



**Mental Health Task Force**  
Initial Findings and Recommendation Report  
May 2019

## **PURPOSE AND SUMMARY**

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Provost Sarah Mangelsdorf and Vice Chancellor for Student Affairs Lori Reesor commissioned the Mental Health Task Force in response to the numerous concerns heard from students, faculty, and staff about the wellbeing of our students and how their needs were being met. Specifically, many student concerns related to wait times for mental health services, the need for more diversity among counselors, and a request to hire additional mental health providers beyond an original proposal submitted by University Health Services (UHS) during their annual budget request to the Student Services Finance Committee (SSFC) of Associated Students of Madison (ASM).

### Initial Charge:

With the increase in acuity of mental health concerns and increased utilization of services by undergraduate and graduate/professional students, there is a growing need for relevant, sustainable, and accessible mental health services. This ad hoc task force has been asked to (1) review mental health resources and related supports on campus including current services, prevention programming, and campus tools, and (2) provide recommendations for a comprehensive, multi-faceted approach to address the mental health needs of our students, including prevention efforts, resiliency training, treatment services, and capacity building in students, faculty and staff.

Chancellor Blank requested an initial report in May. Due to the short timeframe, the task force was charged with responding to student requests for increased capacity of mental health services for all students. In addition, they were charged with reviewing the need to: acquire additional physical space; extend appointment times to nights and weekends; increase campus awareness and better identify at-risk students; and expand and develop supplementary programs.

This document summarizes the work of the task force through the end of April 2019. While the time frame for preparing information for this document was limited, six task force meetings were held, and members were very engaged in the meetings.

## **OVERVIEW OF THE TASK FORCE**

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Task force members included:

- Gina Bryan, DNP, RN, Clinical Professor, Psychiatric Mental Health Certificate Coordinator, School of Nursing
- Valerie Donovan, MS, Suicide Prevention & Mental Health Promotion Coordinator, UHS
- Laura Downer, Legislative Affairs Chair, Associated Students of Madison
- Christina Frank, MS, Personal and Wellness Support Services, School of Veterinary Medicine
- Diane Gooding, PhD, Professor of Psychology & Psychiatry
- Stephanie Graham, PhD, Clinical Associate Professor & Director, Counseling Psychology Training Clinic
- Marlena Holden, MA, Interim Director of Marketing & Prevention Services, UHS
- Tiffany Jones, graduate student in counseling psychology
- Charlotte Ladd, MD, PhD, Medical Director of Ambulatory Services and Clinical Associate Professor of Psychiatry
- Andrea Lawson, LCSW, Interim Director of Mental Health Services, UHS
- Lisa Martin, PhD, Associate Dean, Graduate School
- Manasi Mohan, Health Care Advisory Committee student representative
- Amanda Ngola, MSW, LCSW, Clinical Assistant Professor, School of Social Work
- Madeline Noreika, student president, National Alliance on Mental Illness, UW–Madison
- Lori Reesor, PhD, Vice Chancellor for Student Affairs
- Tony Utrie, Case Manager, Dean of Students Office
- Billy Welsh, Chair, Associated Students of Madison

Additional information was obtained from subject matter experts:

- Linnea Burk, PhD and Christopher Gioia, PhD, Psychology Research Training Center
- Hannah Delong, APNP, Psychiatry, UHS
- Jim Keck, PhD, Professor and Associate Dean for Basic Sciences, Biomolecular Chemistry

## **MENTAL HEALTH SERVICES AVAILABLE AT UW-MADISON**

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The task force spent much of its initial time reviewing services available on campus through a variety of clinics, so we could understand the baseline of our services and identify strengths, concerns, gaps, and opportunities. The following information is a highlight of campus mental health services.

### **1. University Health Services (UHS)**

<https://www.uhs.wisc.edu/mental-health/>

UHS is the UW-Madison student health center. UHS was recognized by the Princeton Review as the best college health service in the United States in 2016, 2017, and 2018. Mental Health Services are available in English, Spanish, and Mandarin. UHS is fully accredited by the [Accreditation Association for Ambulatory Health Care](#) (AAAHC).

UHS holds a strong commitment to the diverse UW-Madison community and promoting social justice. Its [Diversity and Inclusion](#) statement affirms this commitment. Its experienced staff is committed to understanding and respecting every individual who comes through the doors.

Mental Health Services counselors primarily provide brief treatment with students to attend to developmental, identity-related, and mental health concerns of students. Most students attend between 1 and 4 sessions to address their concerns. For students whose needs would best be addressed through specialized, longer-term, or open-ended services a community referral may be recommended, and care managers will help to complete the connection to services.

#### **Fees**

All enrolled UW-Madison students may access services at no cost. Cost of services are covered by student tuition and fees. UHS does not accept or bill insurance.

#### **Hours**

UHS Mental Health Services is open Monday, Tuesday, Wednesday, and Friday from 8:30 a.m. to 5 p.m.; Thursday from 9:30 a.m. to 5:00 p.m. There is a 24-hour mental health crisis line available at 608-265-5600, option 9.

#### **Services**

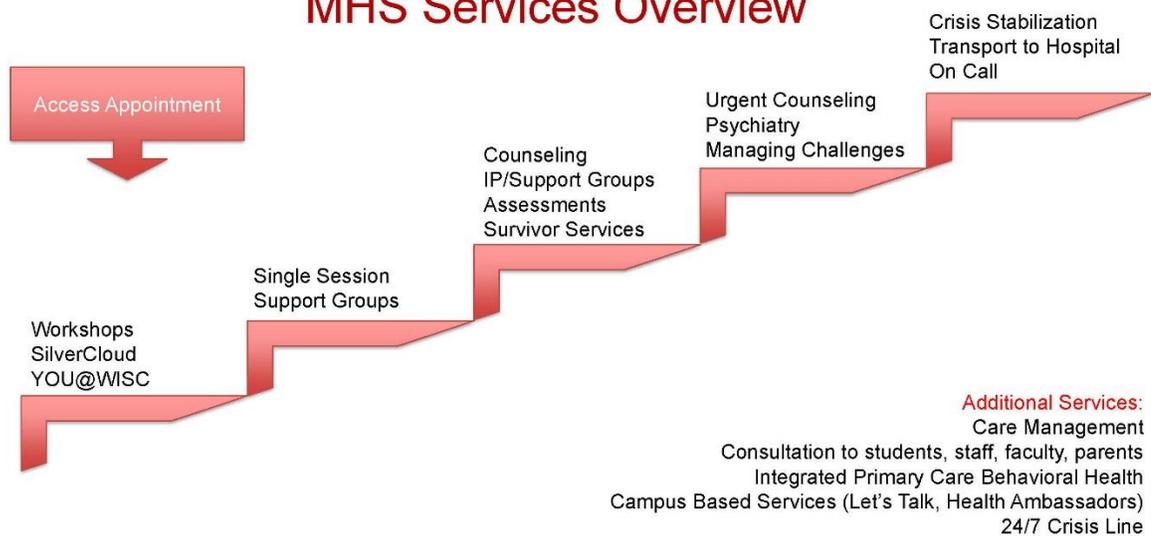
- 24-hour crisis intervention available (608-265-5600, option 9)
- Brief individual and couple/partner counseling
- More than three dozen group counseling groups each semester
- Assessment for substance abuse and disordered eating
- Campus Based Services
- Gender identity consultations

- Psychiatric consultation and medication management
- Care management and referral
- Self-help online mental health support
- Survivor Services
- Integrated Primary Care Behavioral Health

UHS uses a stepped care model to provide the appropriate level of care for each student.



## MHS Services Overview



The only service that has a session limit is individual counseling services, where students may access 10 sessions an academic year, up to a total of 20 during their academic career. In circumstances in which students require additional care, have limited resources, and have an established therapeutic relationship at MHS, exceptions may be made to this limitation.

### Utilization

In 2017-18, 5,658 students accessed UHS Mental Health Services for more than 25,000 appointments.

### Wait Times

Wait times vary greatly during the semester and depend on which service is being sought and which service is indicated. The primary point of entry for Mental Health Services is the Access Appointment, which can be made online, and the time to appointment for this service ranges from same day to about a week. Drop-in services are available the same day for students who cannot wait until their scheduled appointment. For routine care, psychiatry visits can range from a wait time of two to four weeks, and individual counseling

can see similar wait times. Urgent counseling and psychiatry visits are typically available within one to two weeks. During the semester, 20 hours of Let's Talk is provided each week for drop-in informal counseling at locations across campus – no appointment is needed for this service.

## **2. Counseling Psychology Training Clinic (CPTC), Department of Counseling Psychology, School of Education**

<https://counselingpsych.education.wisc.edu/>

The UW-Madison Counseling Psychology Training Clinic is a training facility for the Counseling Psychology (PhD and MA) graduate training programs administered by the University of Wisconsin-Madison Department of Counseling Psychology. The clinic seeks to offer high quality, cost efficient and multiculturally competent psychological and mental health services to students and residents of Madison and the surrounding areas. The clinic also supports the research of program faculty and students and seeks to advance understanding of psychological health conditions and services.

The clinic provides a range of counseling and psychological services for children, adolescents, adults, couples, and families. Clients needing services unavailable through the clinic are referred to local professionals, agencies, or hospitals equipped to provide appropriate services.

### **Fees**

Fees for counseling services are on a sliding scale determined by income. Payment is expected at the time services are rendered. Medicare, Medicaid, or other insurances are not accepted, nor does CPTC bill insurance companies directly.

### **Hours**

Weekday afternoon and evening sessions are available.

### **Services**

- Individual therapy for work, school, or personal concerns
- Marriage/divorce counseling
- Family counseling
- Couples counseling
- Career and life-planning counseling
- Group counseling

Clients may refer themselves, or they may be referred by friends, family or other professionals.

In partnership with the Counseling Psychology Training Clinic (CPTC), the Community Support Specialists provide mental health-related services to UW-Madison students enrolled under Division of Diversity, Equity & Educational Achievement programs such as CeO, Chancellor's Scholars, First Wave, Pathways, PEOPLE, POSSE, and Powers-Knapp Scholars. Services are intended to offer students culturally competent mental health support that enhances their academic engagement and performance. The Community Support Specialists integrate cultural knowledge, awareness and skills to provide counseling and mental health interventions that are tailored to underrepresented minority students' needs. All clinical work is supervised by licensed psychologists affiliated with the Department of Counseling Psychology.

### **Psychology Research & Training Clinic (PRTC)**

<https://psych.wisc.edu/graduate-program/clinical-psychology-program/research-and-training-clinic/>

The Psychology Research and Training Clinic (PRTC), located within the Department of Psychology at UW-Madison has been serving the campus and local community for over 30 years by providing confidential psychological services to adults, adolescents, and children. The graduate clinicians are advanced clinical and counseling psychology doctoral students who are supervised by licensed psychologists.

The PRTC provides outpatient treatment for issues such as depression, anxiety, problems with stress and adjustment, relationship and couples problems, eating disorders, substance use, learning problems, child/adolescent emotional and behavior problems, and parent-child relational difficulty. Therapy services are provided using individual, parent-child, couples, and family formats.

The PRTC conducts psychological testing and evaluation, including tests of intelligence, memory, academic function, personality, and psychopathology.

The PRTC does not have a psychiatrist on staff and cannot provide management of psychiatric medications. However graduate clinicians are available to consult with physicians if referred clients are currently prescribed medication.

### **Fees**

The PRTC is a fee-for-service clinic and does not accept private insurance, Medicaid, or Medicare.

The initial intake fee is \$30, and each client's session fees are determined using a sliding scale based on after-tax income and family size. The standard session fee of \$60 may be adjusted to as low as \$10 per session. This brings the cost of therapy within the reach of many people who otherwise might forgo services.

Psychological testing is billed at a set fee; intelligence testing including feedback and report is \$150, other evaluations including testing for learning disability, ADHD, psychopathology, and adaptive function range from \$200 to \$400 (includes feedback, recommendations, and report).

The PTCT offers free and confidential psychotherapy services for School of Pharmacy students: <http://psych.wisc.edu/graduate-program/clinical-psychology-program/pharmacy-students/>.

### **Hours**

The PRTC is open Monday through Thursday 9 a.m. to 5 p.m. Evening appointments are available for established clients upon approval from the Director.

### **Services**

- Individual Psychotherapy
- Family/Parent-Child Therapy
- Psychological Assessment
  - General diagnostic evaluations
  - Assessment of ADHD & Learning Disabilities
  - Brief Alcohol Use Assessment & Intervention
- Community Psychoeducational Presentations
- Law School
  - Wellness Presentations
- School of Pharmacy
  - Individual Therapy
  - Brief Alcohol Use Assessment & Intervention
  - Wellness Presentations

### **Utilization**

Forty percent of clients at the PRTC are affiliated with UW-Madison and sixty percent are community members.

### **Accessing Services**

Interested clients call the PRTC for a screening and intake appointment.

## **3. School and College Providers**

### **School of Veterinary Medicine**

<https://www.vetmed.wisc.edu/dvm-students/current-students/pawss/>

The School of Veterinary Medicine provides confidential in-house counseling for all of their professional students.

**Fees**

There is no cost for enrolled students

**Hours**

Hours are Monday-Friday, 8:30 a.m. to 4:30 p.m.

**Services**

- Short-term individual counseling for a variety of concerns
- Referral to community mental health agencies
- Presentations and facilitated discussions on wellness/communication related topics
- General wellness support

**Utilization**

While the School of Veterinary Medicine doesn't systematically measure utilization, between 25-50% of the student body seeks care or referrals from the PAWSS services. No prescribing or on-call hours are available, and students are referred to clinics listed above for additional care.

**School of Medicine and Public Health, College of Engineering**

The School of Medicine and Public Health and the College of Engineering also provide no-cost confidential counseling.

**Fees**

There is no cost for enrolled students. Services are paid for by the academic units and staffed by UHS. Providers have office hours at the school and college locations, in addition to at the main UHS location.

**Services**

Same as UHS services, with exception that there is no limit to individual counseling sessions. Participate in a nation-wide veterinary mental health provider group.

**Utilization**

Captured in overall UHS numbers.

## DATA AND STRATEGY

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UW-Madison uses a variety of data sources to consider clinical and prevention services, including Healthy Minds and the ACHA-NCHA.

### 2016 Healthy Minds

Key findings on overall mental health:

- 21 percent of students screened positively for depression overall.
- 16 percent of students screened positively for an anxiety disorder.
- 9 percent of students indicated they experienced suicide ideation in the last year.
- 27 percent of students have been diagnosed with a mental health disorder during their lifetime.

For more information about the 2016 findings, read the executive [summary](#). Results from the 2019 Healthy Minds survey will be available in the fall of 2019.

The most recent administration of the ACHA-NCHA survey did not have sufficient responses to prepare findings usable for clinical or prevention services.

### Student Mental Health Committee 3-Tier Model

[This model](#) was presented to the UW System Board of Regents in 2006 and again in 2019 as a targeted strategy to address the mental health crisis. The model is actualized when the majority of resources are utilized in tier 3, followed by tier 2, thus minimizing the need for tier 1 services. The model is adapted from the University of California's Student Mental Health Resources and Promising Practices: [www.ucop.edu/student-mental-health-resources](http://www.ucop.edu/student-mental-health-resources). This is the model which guides the work of UHS in supporting the mental health needs of UW-Madison students.

#### Tier 1: Direct Service and Crisis Intervention

Tier 1 represents the critical mental health services that need to be restored in order for UW campuses to fully respond to basic student mental health needs on our campuses. Resources targeted at this tier directly reduce wait times and support the provision of crisis services.

#### Tier 2: Targeted Interventions for Vulnerable Groups

Tier 2 outlines targeted interventions for vulnerable groups through education, support and prevention programs, restores key services to help students manage stress and increases staffing levels in those campus life areas most impacted by student mental health issues, such as disability services, student judicial affairs and student life.

#### Tier 3: Comprehensive Approach to Prevention

Tier 3 requires enhancing the full spectrum of student life services towards a comprehensive approach to creating healthier learning environments through actively

engaging faculty and academic staff and facilitating proactive communication and collaboration among mental health stakeholders.

**Continuum Model for Interventions Supporting Student Mental Health and Well-Being**  
*Further adapted for UW-Madison*

	Scope & Focus	Examples
Tier 1 Crisis Intervention	<ul style="list-style-type: none"> <li>• Students most at-risk</li> <li>• Serious psychiatric distress</li> </ul>	<ul style="list-style-type: none"> <li>• UHS Crisis Stabilization/On Call Services</li> <li>• Behavioral Intervention Team (BIT)</li> </ul>
Tier 2 Direct Service	<ul style="list-style-type: none"> <li>• Students experiencing high rates of stress, behavioral issues</li> <li>• Professional mental health support</li> </ul>	<ul style="list-style-type: none"> <li>• UHS Mental Health Individual Counseling</li> <li>• PRTC</li> <li>• CPTC</li> <li>• Embedded counselors</li> </ul>
Tier 3 Targeted Interventions for Vulnerable Populations	<ul style="list-style-type: none"> <li>• Students at elevated risk based on particular experiences, conditions, identities</li> <li>• Health inequities</li> </ul>	<ul style="list-style-type: none"> <li>• UHS MH partnership with MSC, GSCC, ISS, BCC, among others.</li> <li>• Let's Talk, etc.</li> <li>• UHS Health Ambassadorships</li> <li>• CPTC DDEEA partnership</li> </ul>
Tier 4 Capacity- Building for Individuals	<ul style="list-style-type: none"> <li>• Students who experience some stress but do not require clinical services</li> <li>• Focus on teaching healthy lifestyle and self-care skills as prevention</li> <li>• Non-clinical programs</li> </ul>	<ul style="list-style-type: none"> <li>• Psychoeducational sessions by UHS staff</li> <li>• Consultation for faculty, staff and students by UHS MH providers</li> <li>• Suicide Prevention Training</li> <li>• UHS Meditation sessions</li> <li>• SilverCloud</li> </ul>
Tier 5 Capacity- Building for Community Members	<ul style="list-style-type: none"> <li>• Build capacity of members of campus community to respond to students in distress</li> <li>• Build culture of care and sense of responsibility to one another</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="#">UHS Suicide Prevention Training</a></li> <li>• <a href="#">At-Risk online training module</a></li> <li>• UHS Healthy Campus destigmatization social norms campaign</li> </ul>

Tier 6 Creating Healthy Learning Environments	<ul style="list-style-type: none"> <li>• Orient systems and policies toward supporting student mental health and well being</li> <li>• Practice environmental management strategies that support student health</li> </ul>	<ul style="list-style-type: none"> <li>• Suicide Prevention Council</li> <li>• <a href="#">UWell Partnership Council</a></li> <li>• Jed Foundation Campus Program benchmarking and comprehensive strategy implementation (see next page)</li> </ul>
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UW-Madison is a [JED campus](#) and uses the JED comprehensive approach. A UW-Madison specific report using the JED Foundation criteria will be available by fall 2019 from the Suicide Prevention Council.



## **RECOMMENDATIONS**

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At the end of the process for reviewing current services, the task force generated a number of recommendations. The student representatives on the task force agreed to consider additional student engagement moving forward. Additional suggestions called for increased engagement and participation from graduate, professional, and undergraduate students.

The general themes that emerged include:

### **Communications**

- Provide better communication regarding services available, including hours open, range of services available, social norms messaging. Review website information to make sure easy access to all services on campus and address narrative of long wait times at UHS.
- Ask campus to partner on university-wide message and campaign.
- Continue to decrease stigma, focusing primarily on international populations and underrepresented students.
- Provide additional resources and communication to students, faculty, and staff to make sure all have accurate information about services and know how to respond and refer appropriately when mental health issues arise.
- Review current efforts in promotion and prevention and consider opportunities to integrate additional information or new methods throughout campus.
- Review current efforts and provide more and better information for parents about mental health concerns, which could include more visibility at SOAR.

### **Continue to Assess Student Needs**

- Evaluate data around student mental health and adjust services accordingly. Healthy Minds information will be available fall 2019.

### **Increased Collaboration**

- Increasing connections between counselors in the other clinics on campus and UHS could be beneficial to the providers as well as the students. Discussing strategies for clinical collaboration, sharing training and professional development opportunities and increasing overall support could be beneficial.

### **Provider Engagement**

- Provide greater resources to prevent staff burnout.
- Engage and more effectively support underrepresented providers in UHS.

### **Clinical Services**

- Hire additional providers at UHS.
- Create more space for providers to work at UHS.
- Enhance the accessibility of clinical services.
- Bolster integrated primary care behavioral health.
- Increase drop-in hours across campus.
- Create an established satellite location on west side of campus.
- Consider offering more counseling resources in residence halls or in academic buildings.

### **Training**

- Provide semester trainings for student organizations focused on supporting mental health which could include NAMI-Dane County, NAMI Wisconsin and UHS Suicide Prevention training, and compassion fatigue.
- Invite fraternity and sorority leaders, students of color, and international students to participate in these trainings.
- Increase peer-to-peer training especially in the residence halls, fraternities, and sororities.

### **Other Models to Consider**

Community Health Assessment & Health Improvement Planning  
<https://www.cdc.gov/publichealthgateway/cha/index.html>

Equity in Mental Health  
<https://equityinmentalhealth.org/>

## **NEXT STEPS**

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There was strong consensus that the work of the task force should continue. We only had time to review current clinical services and provide initial recommendations on those areas. We know the needs are also great in the areas of prevention, communications, and support for faculty and staff who work with students in distress. The initial task force was comprised of individuals who care deeply about this subject and many also have expertise in providing clinical treatment. Reviewing opportunities to enhance prevention work and collaboration is an area that should be pursued and most likely would involve other professionals and faculty on campus. A separate committee is already working on increasing mental health support and services for graduate and professional students. A discussion should happen whether this work be folded into this task force or continue with some coordination. The Suicide Prevention Council has also been working on the prevention and environmental factors related to the areas of mental health promotion and suicide prevention since 2014. The continuation of the task force should also work in collaboration and coordination with this and other established committees on campus.

Now that a new UHS Executive Director has been hired, Jake Baggott, in coordination with UHS leadership, should be engaged in this conversation and propose a model for continuing to study and support the mental health needs of all students on campus.

## APPENDIX

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### Media Reports:

The Mental Health Task Force was featured in local news in the spring of 2019:

["The year in review: Chancellor Blank on UW's biggest stories,"](#) *Badger Herald*, April 30, 2019

["Students, staff working to address growing demand for mental health services,"](#) news.wisc.edu, April 9, 2019

["Regents focus attention on rising student behavioral health challenges \(day 1 news summary\),"](#) April 4, 2019

["Mental Health Task Force to renew UW-Madison's mental health resources,"](#) *Daily Cardinal*, March 8, 2019

["Task force will recommend strategies to strengthen student mental health services,"](#) news.wisc.edu, March 6, 2019

["More funding, support needed for campus mental health services,"](#) *Daily Cardinal*, February 14, 2019

["As need for mental health services 'skyrockets,' university officials look to meet demand,"](#) *Badger Herald*, February 6, 2019