

GUIDE TO CARE RESPONSE

The *Campus Assessment Response and Education* Team (CARE) identifies and monitors OCU students displaying moderate to extreme levels of concerning behavior. The goal is to intervene before a crisis takes place in a timely and measured manner that protects the welfare of the student and the safety of the Community. This is a quick guide for staff, faculty, and student employees to engage, report, and/or refer students with concerning behavior to the CARE team.

For more information and to submit a referral form, please visit:
REPORTIT.OKCU.EDU

LEVEL 1 - GENERAL OUTREACH DUE TO PERCEIVED CONCERNS

Student acting outside of their norm; missed a few classes; peers worried about their wellness but can't put their finger on what's wrong.

RESPONSE: CARE TEAM, HOUSING STAFF, SUPPORT COORDINATORS, FACULTY, STAFF MEMBER, OR RESIDENT ASSISTANTS.
<ul style="list-style-type: none">Email, phone call, or passing conversation with student: <i>How have you been?; Hi, I've noticed _____, can we have a brief chat about it?</i>A face-to-face meeting with trusted faculty/staff to address/name the behavior that could lead to academic issues.Referral to Counseling and/or other resources as needed.Communication with student success coordinator, or appropriate university personnel about the student.
How to address:
<ul style="list-style-type: none">Address the issue calmly, involving the student in the decision-making process. Ask them, <i>"How would you like to be helped?"</i>If appropriate, inquire about what outcome is sought or hoped for.Ask about what is disrupting the student's living arrangements, social, or academic matters.Be prepared to offer resources or referrals to CARE, Housing director, Counseling, etc.Report the concerns, meetings/conversations, and the student's response to the CARE team.
Recommendations for faculty and staff:
<ul style="list-style-type: none">Ask for a face-to-face meeting shortly after the concerning behavior takes place: <i>Can you come by my office? Can we set up a meeting soon? I'd like to talk to you about _____</i>. If the student does not respond or refuses, notify them you are sharing concerns with the CARE team and provide a timeline for that communication.Know about on-and-off campus resources: Tutoring, academic accommodations, campus counseling, the CARE team, their school's success coordinator, etc. Describe those resources and offer to follow up with an email with contact information. If in doubt of resources, connect with CARE team.At the meeting:<ul style="list-style-type: none">Let them know they are important and that having a concern for their wellness is not a bad thingName the behavior: <i>I noticed [you have missed classes, you seem anxious/less animated than usual, you sound like you are angry, I noticed you were crying, you miss work frequently] and I was worried about you. Can you tell me more about _____ so I know how to best help you be successful in my class?</i>Ask: <i>How can the [school, university, department] best support you? Is this situation disrupting your academic progress and how?</i>In closing: Let them know that there is support and that the University cares for them.
Recommendations for Resident Assistants:
<ul style="list-style-type: none">Connect with the student where it is already usual to encounter them: In passing, near their room/common area, cafeteria, around academic or athletic buildings.Ask about the student's recent signs of concern, inquire if and how this situation is disruptive to their living arrangements, social group, or academic success.Let them know that Housing and the CARE team can provide support, ask if they would be open to being connected to further resources.

OCUPD Emergency line: 405-208-5911

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LEVEL 2 - SIGNIFICANT ISSUES WITH DETRIMENTAL EFFECTS TO ACADEMIC SUCCESS

Missing several classes; little or no response to outreach; lack of attention or care for academic progress; peers greatly concerned for wellbeing; comments related to a general suicidal ideation (with no plan or means); non-lethal self-harm; depression/anxiety; burst of emotions; medical issues such as eating disorders or debilitating illness (mind or body), decreased socialization or self-care.

RESPONSE: CARE TEAM GUIDED AND PURPOSEFUL INTERVENTIONS VIA CARE PARTNERS, HOUSING, OR SUPPORT COORDINATORS

- Initiate request for meeting or “soft” wellness check (CARE team might specify window of time), sticking to a short interaction if prudent. Allow student to determine time and place when possible, respect their schedule, allow for phone or video calls if face-to-face is not possible.
- Address issue in a calmly, directly discussing the reason for the concern: *We were informed you missed classes due to _____; we have learned you have talked about wanting to hurt yourself, is this so? Why?*
 - If suicidal ideation is present, engage in Q.P.R. (*see below*)
- Give student the opportunity to help themselves, ask: *Do you have a plan to deal with this? What is your support system like.* Make notes of other individuals or resources the student mention that could be of assistance.
- Involve student in the decision-making process: *How would you like to be helped?*
- At the end, directly connect student to appropriate resource (counseling, pertinent staff or CARE team).
 - Offer to walk them there if appropriate or follow up shortly by connecting student and resource via email/phone.
- If appropriate: Schedule a follow up conversation, explain that, while others from CARE might reach out, the student’s records remain confidential (limited to only those staff members that need to know to help).
- Report interaction to CARE team swiftly.

Recommendations for interventionist

- If possible, practice difficult questions ahead of the meeting, specially how to implement Q.P.R. (*see below*)
- In the event the interaction is beyond your level of preparedness or comfort, contact the CARE team immediately.
- It might be necessary to explain that concerning behavior of this nature will not endanger the student’s standing at the university.

LEVEL 3 - IMMINENT DANGER TO – OR FROM – STUDENT

Active plan to end their life or harm others and access to means; comments such as, “I’m going to end it all,” “you won’t have to worry about me anymore after tonight”; social media posts with weapons and/or indirect comments about harming self or others; incapacitating illness; ACTIVE CRISIS.

RESPONSE: CARE TEAM, OCUPD, PROFESSIONAL HOUSING STAFF.

Indirect or unclear threats:

Notify the CARE team to connect directly and swiftly with student, or requests contact by pertinent staff (Housing, academic partners, etc.). This request may include:

- Reason for concern.
- Timeframe and description of urgency for intervention.
- Mode of intervention: Face-to-face, phone call, knock on door.
- Guidance on questions and course of action.

DIRECT AND CLEAR THREATS OR ACTIVE CRISIS:

Notify OCUPD (response might involve transporting student to a medical center)

After the emergency is addressed:

Share with the CARE team what is known about student’s wellbeing.

Q.P.R. (*Question, Persuade, Refer*) is an emergency mental health intervention for suicidal persons. It aims at identifying and *interrupting* the crisis, directing the student to the proper care.

1. **QUESTION:** Directly ask, "Are you thinking about suicide or wanting to kill yourself?"
2. **PERSUADE:** “Will you go with me to get help?” or “Will you let me assist you to get help?”
3. **REFER:** Refer to appropriate resource, escort them to it if possible, or make arrangements for help, getting student to agree with plan

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