Weber State University  
Mental Health Implementation Plan  
August 2019 – July 2024  

Background: In September 2017, the State Board of Regents approved the recommendations of the Regents’ Mental Health Working Group and directed the institutional presidents to act on the recommendations. The Board approved revisions to the recommendations in January 2019. The four recommendations are as follows: (1) Assess the mental health and wellness needs of USHE students, (2) Improve mental health education at USHE institutions, (3) Increase access to mental health services, and (4) Develop institutional five-year mental health implementation plans.

Purpose: This document serves as the required five-year mental health implementation plan and addresses the institutional strategies outlined for each of the Regents’ mental health recommendations. The president will also present on progress and efforts on mental health issues during the State of the University address when hosting the Board of Regents.

Rationale (tying in campus safety, retention, completion, etc.): Mental health is essential to success in college and beyond. Efforts supporting awareness, advocacy, and treatment of college mental health issues must be campus-wide. One of the Mission Core Themes at Weber State University centers around helping students “learn to succeed as educated persons and professionals.” As such, we acknowledge the role of mental health in student success, retention, and graduation, and we provide a variety of resources to help students grow and develop.

Institution funding model for mental health: Approximately 40% of the Weber State University Counseling and Psychological Services Center budget comes from Education and General funding; approximately 60% comes from Student Fees.

Recommendation #1: Assess the Mental Health and Wellness Needs of USHE Students

Strategy 1a: In an effort to make more data-informed policy decisions, assure the Chief Student Affairs Officers (CSAOs) of the USHE institutions use the following systematic evaluation tools to assess the mental health and wellness of USHE students: the American College Health Association National College Health Assessment (ACHA NCHA) in the spring semester of odd years starting 2019 and the Healthy Minds Study (HMS) in the spring semester of even years starting 2020. The results of the evaluations will be reported to the Board of Regents.

Institution Current Status

- WSU has been administering the ACHA-NCHA biennially since at least 2009. Administration is managed by Savanna Grotz, Coordinator of Student Affairs Assessment. Data are managed by Rochelle Creager, Coordinator of Student Wellness. Select results and implications are shared readily across campus upon request and are frequently incorporated into presentations developed by various departments.
- The Healthy Minds Study will be administered at WSU for the first time in Spring 2020. We expect the process and management will reflect that of the ACHA-NCHA.
Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)

WSU will continue our longstanding pattern of administering the AHCA-NCHA during spring semesters of odd years. We will begin administering the HMS in Spring 2020 and continue biennially as recommended.

- **Required Resources**
  - Confirm price and identify funding source for HMS. Propose funding from Student Affairs general fund.
  - Funding may be required for student incentives, as occurs with ACHA-NCHA.
  - Existing staffing is expected to be sufficient.

- **Measurable Goals**
  - HMS administration will be complete by March 31, 2020.
  - Data analysis will take place during Summer 2020, pending release of results by HMS.

- **Action Items**
  - Meeting scheduled with relevant staff and administrators: November 2019.
  - Identify tasks and responsible parties.

- **Timeline**
  - HMS administration complete by March 31, 2020.
  - Data analysis in process during Summer 2020.

**Lead and Other Collaborators**
- Rochelle Creager, Student Wellness Coordinator
- Savanna Grotz, Coordinator of Student Affairs Assessment
- Dianna Abel, Executive Director of Counseling, Health, and Wellness
- Jeff Hurst, AVPSA, Dean of Students

**Required additional resources from external sources (State Board of Regents, State appropriation, etc.)**
- Because HMS is required by the State Board of Regents, associated funding should be requested. Such funding should include survey administration costs as well as incentives.

**Recommendation #2: Improve Mental Health Education at USHE Institutions**

In an effort to more effectively prevent and treat mental health issues within the USHE system, assess and, if needed, modify educational standards for faculty, adjunct faculty, staff, and students. The goal of the standards should be increasing the ability of these groups to identify mental health issues and to refer students to appropriate mental health resources, as needed.

**Strategy 2a:** The Commissioner’s Office will: Convene the Counseling Center Directors from each USHE institution at least annually to discuss best practices for training and other strategies or other relevant topics to assure the best mental health practices for students. These topics may include “Okay to Say” or similar awareness campaigns, and collaboration with the Utah Suicide Prevention Coalition, Utah Division of Substance Abuse and Mental Health, and the Utah Student Association.
OCHE Current Status

- The first Counseling Center Directors meeting was held June 4, 2018. Regent Patricia Jones, chair of the Regents’ Mental Health Working Group, led a focus group to gain the directors’ insights into implementing the Regents’ Mental Health Recommendations at each of the institutions. Each recommendation and strategy was reviewed and discussed. Edits to some of the strategies were suggested to: (1) make implementation possible, and (2) provide sufficient data to the Regents on the effectiveness of the strategies in responding to student mental health needs.

OCHE Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)

- The counseling center directors from all eight USHE institutions are represented on the Regents’ Mental Health Advisory Committee, which will meet once a year in June or July, once the survey results are in from the annual mental health survey, to review the data and progress of the 5-year implementation plans.

Lead and Other Collaborators

- Lead: Megan Brown, OCHE Project Manager – Academic and Student Affairs
- Collaborator: Elizabeth Hitch, OCHE Associate Commissioner for Academic and Student Affairs

Strategy 2b: Each USHE institution will (for Faculty/Staff): Work to implement a mental health education training for new faculty and staff, with ongoing follow-up training opportunities available for all faculty and staff.

Institution Current Status

- Faculty/staff training in QPR for Suicide Prevention has been offered regularly since 2016. To date, at least 197 WSU faculty and staff members have received QPR training.
- Three campus-wide faculty/staff QPR training workshops are offered each Fall and Spring semester. Workshop availability is highlighted to WSU Teaching and Learning Forum staff for distribution to new faculty members. Several departments have also requested workshops delivered specifically to their faculty/staff.
- A module on college mental health is included in the faculty Inclusive Excellence program. Various resources are presented, and participants respond online to complex discussion questions regarding students with mental health symptoms, accommodating mental health disabilities, and related issues.

Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)

WSU will continue offering regular QPR training workshops for faculty and staff members. We will also explore ways to incorporate broader mental health training beyond suicide prevention. Mental Health First Aid (MHFA) and/or ICANHELP programs will be considered.

- Required Resources
  - Funding for train-the-trainer workshops to include some clinical staff of the Counseling and Psychological Services Center (CPSC) and other non-clinicians from across campus, as appropriate.
• Funding for course fees and materials, if applicable, for any selected training programs. MHFA training is offered for free through the Weber-Morgan Health Department. Materials and other associated training costs could range from $200-900 per MHFA training cohort, depending on size. Required resources for ICANHELP also vary by quantity, with an expected minimum cost of about $400. If selected for utilization, further exploration of such program details will be required.

• Funding for faculty/staff training incentives. When the Provost’s Office provided $50 Amazon gift cards for any faculty member attending QPR training in 2016, attendance was markedly higher.

• Measureable Goals
  • Train at least 20 faculty/staff members in QPR per academic year.
  • Adopt a broader mental health training program for campus utilization.
  • Begin offering broader mental health training at least once annually.

• Action Items
  • Partner with Faculty Senate, relevant ASSA committee, and Student Success Steering Committee to increase campus-wide involvement in mental health initiatives.
  • Explore details of at least two broader mental-health training programs.

• Timeline
  • Program selection by March 31, 2020.
  • Roll out initial offering of selected program by September 2020.

Lead and Other Collaborators
• Lead: Dianna Abel, Executive Director of Counseling, Health, and Wellness
• Collaborator: Tim Herzog, Faculty Senate Chair
• Collaborator: Aaron Ashley, ASSA Committee Chair
• Collaborator: WSU Teaching and Learning Forum

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
• WSU, like many campuses, utilizes QPR for Suicide Prevention. If selected as a USHE initiative, materials for this program, including participant booklets and train-the-trainer fees, could be considered for funding by the State Board of Regents.
  • The WSU Executive Director of Counseling, Health, and Wellness has an established partnership with the NU-Hope community suicide prevention task force, which currently provides funding for associated expenses. Totals range from $400-1,500 per year.

• The Kognito program of online faculty/staff training simulations offers modules on supporting students in psychological distress. Online delivery of such training would likely yield higher faculty participation. If selected as a USHE initiative, program expenses could be considered for funding by the State Board of Regents.
  • Because WSU has not considered incorporation of Kognito, expenses associated with this program have not been explored.

**Strategy 2c:** Each USHE institution will (for Students): Offer opportunities and encourage students to participate in mental health literacy training to help them identify, respond to, and refer peers to appropriate mental health resources.
Institution Current Status

- Student training in QPR for Suicide Prevention has been offered regularly since 2016. To date, at least 946 WSU students have received QPR training. Most have been requested workshops for various classes or student groups such as WSUSA, athletes, and RAs. General student workshops have been offered less frequently due to limited attendance.

- CPSC responds to numerous faculty requests for “Intro to CPSC” class presentations each year. On average, we present to 13 classes and approximately 350 students per year. Since 2016, we have presented 40 such presentations to a total of 1,063 students.

- The Wildcat Support Network (WSN) was funded in Fall 2018 by a $300,000 SAMHSA grant. This two-pronged program includes:
  - PSY 2810/2020: Mental Health Awareness and Advocacy (MHAA), a credit-bearing course teaching students how to recognize peers in distress, listen and respond empathically, and make appropriate referrals, began in Spring 2019. To date, 47 students have completed or are currently enrolled in the course.
  - A follow-up course teaching trained peers how to lead effective student support groups launched in Fall 2019. Peer-led student support groups are expected to roll out by mid-Fall 2019.

- As recommended and funded by the Board of Regents, WSU intends to roll out the EverFi Mental Well-Being (MWB) course no later than Spring 2020.

- Amy Blunck, CPSC Coordinator of Mental Health Initiatives and WSN program director, has begun conceptualizing a spectrum of student mental health literacy training, ranging from cursory involvement to higher-impact educational experiences: MWB, QPR, MHAA, WSN peer leadership. Notation of high-level completion could be considered for transcript notation.

Institution Plan to Meet Recommendation (include required resources, measurable goals, action items, and timeline)

CPSC will continue to offer QPR and Intro-to-CPSC training regularly. We will continue to utilize Ogden PEAK, our student marketing group, to promote WSN. Options for increasing available sections of PSY 2020, including additional instructors, will be explored. Increasing the number of WSN peer facilitators and support groups will be a priority. The MWB course will be rolled out and marketed to key student populations, including residents, athletes, and FYE students.

- Required Resources
  - Because grant-funding will conclude in November 2021, replacement funding of up to $100,000 per year will be required to continue all aspects of the grant and further expand the reach of WSN.
  - Incentive funding may required for MWB completion.

- Measureable Goals
  - A minimum of one general student QPR workshop will be offered each semester.
  - A minimum of two sections of MHAA will be offered each semester, with a minimum of 15 students enrolled per section.
  - A reasonable pilot sample of student will complete MWB during Spring 2020.

- Action Items
  - Collaborate with EverFi representatives to coordinate MWB launch.
  - Explore means of promoting MWB completion, including appeals to faculty, coaches, and housing staff, as well as incentives.
Timeline
  o MWB will be launched at WSU no later than January 20, 2020.
  o A minimum of 200 students will complete MWB by the end of spring semester 2020.

Lead and Other Collaborators
  • Lead: Amy Blunck, Coordinator of Mental Health Initiatives
  • Collaborator: Dianna Abel, Executive Director of Counseling, Health, and Wellness
  • Collaborator: Jeff Hurst, AVPSA and Dean of Students

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
  • Because the Board of Regents purchased the MWB course very shortly before fall semester 2019 began, preparation for an effective rollout has been truncated. In order to secure a representative sample of students who have completed MWB, and thus meaningful data on its outcome, an additional year of funding may be required to continue the program.
  • If the MWB course is found to yield meaningful outcomes on student mental health literacy, the program should be continued. State funding would likely be required for such continuation, as well as marketing expenses and incentives.

Strategy 2d: Each USHE institution will (for Students): Offer service learning and volunteer opportunities that provide exposure to mental health issues and treatment and may lead to career opportunities in mental health settings.

Institution Current Status
  • The WSU Center for Community Engaged Learning (CCEL) sponsors more than 230 CEL-designated courses, each of which requires 15-20 hours of service learning. More than 90 community partners host service learning, at least 22 of which provide exposure to mental health issues and treatment.
  • WSN support groups will provide peer-leadership opportunities, and also high-impact learning experiences, in a mental health context.
  • CPSC is a Psychology Department practicum site in which advanced undergraduate students serve on our Outreach Team (OT). Many students proceed to graduate school in a variety of mental health fields.

Institution Plan to Meet Recommendation (include required resources, measurable goals, action items, and timeline)
CCEL will, as appropriate, encourage faculty members to consider promoting service learning sites that provide exposure to mental health issues and treatment. Attempts will be made to track more thoroughly the number of students serving in relevant capacities, as well as the impact of their service experience on intended and realized career paths. Increasing the number of WSN peer facilitators and support groups will be a priority. CPSC will be more heavily marketed as a practicum site within the Psychology Department. Ways to combine WSN and OT may be considered.
  • Required Resources
    o In order to mine their data more thoroughly, CCEL may benefit from additional staffing and/or technology to maintain and enhance their annual survey.
    o As stated in 2c, continuation funding for WSN may be required following grant termination in November 2021.
• Measureable Goals
  o The number of students and the number of service learning hours provided at each site providing mental health exposure will be tracked and reported by CCEL annually.
  o A minimum of one WSN peer-led support group will be offered each semester, with a minimum of six meetings.
  o The CPSC Outreach Team will secure a minimum of two students per semester.
• Action Items
  o The CCEL annual survey will add an item assessing the impact of service learning on career choice.
  o The WSN peer facilitation role will be emphasized as a high-impact educational experience to encourage MHAA student consideration of this role.
  o The CPSC Outreach Coordinator will consult with the Psychology Department practicum supervisor regarding ideas for promotion of CPSC as a training site.
• Timeline
  o This report will be updated with the number of students and the hours of service learning they provided at relevant sites during AY 19-20 by mid-May 2020.
  o During the final weeks of each semester in which MHAA is taught, peer facilitation will be encouraged.

Lead and Other Collaborators
• Becky Jo Gesteland, Executive Director of CCEL
• Jenny Frame, CCEL Community Partner Coordinator
• Amy Blunck, CPSC Coordinator of Mental Health Initiatives
• Tamara Robinette, CPSC Outreach Coordinator
• Dianna Abel, Executive Director of Counseling, Health, and Wellness

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
• A portion of WSN grant funding supports one .75 FTE clinical staff member to cover the increased demand for CPSC services generated by program exposure. Without continuation funding, this position will be lost by November 2021. State-appropriated dollars to increase the number of mental health clinicians on USHE campuses could meet this need.

Strategy 2e: Each USHE institution will (for Students): Assure that institutional student health and wellness programs systematically address the biopsychosocial aspects of mental health and well-being.

Institution Current Status
• All staff in WSU health and wellness departments are appropriately licensed and/or certified. Such credentials require that holistic care, which includes biopsychosocial aspects of health, is provided. Cross-referrals between the Counseling and Psychological Services Center (CPSC), the Student Health Center (SHC), and the Student Wellness program (SW) are frequent, though not always documented.
• Upon first contact at CPSC, all new clients complete extensive paperwork, including items related to a wide variety of physical, psychological, and social symptoms and concerns.
• About 5% of presenting concerns treated at the Student Health Center are psychiatric in nature.
• CPSC employs a .85 FTE board-certified Psychiatric Mental Health Nurse Practitioner who provides pharmacological treatment to students receiving counseling at CPSC.
• The Student Wellness (SW) program centers all programming around a Wellness Wheel comprised of eight aspects of overall wellness: Intellectual, Emotional, Social, Physical, Spiritual, Financial, Environmental, and Occupational.
• While CPSC, SHC, and SW function independently, they are led by one individual, the Executive Director of Counseling, Health, and Wellness. This role helps to ensure that health and well-being are treated holistically across departments.
• Other campus departments focused on health and well-being not led by the Executive Director, such as Campus Recreation, regularly request mental-health-oriented trainings, such as QPR for Suicide Prevention, for their staff members.

Institution Plan to Meet Recommendation (include required resources, measurable goals, action items, and timeline)
CPSC, SHC, and SW may explore ways to document referrals made to other wellness-oriented departments for improved tracking via their electronic health records systems. SHC and SW will continue to advocate for an increase and/or remodeling of space to allow co-location of SW within the SHC suite. The current distance between these departments impedes student follow-through on referrals made.
• Required Resources
  o Significant building funds will be required to increase and/or remodel SHC space to co-locate SW, which would facilitate patient consultation and referral follow-through.
• Measureable Goals
  o The technological feasibility of tracking referrals to other campus-based wellness-oriented departments will be explored within Titanium (CPSC’s EHR) and Point-and-Click (SHC’s EHR).
• Action Items
  o Appropriate staff from CPSC and SHC will coordinate with the appropriate Student Affairs IT representatives and EHR developers regarding referral-tracking options.
• Timeline
  o Determine whether referrals can and should be tracked and monitored more carefully by July 1, 2020.

Lead and Other Collaborators
• Chip Coleman, Student Affairs Technology Systems Architect
• Dianna Abel, Executive Director of Counseling, Health, and Wellness

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
• Significant salary dollars will be required to restore the balance of doctoral-prepared clinicians at CPSC, whose advanced education informs consultation re: biopsychosocial care.

Strategy 2f: Each USHE institution will (for Students): Collaborate with existing or developing K-16 Alliances that are working to better prepare students for mental health issues across the continuum of K-16 education. Collaboration may include such things as: (1) increasing awareness and better coordination of the K-16 mental health continuum, (2) developing K-16 resiliency training, (3) working to transfer information on students under Section 504 of the Rehabilitation Act of 1973 from K-12 to higher education institutions students are attending, with consideration of whether such transfer includes Individualized Education Programs (IEPs).
Institution Current Status

- As part of the campus-wide Student Success Initiative, Suzanne Maltby in Admissions has hosted local high school counselors on campus to visit support services and gather information.
  - They have described high interest in resilience education and material taught in Psych 2020: Mental Health Awareness and Advocacy.
  - School counselors report focusing little on the mental health of their students. A greater emphasis is placed on academic progress. They refer to district-based counselors and/or crisis intervention teams for mental health concerns.
- CPSC staff offered coping-skills-based psychoeducational groups to NUAMES students at WSU-North and WSU-Davis AY 2018-19.
- The development of a K-16 alliance is an initiative housed outside of CPSC, likely at the Provost and/or AVPSA level.
- Issues related to 504 plans, IEPs, and other matters associated with disabilities, are housed in the Disability Services Office.

Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)

WSU will revisit initiatives related to K-16 alliances. Administrators have been referred to Tami Curtis, Social and Emotional Learning (SEL) Coordinator for the Washington County School District, for assistance.

- Required Resources
  - Hosting/meeting costs to gather key stakeholders. Resource requirements will be developed in concert with initiatives.
- Measureable Goals
  - Progress will be made toward achieving better collaborative and cooperative relationships between the university and K-16 partners.
- Action Items
  - CPSC will continue to offer NUAMES groups as needed, depending upon school counselor referrals and student interest. Consultation with NUAMES staff and faculty may be provided as appropriate.
- Timeline
  - Uncertain and variable, as this strategy appears to involve disparate initiatives led by different administrative divisions and departments.

Lead and Other Collaborators

- K-16 alliance: Provost, Vice President for Student Affairs; key public education officials.
- IEP/504: Director of Disability Services.

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)

- Resource requirements developed in concert with initiatives.

Recommendation #3: Increase Access to Mental Health Services

In an effort to more effectively address the mental health needs of students in the USHE system, implement strategies to increase access to varying psychological treatments that are empirically supported.
**Strategy 3a:** Work collaboratively with community and regional providers to increase access to psychiatric care community-wide, especially in underserved areas of the state.

**Institution Current Status**
- WSU-CPSC attempts to maintain connections with local referral options, including via listing on website. Executive Director serves on Weber Human Services Advisory Board and NU-Hope Suicide Prevention Task Force. PMHNP maintains professional connections with former colleagues at McKay-Dee Behavioral Health Institute to facilitate referrals.
- VA VITAL program provides limited mental health counseling to WSU veteran students.
- The Coordinator of the WSU Money Management Center has offered to assist CPSC by contributing expertise related to insurance utilization and state/federal benefit programs. Tentative ideas include informational webpage/video and/or student consultations.

**Institution Plan to Meet Recommendation (include required resources, measurable goals, action items, and timeline)**
Explore ways to increase outreach to psychiatric providers in the local community, with the goal of increasing access for WSU students. Addressing issues of insurance utilization and/or sliding fee options will be key.

- **Required Resources**
  - Incentives may be required to encourage local community psychiatric providers to increase access to WSU students by providing sliding fee scale.

- **Measureable Goals**
  - Generate and/or access listings of local community providers willing to treat psychiatric concerns on sliding fee scales.
    - Collaborate with Alumni Relations for potential leads.
  - Create educational information for WSU students regarding insurance utilization and application processes for state/federal benefit programs.

- **Action Items**
  - Identify and collaborate with community efforts, such as the “Unite Us” project, to increase awareness and utilization of community psychiatric providers.
  - Collaborate with Jesse Checkman, Coordinator of the Money Management Center, on educational campaign.

- **Timeline**
  - Uncertain timeline for community collaboration due to variable project status.
  - Complete educational information for WSU students by late-August, 2020.

**Lead and Other Collaborators**
- Dianna Abel, Executive Director of Counseling, Health, and Wellness
- Aaron Jeffrey, CPSC Clinical Director
- Jesse Checkman, Coordinator of WSU Money Management Center

**Required additional resources from external sources (State Board of Regents, State appropriation, etc.)**
- State funding to support and/or incentivize student treatment via community providers could be extremely helpful in efforts to increase access to psychiatric providers. Vouchers or other programs should be considered to offer options for those who are uninsured, those who are...
underinsured and unable to cover required copays, and those who are ineligible for Medicaid-based care.

**Strategy 3b:** Evaluate and implement strategies that address mental health professional shortages, especially in underserved areas, such as:

- Expanding graduate program capacity and program options to increase number and diversity of professionals produced.
- Collaborating with the Utah Medical Education Council (UMEC) and other stakeholders in programs, such as the WICHE-sponsored Mental Health Program Rural Psychology Internship Initiative, where the objective of better mental health services for USHE students is one of the objectives. Support the UMEC’s role coordinating implementation of the WICHE Rural Psychology Internship Initiative in Utah to expand mental health services in rural areas.

**Institution Current Status**

- While WSU currently has no graduate programs in mental health, a Master of Social Work (MSW) degree program is in the final stages of development.
- CPSC currently has no psychology doctoral internship program. One previous attempt to initiate such a program failed due to the supply/demand status of the field. Resources, including salary dollars, qualified supervisors, and space currently preclude further attempts to create a psychology doctoral internship. The CPSC training program now focuses more intentionally on master’s-level interns in Clinical Mental Health Counseling, Marriage and Family Therapy, and Social Work.
- Ogden is not considered a rural area.

**Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)**

In response to current shortages of local mental health professionals, the WSU Social Work Department is building an MSW program. The new program will utilize a harm-reduction framework, will emphasize clinical practice, and will focus on local and regional needs, particularly the Latino populations. CPSC is likely to develop a training partnerships for WSU MSW interns.

- **Required Resources**
  - Academic program funding to be acquired through the Social Work Department.
  - Trainee funding to be acquired through CPSC.
- **Measureable Goals**
  - Schedule consultation between MSW program developers and CPSC Training Director regarding possible partnership.
- **Action Items**
  - Confirm MSW program plans and anticipated timeline. Schedule training-related consultation accordingly.
- **Timeline**
  - To be determined by MSW faculty.

**Lead and Other Collaborators**

- Mark Bigler, Chair, Social Work department
- Social Work department faculty
- Jamie Brass, CPSC Training Director

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
• MSW funding to be determined by MSW faculty.
• Although WSU-MSW trainee funding may be acquired by CPSC in a variety of ways, the development of such a training partnership would be facilitated by state funding.
• Significant funding would be required to add a psychology internship at CPSC, including additional salary dollars for psychologist-level supervisors, new salary dollars for interns, and program upstart funding. Space expansion would also be required.

**Strategy 3c:** For institution-based psychotherapy services: Examine strategies for expanding services to better serve students (e.g., increasing after-hours and weekend hours, utilizing peer mentors and support groups for mild psychological distress, and/or utilizing telehealth and web-based program applications).

**Institution Current Status**
- 2017 CPSC survey indicated limited interest in clinical hours on evenings/weekends; heavier interest in therapy delivered via electronic means.
- Wildcat Support Network (WSN):
  - An innovative approach to outreach, WSN was launched in Fall 2018. This two-pronged program involves a credit-bearing course open to all students and a series of peer-led support groups. To date, a total of 47 students have completed or are currently enrolled in PSY 2810/2020 (Mental Health Awareness and Advocacy). Learning outcomes assessments show very positive results. The average grade for those who have completed the course is 91.4%, indicating that most students achieved most outcomes related to content knowledge and skill development. Notable increases in pre/post self-report ratings of competencies include the following:
    - 37.5% increase in "ability to recognize a peer in distress"
    - 62.5% increase in "initiating a conversation with a peer in distress"
    - 50% increase in "knowing what to do with a peer in crisis"
    - 31.3% increase in "knowing where to refer peers"
    - 62.5% increase in "competence in helping myself"
  - PSY 2830/4830 Directed Readings: Peer Support Group Facilitation, launched in mid-Fall, 2019 with one student facilitating one weekly peer support group.
- Therapy Assistance Online (TAO):
  - CPSC made TAO available to all Weber State students, faculty, and staff in October 2018. This online platform of self-help therapeutic modules can be utilized anonymously by any member of the WSU community. It can also be used as a supplement to ongoing face-to-face therapy. TAO content addresses many of the mental health concerns most common among college students, including anxiety, depression, stress, and relationship concerns. To date, 494 unique users have registered for TAO, with 377 being anonymous users and 117 being CPSC clients.
- CPSC also subscribes to MindWise Innovations, which makes various online mental health screening tools available on our website. Utilization of these resources is high and increasing. In 2018, 663 individuals completed screenings, a 94% increase over 2016.

**Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)**
CPSC is proud and hopeful about our efforts to expand services to better serve students. In addition to the efforts noted above, we reconfigured our service delivery model effective Fall 2019. New offerings include Initial Consultations (ICs) more readily available than traditional Intakes, as well as the option of Single-Session Interventions (SSIs). Students are responding well to this expanded selection of services, with nearly 50 SSIs scheduled by mid-Fall 2019. Preliminary data demonstrate that our new service delivery model is allowing us to serve more students more quickly than before.

- **Required Resources**
  - A Student Affairs Division grant of about $8,500 was obtained to support clinician training in SSIs. This training occurred on October 3-4, 2019.
  - Given the significant shift in treatment approach represented by SSIs, additional training support may be required.
  - One .75 FTE clinical position has been grant-funded to absorb increased CPSC traffic resulting from WSN exposure. This position funding will expire in November 2021. In order to continue this position and the necessary clinical coverage it provides, the following resources will be required:
    - Salary dollars commensurate with similar positions at CPSC.
    - Funding for space reconfiguration to create one additional private office from current footprint.

- **Measureable Goals**
  - The number of unique students served by CPSC in some capacity will increase over previous years.
  - The average number of sessions per student will decrease from previous years.
  - Wait times for ICs and SSIs will be lower than historical Intake wait times.
  - Student involvement in WSN will grow.
  - TAO registrations will surpass 600.

- **Action Items**
  - Reconfigure statistical calculations to measure wait times for Initial Consultations and Single Sessions.

- **Timeline**
  - Evaluate student participation in and effectiveness of WSN Peer Support Groups after Fall 2019; adjust marketing and approach accordingly.
  - Continue tracking utilization of TAO and SMH online screenings at least monthly.

**Lead and Other Collaborators**
- Amy Blunck, CPSC Coordinator of Mental Health Initiatives
- Aaron Jeffrey, CPSC Clinical Director

**Required additional resources from external sources (State Board of Regents, State appropriation, etc.)**
- State-appropriated salary dollars to support mental health coverage.

**Strategy 3d:** For institution-based psychotherapy services: Evaluate current group offerings and student participation in various types of groups, including formal therapy, psychoeducational, and support/peer support. Assess effectiveness of groups and implement any changes needed to improve effectiveness.

**Institution Current Status**
• Group participation is a longstanding challenge for commuter student populations such as WSU.
• Approximately 3-5 groups per semester are offered at CPSC. Most have limited attendance.
• The new service delivery model initiated at CPSC in Fall 2019 may result in higher group referrals and attendance.
  o Students seen in ICs and/or SSIs will be encouraged to consider treatment options other than individual counseling, such as group therapy.
  o In Fall 2019, the CPSC Psychiatric Mental Health Nurse Practitioner will also begin providing group medication management for ADHD. This modality will likely be extended to serve stabilized clients with anxiety and/or depression in Spring 2020.
• A new CPSC Group Coordinator was selected in October 2019. April Wood, LMFT, has extensive experience with various types of groups. She is charged with expanding our group program to most effectively and efficiently meet student needs.
• Weekly WSN Peer Support Groups became available to students mid-Fall 2019.

Institution Plan to Meet Recommendation (include required resources, measurable goals, action items, and timeline)
CPSC will continue efforts to increase participation in our group program. Our new Group Coordinator will assess the effectiveness of current groups, experiment with new groups, and adjust offerings based on participation and effectiveness.
• Required Resources
  o Some form of compensation for Peer Support Group facilitators may be considered.
  o Additional travel/training funds to support the new Group Coordinator and/or other CPSC clinicians facilitating groups may be required.
• Measurable Goals
  o The number of unique students participating in CPSC groups will increase over previous years.
  o A feasible and relevant assessment tool measuring group effectiveness will be selected and utilized systematically.
• Action Items
  o The CPSC Group Coordinator will research and select a group assessment tool.
  o The CPSC Coordinator of Mental Health Initiatives, who leads the WSN program, will assess participation and effectiveness of Peer Support Groups at the end of Fall 2019.
• Timeline
  o Tool selection should occur by December 2019 for implementation with Spring 2020 groups.

Lead and Other Collaborators
• April Wood, CPSC Group Coordinator
• Amy Blunck, CPSC Coordinator of Mental Health Initiatives

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
• Travel funding for professional development is currently insufficient to cover all specialized needs, including Group Coordinator training. As mental health demand grows, more specialized leadership positions must emerge and be appropriately supported.
**Strategy 3e:** Collaborate with state and local agencies and coalitions that are working to create statewide and institution-based evidence-based stigma reduction campaigns.

**Institution Current Status**
- Stigma reduction is a significant impetus behind the development of WSN, described in 3c.
- As described in 2b and 2c, workshops in QPR for Suicide Prevention are regularly offered to faculty/staff and students. Such training also contributes to stigma reduction.
- The CPSC Executive Director and Coordinator of Mental Health Initiatives have connections with local and statewide prevention networks such as the NU-Hope Task Force and the Utah Suicide Prevention Coalition.

**Institution Plan to Meet Recommendation (include required resources, measurable goals, action items, and timeline)**
We will continue efforts that contribute to stigma reduction, such as WSN and QPR. We will also research statewide and institution-based evidence-based stigma reduction campaigns in order to select one most relevant for the WSU student population. The Utah Department of Human Services is in the process of developing a suicide prevention program that will be utilized across the university.

- **Required Resources**
  - Funding for campaign-related materials. Costs may vary according to selected product(s).
  - See 3c regarding resources required to continue current levels of CPSC clinical coverage following termination of grant funding.
  - Access to the Dept. of Human Services suicide prevention program.
- **Measureable Goals**
  - Research relevant stigma-reduction campaigns and select one program to adopt.
  - Track suicide rates in the university community.
- **Action Items**
  - Utilize available resources, including local, state, and national networks, to identify stigma-reduction campaigns for consideration.
  - Follow templates to provide suicide prevention programming.
- **Timeline**
  - Complete research by mid-Spring, 2020.
  - Design campaign implementation during Summer 2020.
  - Rollout campaign Fall 2020.
  - Suicide prevention campaign rolled out upon Dept. of Human Services program completion.

**Lead and Other Collaborators**
- Amy Blunck, Coordinator of Mental Health Initiatives
- Dianna Abel, Executive Director of Counseling, Health, and Wellness

**Required additional resources from external sources (State Board of Regents, State appropriation, etc.)**
- Rather than different institutions hosting different programs, a stigma-reduction campaign may be most powerful if it is adopted by all USHE schools and funded for all by the State Board of Regents. If one program can be identified that is applicable to all USHE students, this option should be pursued.
**Strategy 3f:** Support and implement the higher education expansion of the SafeUT mobile app, including personalizing the SafeUT app for each institution and identifying a point of contact at each institution.

**Institution Current Status**
- The SafeUT mobile app rolled out at WSU in early December, 2018. Jeff Hurst, AVPSA/Dean of Students, is our point of contact.
- Since its inception, Dr. Hurst has received a total of 9 notifications from SafeUT. They included:
  - 2 test submissions
  - 1 tip for an inappropriate/trivial issue unrelated to mental health or safety
  - 4 concerns about a non-WSU student or a non-identifiable WSU student
  - 1 report of academic dishonesty, which was forwarded to the relevant department
  - 1 actionable issue, which was reviewed by the Strategic Threat Assessment and Response (STAR) team.
- CPSC staff incorporate awareness of SafeUT into most outreach activities and inform clients regularly about this resource.

**Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)**
We plan to continue marketing SafeUT in all appropriate venues, with a heightened emphasis on incoming freshmen.
- **Required Resources**
  - Uncertain funding requirements given initial state appropriation and expected institution contribution for subsequent years.
- **Measureable Goals**
  - Identify effective ways to advertise the availability of the SafeUT mobile app, especially with incoming freshmen.
  - Utilize marketing materials received from SafeUT.
- **Action Items**
  - Consult with Dani McKean, Director of Student Affairs Marketing, regarding advertising options and prepare plan.
- **Timeline**
  - Implement marketing plan during Wildcat Welcome Week, Fall 2020.

**Lead and Other Collaborators**
- Jeff Hurst, AVPSA/Dean of Students
- Dani McKean, Director of Student Affairs Marketing

**Required additional resources from external sources (State Board of Regents, State appropriation, etc.)**
- If the SafeUT app proves valuable at WSU, or at USHE schools in general, funding for continuation of this resource seems appropriate for consideration at the state level.

**Strategy 3g:** If supported by institutional data of student mental health needs, work toward the acquisition of therapeutic providers relative to the student body size and unique characteristics of the
institution consistent with minimum staffing ratios established by the International Association of Counseling Services (IACS).

**Institution Current Status**
- IACS-recommended minimum staffing ratios would yield 12-13 FTE counselors for the eligible student population at WSU. Current FTE counselor total is 8-11 FTE, depending on calculation strategy.
- Insufficient space impedes CPSC functioning at current staffing levels. We cannot acquire additional clinicians without additional space.

**Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)**
WSU Student Affairs administration and our Development Officer are well aware of CPSC limitations regarding space and funding. Options for resolution are considered in the context of other institution priorities.
- **Required Resources**
  - Significant funding will be required in order for WSU to approach IACS-recommended minimum staffing ratios. Such funding would include:
    - Salary dollars to increase salary offers to newly hired clinicians.
    - Salary dollars to address compression issues created by increased incoming salaries.
    - Construction funding to support major remodeling and/or the adoption/creation of new space.
- **Measureable Goals**
  - Increase space and staffing at CPSC to more closely reflect IACS recommendations.
- **Action Items**
  - Pursue smaller adjustments and accommodations as we await resources required for more complete solutions to space and funding issues. Such smaller initiatives include:
    - Secure funds to construct one additional clinical office from current footprint to accommodate current CPSC staffing.
    - Secure funds to continue one currently grant-funded .75 FTE clinical position if feasible in the context of available space.
- **Timeline**
  - Consult with appropriate Student Affairs administrators regarding construction or other space expansion options by November 30, 2019.
  - Determine approach to continuation or elimination of .75 FTE grant-funded clinical position. Begin requesting funds through SFRC in 2020-21 cycle if appropriate.

**Lead and Other Collaborators**
- Dianna Abel, Executive Director of Counseling, Health, and Wellness
- Brett Perozzi, Vice President for Student Affairs
- Jeff Hurst, AVPSA/Dean of Students
- Daniel Kilcrease, Executive Director of Student Affairs Auxiliaries

**Required additional resources from external sources (State Board of Regents, State appropriation, etc.)**
- Funding for space and salaries remains an ongoing priority. Any additional state-appropriated dollars would be greatly appreciated.
Recommendation #4: Develop Institutional Five-Year Mental Health Implementation Plans

In order to systematically evaluate whether USHE student mental health services and wellness improve over time, each institution will:

- **Strategy 4a:** Develop a five-year mental health implementation plan that is based on Regent-adopted recommendations and includes measurable institutional goals and assessments. The plan will be due summer 2019 with subsequent review by the Board of Regents.

- **Strategy 4b:** Prepare an annual report on progress on the institutional implementation plan that will be submitted to the institutional Board of Trustees and to the Board of Regents.

- **Strategy 4c:** When an institution hosts the Board of Regents, the institution will present on progress and efforts on mental health issues including mental health services utilization rates and wait times.

**Board of Regents Meeting Dates and Locations 2019-2020**

- August 1-2, 2019: Southern Utah University
- September 12-13, 2019: Utah State University
- November 15, 2019: Utah Valley University
- January 24, 2020: University of Utah
- March 26-27, 2020: Dixie State University
- May 15, 2020: Weber State University

**Institution Current Status**

- Current plan drafted by Dianna Abel, October 2019. Submitted to Brett Perozzi for review and submission.

**Institution Plan to Meet Recommendation (include required resources, measureable goals, action items, and timeline)**

Acknowledging that WSU student mental health must be a university-wide effort, we intend to create a coalition of individuals representing diverse campus constituents to focus on WSU student mental health. As part of their charge, this group will review and systematically address components of the WSU plan.

- **Required Resources**
  - Pending committee creation and clarification of charge.

- **Measurable Goals**
  - Create campus-wide buy-in and support for the WSU plan.

- **Action Items**
  - Capitalize on momentum created by Student Success Speaker Series presenter, Dr. Stuart Slavin, whose work centers on the role of mental health in college success. Utilize associated events to announce coalition development and gather interest.

- **Timeline**
  - Student Success Speaker event is scheduled for January 2020.
  - Compile coalition membership by late-February, 2020.
  - Hold one coalition meeting during Spring semester, 2020.

**Lead and Other Collaborators**
• Dianna Abel, Executive Director of Counseling, Health, and Wellness
• Brenda Kowalewski, Associate Provost for High-Impact Programs and Faculty Development
• Jeff Hurst, AVPSA/Dean of Students
• Brett Perozzi, VPSA

Required additional resources from external sources (State Board of Regents, State appropriation, etc.)
• Required support for campus-wide mental health coalition to be determined upon creation and charge clarification.