STUDENT COUNSELING SERVICES

MENTAL HEALTH SERVICES POLICY GUIDELINES



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ELIGIBILITY

All actively enrolled residential, commuter, and local online students are eligible to receive counseling services. In the event that there is a crisis-related situation, Student Counseling Services (SCS) will initiate emergency response protocol for residential, commuter, and online students.

STUDENT CONTACT

To schedule an initial assessment appointment, contact SCS at (434) 582-2651 or visit our office located in Green Hall 1830.

AVAILABILITY

SCS operates on a "walk-in" model. Walk-in hours are Monday, Tuesday, Thursday, from 9:00 a.m. to 3:00 p.m. and Wednesday/Friday from 12:00 p.m. to 3:00 p.m. Students do not need a scheduled appointment for an Intake Assessment. Please keep in mind, SCS receives a high volume of requests for services each day, which may impact wait times before initial assessment. After the Intake Assessment, student appointments will be scheduled according to current availability on a first-come-first served basis. If a student prefers to access counseling services off-campus, contact information for local referral services will be provided. SCS does not place students on a waiting list. In the event that SCS availability does not match student availability, students will be given an off-campus referral during the Intake Assessment.

PRE-SCREENING

All students will be required to complete screening questions. Students who do not report an immediate life-threatening crisis will be seen for an Intake Assessment during published walk-in hours. Students who report an immediate life-threatening crisis will be provided a crisis assessment.

INTAKE ASSESSMENT

Students do not need a scheduled appointment for an Intake Assessment. For the Intake Assessment, the student will meet with a counselor in person to talk about their primary concerns and collaborate with the counselor to develop a continuing care plan. The continuing care plan may include campus-based resources, local care providers, or a combination of onand off-campus services. The continuing care plan may or may not include a referral within SCS. Appropriate referrals are given during the Intake Assessment if the student does not meet the requirements for the brief counseling services SCS is equipped to provide. Referrals may also be given in the event that SCS availability does not match student availability. The student will spend approximately 45-60 minutes with the counselor for the Intake Assessment. Please allow extra time to account for completing screening assessments and wait times.

REFERRAL SERVICES

Referrals for on- and off-campus resources will be provided according to professional recommendations for continuing care at any point throughout the counseling process. Referral sources encompass a range of professional and non-professional care providers, and may include, but not be limited to: inpatient hospital services, long-term residential care, outpatient care, licensed providers (LPC, LCP, LCSW, LMFT), psychiatry, general medical care/primary care provider (PCP), nutritional care, specialized medical care, substance abuse services, specialized testing, community services, social services, group counseling, psychological education workshops, electronic resources, wellness care providers, academic/tutorial services, disability services, pastoral counseling, and peer group supports.

STUDENT RESPONSIBILITY FOR OFF-CAMPUS CONTINUING CARE

Once a student is provided with a referral, it is the student's responsibility to contact the referred care provider to schedule an initial appointment and attend all appointments, as scheduled. While taken into consideration, referrals will not be based on the convenience of the location, means of transportation, insurance restrictions, or financial limitations. It is requested that the student confirm the status of the initial appointment date with the referred care provider, or to inform SCS of any important changes to the continuing care plan. Following the Intake Assessment, SCS may provide additional referral sources, and a SCS staff member and/or intern may make follow-up contact with the student as needed for a case management session.

CRISIS ASSESSMENT

Students reporting potentially life-threatening mental health concerns (i.e., suicidal or homicidal thoughts, irrational thought, lack of caring for self, psychosis, and the like) may be referred to Student Counseling Services for a Crisis Assessment. During established office/walk-in hours, the student will be seen at Student Counseling Services. As with all appointments, the student will be asked to complete assessment paperwork and will then meet with a counselor to determine the appropriate level of care. After hours, the student may be seen at a local emergency room for a crisis assessment.

CRISIS SUPPORT SERVICES

Students seen at SCS are evaluated by mental health professionals trained in recognizing mental health crises. Should the student be assessed as posing a potential risk of harm to

themselves or others, the counselor or staff may refer that student to the nearest emergency room for an additional hospital-based mental health evaluation. We understand sending a student to a hospital could be upsetting to some. Any decision to refer a student to an outside mental health provider is considered carefully and done with the best interest of the student in mind. The mandates for mental health professionals to act prudently and in the best interests of the client during mental health crises are likewise established in the ethical tenets of the American Counseling Association, American Psychological Association, and National Association of Social Workers.

If a student meets these criteria but then refuses to go to the emergency room voluntarily, the counselor may be legally-obligated to petition a magistrate for an Emergency Custody Order (ECO). These circumstances are mandated by statute within the Commonwealth of Virginia, as defined by <u>§ 37.2-808</u>. This type of emergency custody is rarely requested by SCS staff. Counseling staff work diligently to provide supportive counseling during crises, and most students do agree to go to the emergency room voluntarily.

In the event a hospital-based evaluation is required, Student Counseling Services will not transport students. Once a counselor recommends a student attend an evaluation at an emergency room, LUPD is called and ensures safe and timely transfer of the student to the emergency room providers. Concerns related to LUPD, and their policies and practices, should be addressed directly with LUPD.

MANDATORY POST-HOSPITALIZATION APPOINTMENT AT SCS

If the student is admitted for inpatient psychiatric hospitalization, SCS requests that student attend a Post-Hospitalization Appointment (PHA) prior to returning to classes. The Post-Hospitalization Appointment will include an assessment, identify any safety concerns, and review the discharge paperwork. Coordination of care is essential after hospitalization, and SCS staff work to liaise with other departments, as needed, to ensure the best possible outcome for the student.

THIRD PARTY CONTACT WITH SCS: CRISIS REPORT

Anyone may initiate contact with SCS to express concern for a currently enrolled student. If a third-party reports concern that a student is experiencing a life-threatening crisis, all third parties will be directed to immediately contact LUPD at (434) 592-3911 or 911.

SCS does not provide emergency medical or mental health care. SCS does not prescribe medications or medication management services. SCS does not provide emergency transport services.

THIRD PARTY CONTACT WITH SCS: NON-CRISIS REPORT

If a third party reports concern that a student is experiencing a non-crisis event, a brief review of non-crisis counseling services available at SCS will be provided. While concerned third parties may consider a student's engagement of SCS services as necessary, students 18 years or older reserve the right to decline or utilize these services. SCS services are provided strictly on a voluntary basis. SCS does not initiate contact with a student following a third party report. All students must contact SCS directly to access counseling services.

In order to protect confidentiality, SCS is legally prohibited from sharing information with a third party concerning the status of student contact with SCS without the student's expressed, written consent.

Third parties are encouraged to report concerns by filing the OEC/Title IX Report or the CARE Team Report on the <u>Speak Up</u> website as appropriate.

CONFIDENTIALITY

Student Counseling Services (SCS) employees/interns are entrusted with maintaining the confidentiality of those students seeking services at SCS. SCS is responsible for the confidentiality of student counseling and educational records. In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA) and Health Insurance Portability and Accountability Act (HIPPA), the counseling and educational record of each student is considered confidential. SCS is responsible for declaring, implementing, and enforcing policies regarding the access to counseling and educational records.

SCS staff with legitimate interest may have access to student counseling and educational records. Information shared in SCS counseling sessions and subsequently recorded in a student's file are strictly confidential and will not be released without expressed, written consent in accordance with HIPAA privacy rules and restrictions outlined to protect clients seeking treatment.*

The Family Education Rights and Privacy Act of 1974 (FERPA) provides that student records maintained by physicians, psychologists, psychiatrists, or other recognized professionals and paraprofessionals are not education records. Student files do not become part of any permanent educational record at the university and remain the confidential property of SCS.

If a student indicates the intent to share counseling information with a third party, the counselor must discuss the positive and negative consequences, actual and potential, of such a disclosure prior to the release of information. Once a student's request to release information is considered clinically informed, a written authorization for release of information will be signed and dated.

*NOTE: Students seeking treatment for alcohol or substance abuse are protected by Federal Regulations (42 CRF Part 2), which prohibits a recipient from making any further disclosure of alcohol or substance abuse treatment information unless expressly permitted by written

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authorization of the person to whom it pertains or otherwise permitted by 42 CFR Part 2. These Federal Regulations also restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

In keeping with the Cleary Act Federal Register Vol. 79, No. 202, when appropriate, SCS counselors will inform the persons they are counseling to report crimes on a voluntary basis to the necessary parties—e.g. Title IX and/or LUPD.

LIMITS OF CONFIDENTIALITY

Exceptions to maintaining student confidentiality may include, but not be limited to the following:

- a. A student is suspected to be at imminent risk of causing physical harm to self or others.
- b. A student is at risk of suffering harm due to lack of capacity to protect oneself from harm or to provide for his/her basic human needs.
- c. There is a substantiated suspicion that a child, elder, or disabled person is being sexually or physically abused or is at risk of such abuse.
- d. A valid court order is issued to obtain the student's records.
- e. During emergencies when critical information is necessary to ensure student safety.
- f. In the event a student is hospitalized for mental health reasons via emergency services, SCS will contact your parent(s)/legal guardian(s) upon request.
- g. In instances where the counselor consults with SCS supervisors and professional peers to enhance the quality of a student's care.
- h. SCS administrative staff access and utilize information to perform administrative tasks, such as scheduling, creating client records, etc.
- i. During research activities when student names and identifying data are removed from the cases and data is examined in a group format to analyze trends, the effectiveness of services, and changes in the student population seeking services at SCS. Specific data that could lead to the identification of a particular student is expressly prohibited.
- j. For educational/training purposes when SCS staff/interns and their registered supervisors review client information and digital recordings to enrich the counselor's professional skills and abilities. Such digital recordings will be erased following the supervisory process.

The decision to share student information is not pursued without considerable scrutiny on the part of SCS counseling staff. In non-emergency situations, the counselor will make every effort to contact the student to explore the impact of the decision to release or not to release confidential information. All decisions to release information about a student will conform to the ethical standards for counselors and psychologists.

A decision to breach student confidentiality may be informed by, but not limited to, a review of LU campus-based reports, hospital/ER reports, MD/Psychiatry reports, and clinical case history. The SCS Executive Director will maintain sole responsibility for the decision to breach confidentiality and initiate contact with a third party. Anyone suspecting that a violation has occurred should report these suspicions to an SCS Executive Director. If it is determined that a

violation of the policy has occurred, an investigation of the breach will be pursued, and a decision will be made concerning disciplinary action or termination.

SCOPE OF PRACTICE

- 1. SCS does not provide medical services.
- 2. SCS does not provide services after office hours.
- 3. SCS does not provide MD / Psychiatry medical assessments / supervision or storage of prescription medications.
- 4. SCS does not confiscate or house weapons of any kind.
- 5. SCS does not provide transportation services.
- 6. SCS does not provide academic / disability services.
- 7. SCS does not provide assessment or document requests for Emotional Support Animals for students not receiving ongoing counseling.
- 8. SCS does not perform mandatory court ordered assessments or treatment.
- 9. SCS does not provide legal counseling.
- 10. SCS does not provide counseling services to persons who are not actively enrolled residential, commuter, or local online students.
- 11. SCS does not provide counseling services to faculty and staff unless they are a currently enrolled student.

LIMITATIONS

Students may be referred or denied services due to, but not limited to, the following events:

- 1. Students who require frequent utilization of SCS crisis assessment / support services.
- 2. Students who require frequent LUPD emergency response services.
- 3. Students with a history of multiple inpatient psychiatric hospitalizations due to chronic suicidality, homicidality, or psychosis.
- 4. Students at risk due to lack of capacity to protect oneself from harm or provide for their basic human needs.
- 5. Students who lack the ability to maintain adequate self-care or perform activities of daily living associated with a higher education environment.
- 6. Students who have had extensive treatment in the past and require extensive long-term treatment.
- 7. Students presenting with a concern or disorder that requires specialized services or resources not sufficiently available at SCS.
- Students presenting concerns with disordered eating who are unwilling to sign an agreement to participate in all recommended aspects of treatment including, but not limited to, dietary and medical services.
- 9. Students who are unable to sustain adequate self-care during academic breaks.

- 10. Students who have a frequent history of not attending SCS appointments without notification or abruptly discontinue counseling services without prior notice against clinical advice (ACA).
- 11. Students who are unwilling to utilize continuing care providers, as referred, or who make repeated requests to change care providers.
- 12. Students displaying harassing, menacing, or threatening behaviors to the college community or who demonstrate an inability to maintain adequate self-control.

Referrals may be informed by, but not limited to, a review of LU campus-based reports, hospital/ER reports, MD/Psychiatry reports, and clinical case history. SCS staff will use clinical discretion according to real time events and may be assisted by peer and supervisory consultations, as needed. The SCS Executive Director will maintain final responsibility concerning clinical decisions to terminate services or refer.

TERMINATION

Students may voluntarily terminate SCS services at any time. SCS counseling staff reserve the right to terminate services according to clinical discretion. Moreover, services may be terminated due to non-compliance (e.g., two no-shows, excessive cancellations or tardiness, etc.).

RECORDS

- 1. Counseling records are stored in a protected, HIPAA-compliant format (Health Insurance Portability and Accountability Act of 1996).
- Clients have the right to request their counseling records. Counselors provide reasonable access to records and copies of records when requested by competent clients. Counselors limit the access of clients to their records, or portions of their records, only when there is compelling evidence that such access would cause harm to the client (ACA, 2014, B.6.e). All requests for counseling records need to be submitted in writing.

PRACTICUM AND INTERNSHIP COUNSELING STAFF

SCS counseling services are provided by credentialed professionals and graduate-level practicum and internship students. All practicum and internship counselors are supervised and evaluated under a licensed professional according to guidelines established by the Council for Accreditation of Counseling and Related Educational Programs (CACREP), American Psychological Association (APA), or Council on Social Work Education (CSWE).

CODE OF ETHICS

SCS operates under the ethical codes established by the American Counseling Association (ACA) and the American Psychological Association (APA), which serve as the primary guidelines for professional behavior and practices at SCS.