MINUTES
September 25, 2007


Guests: Nelson Roth, University Counsel’s Office; Joe Martin, Director Knight Writing Institute; Daniel Rodriquez, substitute EARS rep; Mary Beth Grant, Judicial Administrator; Kathy Zoner, Captain of Cornell Police, Molly Hite, Chair of English department

Upcoming meetings:
Wednesday October 24, 2007 3:30–5:00 p.m. Willard Straight Hall, 5th floor lounge
Wednesday February 13, 2008 3:30–5:00 p.m. Willard Straight Hall, 5th floor lounge
Wednesday April 9, 2008 3:30–5:00 p.m. Willard Straight Hall, 5th floor lounge

I. Post Virginia Tech tragedy strategies: non-mental health
   A. Communication at all levels is crucial to timely and appropriate management of a situation.
      1. The flow of communications in emergency and non-emergency but urgent situations must be scrutinized and optimized.
      2. There is now a dedicated, full time position in the Division of University Communications (filled by Linda Grace-Kobas) to address emergency communications.
      3. Pandemic and overall emergency planning is ongoing, with leadership by senior administrators.
   
   B. Guns and campus policies
      1. At Cornell University we have a “no weapons” on campus policy. (Students who hunt may register and store their hunting weapons with CU police.)

   C. Family Assistance Center
      1. At CU, the Crisis Managers, Community Support Meetings and the Community Consultation and Intervention services provide assistance to students, staff and faculty before, during and after a crisis or urgent situation.
      2. These services deal with individuals and small groups, but do not necessarily have the capacity to handle large numbers of people all at the same time.
      3. Tanni Hall, Associate Dean of Students, will convene a group to think about how we could provide assistance for larger scale situations. This group will then make a recommendation to the university’s Committee on Campus Health and Safety.

   D. Classroom safety
      1. Discussion on this issue must include faculty, as well as facilities staff and campus police.

II. Selected Mental Health Recommendations from the Virginia Tech Review Panel
   Communication with parents is a theme that emerged throughout the report.

   A. A system that links troubled students to appropriate medical and counseling services
      1. CU mental health framework outlines the strategies in place to support students in various categories of risk and distress.
B. Gatekeeper education for all community members
   1. We have many initiatives addressing this recommendation. The October meeting of this council will begin a focus on our Gatekeeper education efforts.

C. Allocation of resources in order to provide culturally competent (in accordance with APA guidelines) services
   1. Our Community Based Services team was named by the Teagle Foundation Report as a “Best Practice” for support and retention of under-represented minorities in a university setting. The CBS team provides the “Let’s Talk” free, walk-in support and consultation hours at ten locations across campus, Monday-Friday.
   2. Our Community Consultation and Intervention service has two dedicated, full-time counselors. They provide support and guidance to faculty and staff who are concerned about a student in distress.

D. Policies related to reporting of “aberrant, dangerous, or threatening” behavior
   1. Our mental health policy workgroup makes best practice and policy recommendations to Michelle Moody-Adams and the Associate Deans group based on identified gaps in the student safety net within the academic units.
      a. This workgroup began meeting about a year ago and is composed of: Tim Marchell (chair), Director of Mental Health Initiatives; Kent Hubbell, Dean of Students; Alan Mathios, Interim Dean of the College of Human Ecology; Don Viands, Associate Dean CALS; Greg Eells, Director CAPS; Rich Robbins, Director College of Engineering Advising; Joe Burke, Director Residential Programs, and Catherine Thrasher-Carroll, Mental Health Promotion Coordinator.
      b. Current areas of focus include:
         • Early identification and support for students who are not registered by week 6 in the semester.
            (i) Email request to faculty from college/school dean asking for names of students with high absenteeism, poor academic performance or concerning behavior.
            (ii) Contacting student and setting up meeting with advising to assess student’s situation.
            (iii) Parental notification of non-registration of student.
         • Best practices websites for:
            (i) associate deans
            (ii) advising staff
   2. The Alert Team was established 3 years ago to bring together representatives from key groups across campus that have the ability to notice early warning signs of a student in trouble. Information shared among team members in order to determine how best to support the student is kept confidential.
      a. When a student name is brought forward to the team, known information about the situation is shared, the team discusses how best to support the student and a plan is formulated. A case manager is identified from within the team, to insure follow-up with the plan.
      b. This team is coordinated by Tanni Hall, with representation from the Judicial Administrator’s Office, Cornell Police, Counseling and Psychological Services, Community Consultation and Intervention Services, Dean of Students Office, and Residential Programs at the weekly meetings.
      c. Additionally, representatives from the Graduate School, Office of Minority Affairs, Fraternity and Sorority Affairs, and other support offices/departments on campus are asked to attend on an as-needed basis.
      d. Figuring out a systematic connection with the individual colleges is in progress.
   3. Threat Assessment Team
      a. Our Alert Team fulfills some of the function of this, as outlined in the recommendations.
      b. Gannett’s depression screening with primary care medical patients provides potential early identification of distress and referral to many levels of support and care.
      c. Discussion about a formal Threat Assessment Team will need to continue, in many different workgroups.

III. Susan Murphy question to students in attendance: “Do students know the signs of distress, what to say/do and where to refer a troubled peer?”
   A. Undergrad student representatives shared that groups such as EARS and Cornell Minds Matter have this knowledge, as do residential programs student staff.
   B. A graduate student representative said there isn’t awareness among the grad population of any place to learn the signs and what to do.
C. Graduate students who are new TAs in the Knight Writing Institute’s First Year Seminars receive a brief overview of signs of distress and where to refer students, presented by a CAPS therapist.
1. It is difficult for instructors to feel responsible for assessing students’ mental health functioning.
2. In the first year seminars, students are writing academic essays, which do not encourage the sharing of one’s emotional state. However, if something unusual does present itself, the instructor would call the director of the Knight Institute.

IV. Questions regarding privacy guidelines and sharing of information
A. Clarification about the sharing of information and FERPA (Family Educational Rights and Privacy Act) is necessary.
1. There has been a protocol change to the university’s interpretation of FERPA.
   a. Assumption that all undergrads are tax dependents unless otherwise communicated.
   b. Parents of tax dependent students (undergrads) can be communicated with without a waiver from the student.
   c. Conversations are underway regarding a policy for communication with parents of graduate students.
   d. The Dean of Students, Advising Deans, the Vice President for Student and Academic Affairs, faculty or staff members can talk with parents about concerning behavior.
2. FERPA restrictions apply to written records, not to communication about observed behavior.
3. Staff and faculty members may share with others in the university concerns about behavior because of an “educational interest” in the student.
4. Concern about a student’s health, welfare or safety necessitates communication.
5. HIPAA (Health Insurance Portability and Accountability Act) applies only to Gannett Health Services employees.

B. Communicating “aberrant, dangerous, threatening” behavior; what exactly is that?
1. This feels ambiguous, especially for faculty.
   a. There is a need for faculty to have conversations about “what” and “when” to report concerning behavior.
   b. Almost all of the College of Engineering faculty departments have received the Faculty Mental Health Outreach Presentation. As a result, the advising office is getting more calls from faculty regarding concerning behavior. Additionally, faculty members have reported that they sometimes notice warning signs early enough so that they can manage a student/situation on their own, before it becomes urgent.
2. Sometimes it seems as though we are communicating well, but then what?
   a. The Alert Team, the CCI service, the Crisis Managers all do case management and follow up as much as possible.
      * Communication with one or more of these groups is a good way to ensure follow-up.
   b. If we were to create a formal Threat Assessment Team, that would be another group to do follow-up.
3. For a graduate student, “aberrant, dangerous or threatening” behavior might look different than for an undergrad.
   a. Grad student life is one of constant stress and having to perform.
   b. The culture is one of individual accomplishment and autonomy, which makes it very hard to admit the need for help.
   c. Perseverance against all odds is the expectation.
   d. Teaching grad students to recognize the signs of stress and distress within themselves, what they can do and who they can turn to for assistance without judgment seems critical to providing them support.
   e. The grad school is currently working with the Center for Learning and Teaching to fill a new position for a TA Trainer. Increased confidence in teaching ability can help decrease grad student stress.
   f. A program on the concept of “balance” for grad students, presented by Gannett Health Promotion staff was proposed.

C. Additional themes
1. All students need to be educated on signs/symptoms of stress, distress, and mental illness and resources.
   a. The Dean of Students Office for Student Support provides student education through workshops and programs presented by Cornell Minds Matter and EARS (Empathy, Assistance and Referral Services) students.
   b. Gannett Health Services and DOS collaborate to provide education and training for Residential Programs student and professional staff.
2. To improve organizational communication, it was suggested that the Research Deans meet regularly, as do the Associate Deans for each of the colleges.
3. Stigma issues still exist around mental health/mental illness.
   a. Need to increase messages like, “Sometimes, everybody needs help…”
b. A statement like, “If you have a disability or are having difficulties of some kind, come and talk with me. You will not be penalized for seeking help.” on the top of course syllabuses could help decrease stigma.

4. One faculty member shared the opinion that all faculty members need more of the kind of education and training the residential programs staff get.

D. Closing comments
   1. The next meeting of the council, October 24th will focus on gatekeeper education and training.
   2. The Judicial Administrator and the Cornell Police will be thinking through what the creation of a formal Threat Assessment Team will involve and mean.
   3. The Mental Health Policy Group will continue to look at systems that support students in distress.
   4. Further ideas and thoughts on today’s discussion should be directed to Catherine Thrasher-Carroll at ct265@cornell.edu.

Minutes taken by Catherine Thrasher-Carroll