for harming self.

Signing the form will just give the college a direct contact should we need to communicate with the student's family. Signing the form does not in anyway indicate that you are at risk.

At NJC, we have a campus community that looks out for and cares for each other. We make every effort to create a network of supportive relationships and service for all of our students. Please know that this pilot project supports that caring environment.

Do not hesitate to give me a call, if I can answer any questions you might have.

Sincerely,

Judy Giacomini
Vice President of Student Services

Northeastern Junior College Suicide Notification Procedures September 2008

In accordance with the Colorado Higher Education Student Suicide Prevention Act, Colorado Revised Statutes 23-20-101 through 105, these procedures on the Northeastern Junior College campus are being implemented as part of the two year pilot project.

1. All students will receive this notification and an opportunity to voluntarily file an authorization form. The form (back side of this information sheet) gives the College designated authority (Vice President of Student Services) permission to notify the identified contact person and gives consent to release information should said student give the College reasonable belief that they are at risk for harming self.
2. Each semester the college will include the procedures and form to each student via the early billing notice mailing.
3. Completed and signed release of information consent form must be submitted via mail or hand carry to:

**Vice President of Student Services Office
Northeastern Junior College
Hays Student Center #116
100 College Avenue
Sterling, CO 80751**

This office will keep and track the authorization forms in a confidential file. These will be held during active status of the student. Should the student revoke their consent, forms will be properly disposed of. The Vice President of Student Services and the Student Services Administrative Assistant will have access to the consent form. The Vice President of Student Services will take responsibility to notify the contact person designated on the consent form through a telephone call and follow up letter should the situation warrant it.

4. The campus procedure for suicide threat response, prevention and notification can be found in the NJC Student Handbook, Section 3.31 on the NJC web at http://www.njc.edu/publications/files/student_handbook.pdf
To receive a hard copy of this document, please call 521-6608.

If you have questions, please contact:
Judy Giacomini, Vice President of Student Services
Northeastern Junior College
970-521-6673
Judy.giacomini@njc.edu

Authorization to Notify Contact Person and Consent to Release of Information

Colorado Higher Education Student Suicide Prevention Act,
Colorado Revised Statutes §§ 23-20-101 through 105

I, _____, authorize Northeastern Junior College (the “College”) to contact the person designated below in the event that the College has a reasonable belief that I am considering suicide or may be a danger to myself.

I consent to the release of only such otherwise confidential information that is directly related to the reasonable belief that I am considering suicide or that I may be a danger to myself, and only such information as is minimally necessary to convey to my designated contact person the grounds for this reasonable belief.

I understand that:

- a. I have certain privacy rights under federal and state law that may otherwise prevent school employees from sharing information about me without my consent
- b. If I do not sign this consent at this time, I may request the opportunity to do so later.
- c. I may change my designated contact person at any time.
- d. I may revoke my consent at any time.
- e. That participation in this program is voluntary.

DESIGNATED CONTACT:

Name	Relationship to Student
Street Address	Primary Telephone Number
City, State, Zip	Alternate Telephone Number

Student’s Name – please print

Student’s Signature

Date

Northeastern Junior College CARE Team Referral Form

What is the CARE Team? The CARE Team is a coordinating group of student services staff and instructional faculty and staff who assist "individuals of concern" with accessing the appropriate campus resources in an effort to assist them with meeting their educational goals at Northeastern Junior College.

Who are "individuals of concern"? An individual of concern is any individual who demonstrates disruptive behavior, personal difficulties, mental and/or emotional instability, or otherwise causes another member of the campus community to feel distress.

How does it work? Individuals of concern are referred to the CARE Team whose goal is to develop a holistic intervention strategy and action plan designed to specifically address their unique needs.

Why refer? The CARE Team can provide additional resources and individualized help to those who are experiencing difficulties. This support is beneficial to both the individual and the campus community.

How do I make a referral? Simply complete this referral form and send it to the CARE Team via email at CARE@njc.edu or through intercampus mail to CARE Team: Vice President for Student Services Office ; or call the CARE extension (x6673) on campus to leave a message so that the CARE team can contact you.

All referral information is confidential.

Individual of Concern's Name: _____

Date: _____

Individual of Concern's Contact Information:

Please provide any information you might have that will assist the CARE Team to initiate contact. Thank you.

Date and Location of Incident: *(if applicable)* _____

Name of Person Making Referral: _____

Telephone: _____ Department: _____

May we use your name in contacting the individual? Yes _____ No _____

Do you want us contact you after we've established an intervention strategy? Yes _____ No _____

Please describe the specific nature of your concerns. (Include relevant factual or behavioral observations in sequential order.) *Please write legibly. Thank you.*

Return this completed CARE Team Referral Form to:

NJCCARE@njc.edu • CARE Team: Student Services HSC 1116 • CARE Line (X6673) on campus