BEST PRACTICES IN CREATING DATA AND SURVEILLANCE SYSTEMS ON CAMPUSES AND LESSONS LEARNED

Learning from the GLS National Outcomes Evaluation

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WHY ESTABLISH DATA COLLECTION SYSTEMS ON CAMPUS?
STUDENT BEHAVIORAL HEALTH FORM

• Nature and type of behavioral health services available to students on campus
• Number of students receiving behavioral health services annually
• Nature and type of services received
• Screenings used through behavioral health services
• Number of students identified as at-risk through screenings
• Services provided for students identified as at-risk
CAMPUS PROFILE

SIZE OF CAMPUS

9.2% Small
32.9% Medium
57.9% Large

TYPE OF CAMPUS

80.3% 4-Year college
19.7% Community college

47.4% Primarily On-Campus Housing

Size and Setting based on 2016 Carnegie Classification of Institutes of Higher Education

(n=76 grantees, cohorts 7-10)
ESTABLISHING DATA COLLECTION PROCEDURES ON CAMPUS

1. Partnerships and Processes

2. Data Tracking
PARTNERSHIPS AND PROCESSES
GRANTEE STRATEGY

• Establish processes for reporting information to one central location

Example 1
The Behavioral Intervention Team includes the counseling center director and the intern supervisor

The intern supervisor also oversees data from 20+ interns
All information is reported to the program evaluation on a quarterly basis which is compiled at the end of the academic year for the SBHF
GRANTEE STRATEGY

• Creating shared understanding among units on campus

Example 2

Prior to the GLS grant, the campus police had not been asked to track the number of transports they provided for students. At the start of the GLS grant, staff from the counseling center, campus police, and the private EMS were asked to create a shared tracking system and communication protocol.
PARTNERSHIPS AND PROCESSES

ON-CAMPUS

97.4% of campuses offer BH services or on-campus emergency services

OFF-CAMPUS

98.7% of campuses offer referrals to an off campus provider

64.5% of campuses provide transportation to off-campus providers or the emergency department

(n=76 grantees)
### PARTNERSHIPS AND PROCESSES

<table>
<thead>
<tr>
<th>On-Campus</th>
<th>97.4% of campuses offer BH services or on-campus emergency services</th>
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</thead>
<tbody>
<tr>
<td>Receiving BH Services</td>
<td>5.7% of students on campus are receiving behavioral health services</td>
</tr>
<tr>
<td></td>
<td>3.9% on small campuses</td>
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<tr>
<td></td>
<td>5.2% on medium campuses</td>
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<tr>
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<td>6.1% on large campuses</td>
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(n=68 grantees)
PARTNERSHIPS AND PROCESSES

ON-CAMPUS

97.4% of campuses offer BH services or on-campus emergency services

REFERRAL SOURCES

29.1% of students identified at risk come in on their own (self-referral)

13.3% of students identified at risk are referred by faculty

7.0% of students identified at risk are referred by campus health services

6.4% of students identified at risk are referred by a peer

(n=50 grantees)
PARTNERSHIPS AND PROCESSES

ON-CAMPUS

97.4% of campuses offer BH services or on-campus emergency services

Policies for at Risk Students

Of students who were identified at risk of suicide...

52.9% of campuses always follow-up with the student at school to assess ongoing risk

16.0% of campuses always notify the dean or other faculty

5.8% of campuses contact the students’ RA

17.6% of campuses conduct an administrative case review to discuss the at-risk student

(n=72 grantees)
GRANTEE STRATEGY

• Establish MOUs with off-campus providers

Example 1

Hospital added a check box to intake forms “Are you a student at college X?”

Agreed to share quarterly, de-identified information with the campus about the number of students seen for BH issues
GRANTEE STRATEGY

• Shared staff

Example 2

The Student Health Center has a unique campus-community partnership where the health center is sponsored by a local nonprofit hospital.

Staff are hospital employees, while several other staff are college employees.

Health center EHR is hospital based and not connected to the college.

Mental health therapist is a college employee and is co-located with student health center staff.
PARTNERSHIPS AND PROCESSES

**OFF-CAMPUS**

- **98.7%** of campuses offer referrals to an off campus provider
- **64.5%** of campuses provide transportation to off-campus providers or the emergency department

**REFERRALS**

- **34.9%** of students identified at risk are referred to an off campus provider (n=26 grantees)

In the most recent year, **86.6%** of campuses report following up after a referral has been made (n=67 grantees)
DATA TRACKING
In the most recent year, **81.1%** of campuses have an electronic health record system (n=74 grantees)

- **17** campuses adopted an EHR over the course of the reporting window
ELECTRONIC HEALTH RECORD SYSTEMS

- 47.4% of campuses report that they are tracking suicide attempt information in their EHR (n=76 grantees)
ELECTRONIC HEALTH RECORD SYSTEMS

- **38.2%** of campuses report that they are tracking **deaths by suicide** in their EHR

- **84.2%** of campuses report that they are tracking **deaths by suicide** in some form

(n=76 grantee)
DATA COLLECTION CONSIDERATIONS
THINGS TO CONSIDER

- Multiple sources of data
- Definitions
- Defining and tracking on- and off-campus attempts and deaths
- Following-up with online screenings
- Data security requirements
USING THE DATA

• Understanding **patterns** of referrals
• Identifying **gaps** in policies
• **Sustainability** and partnership development
Partnerships and Processes
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Identify partners and linkages
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Consider ways to work with on-campus and off-campus providers
Partnerships and Processes

Identify partners and linkages

Consider ways to work with on-campus and off-campus providers

Create a shared understanding (who is responsible for what, when?)
Partnerships and Processes

- Identify partners and linkages
- Establish processes and policies (write them down!)
- Consider ways to work with on-campus and off-campus providers
- Create a shared understanding (who is responsible for what, when?)
Data Tracking
Consider how you can use data reports to improve services/processes.
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Assess what variables are collected currently and what is missing.

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Determine process for data collection and entry (who, how frequently).

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Consider how you can use data reports to improve services/processes

Assess what variables are collected currently and what is missing

Consider strategies for streamlining multiple data sources

Determine process for data collection and entry (who, how frequently)
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