OMB No. 0930-0286 Expiration Date: 05/31/10

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Garrett Lee Smith Memorial (GLS) Campus Case Studies

Focus Group Moderator's Guide - FS (Faculty/Staff Version)

Date : (Today's Date) □□/□□/□□□□			
Site: (Name of Campus)			
Moderator:			
Moderator:			

Instructions for moderator: When to Use: This focus group will be conducted with representatives of the campus faculty and staff. The local program staff will be responsible for recruiting respondents for this focus group. The questions in this focus group guide are designed to obtain information about: faculty involvement and awareness of suicide prevention efforts on campus, campus mental health services, and campus attitudes towards mental health. Administered by: Staff from the Macro International cross-site evaluation team. Completed by: campus faculty and staff.

Introduction

Thank you very much for agreeing to participate in this discussion group. My name is [facilitator] and I will be leading the discussion today. [Notetaker] is also here to take notes. Before we get started, I want to take a few minutes to tell you what to expect from the discussion and to go over a few things with you. After that, we will have an opportunity to introduce ourselves.

As you may recall, Macro International Inc., has been contracted by the Substance Abuse and Mental Health Services Administration (SAMHSA) to conduct the cross-site evaluation of the Campus Suicide Prevention and Early Intervention Program. A special case study examines how campuses implement a public health approach to suicide prevention. The "public-health approach" is a multi-departmental, comprehensive strategy that targets risk and protective factors campus-wide and on an individual basis. We are interested in knowing about faculty and staff perceptions of suicide prevention and other mental health promotion efforts on campus, as well as faculty involvement in these various efforts.

The specific purpose of this focus group is to describe how faculty and staff would characterize the mental health climate on campus; their awareness and involvement in suicide prevention and mental health promotion efforts; as well as their opinions on how faculty should be involved. We are interested in knowing your personal experiences, as well as your perceptions of other faculty and staff experiences.

The discussion today is confidential. We will not attribute your name with any comments made or have any identifiable information in any reports we produce. We will keep your specific responses in confidence, and would ask that you respect one another's privacy in the same way.

We ask that you be frank and honest about issues of concern and importance to you. We do not expect you to tell us anything that you would be uncomfortable sharing with the group, nor do we expect everyone to answer every question. We are interested in all perspectives and appreciate your input, as it will inform other components of this study as well as other communities about practice-based evidence approaches used in systems of care.

Informed Consent

At this time everyone should have had an opportunity to sign the informed consent. If not, please let us know and we will review the informed consent with you in private before we begin. As the informed consent indicates, your participation is completely voluntary and you may leave at any time. Also, we will be audio-taping the discussion today. Be assured that the tapes will be reviewed to gather data only, and will be transcribed without the use of your names.

Logistics

[Direct participants to the restrooms (if needed). Explain when and how participants will be paid for their participation]

Ground Rules

In order to make our discussion more comfortable and run smoothly for everyone, there are a few ground rules that we will need to follow: [Posted on flip chart]

- < Everyone's input is important and I will work hard to make sure everyone has a chance to speak.
- < Allow one person to speak at a time.
- < Please avoid side conversations.
- < I may need to cut a discussion short in the interest of time.
- < Show respect to everyone at all times. It is ok to disagree with someone's opinion.
- < Please turn off all cell phones.
- < All responses are confidential, and the names of others who are participating in the discussion is also confidential, so feel free to speak your mind.
- < Everyone is on a first name basis, so please use only your first name.

Do you have any questions before we begin? Let's start with introductions. Please tell us your first name.

DISCUSSION QUESTIONS

- 1. In the past five years, how would you describe attitudes on campus towards issues surrounding student mental health and wellness?
 - a. What changes have occurred?
 - b. How are policy changes communicated to [insert faculty or staff]
- 2. What are some of the things that your campus is doing to promote student mental health and wellness?
 - a. What prevention programs are you aware of? For example, alcohol and drug abuse prevention, sexual assault prevention, or suicide prevention? What strategies are these programs using?
 - b. Which programs are most effective? What makes them effective?
- 3. Have any of you participated in prevention trainings for suicide, mental health, depression, substance abuse, or violence? What trainings have you participated in?
 - a. How was the training helpful?
 - b. How have you used the skills you learned?
 - c. How has the training change the way you interact with your students?
- 4. One thing that campuses often struggle with is finding a way to reach out to faculty with information and trainings about student mental health and wellness. What are some of the ways your campus has successfully gotten faculty involved?

- a. Can you recommend strategies for raising faculty awareness about students at risk for suicide, substance abuse, or depression?
- b. Why do you think that it is difficult to engage faculty?
- 5. How involved are most [insert faculty or staff} in helping students with issues related to student mental health and wellness?
 - a. What would you do if you became aware of a student in distress?
 - b. Do you think that, in general, it is the responsibility of [insert faculty or staff] to intervene with a distressed student? Why or why not?
 - c. Is there a protocol that you should follow if you identify a distressed student? What is it?
- 6. What are some of the offices on campus where you might refer a student if you suspected that they were stressed, depressed, or otherwise need additional mental health services?
 - a. Which of these services do you think are most popular with students?
 - b. Are there some services that are easier for students to access than others? Why?
 - c. As far as you know, what are some of the reasons why students would not or could not access these services?
- 7. Finally, to what degree are these issues openly discussed on campus?
 - a. How is mental health discussed amongst colleagues or in staff meetings?
 - b. Do you ever hear students talking about mental health and mental illness? How would you characterize those conversations?
 - c. How would you characterize attitudes about mental health?

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Garrett Lee Smith Memorial (GLS) Campus Case Studies

Campus Case Study Interview – F (Faculty Version)

Interviewer:			
Site: (Name of Campus)			
Date: (Today's Date) □□/□□/□□□□			

Instructions for interviewer: When to Use: This qualitative interview will be conducted with an identified representative of the campus faculty. The local program staff will be responsible for identifying respondents for this interview. The questions in this interview are designed to obtain information about: student risk and protective factors, campus mental health services, and campus attitudes towards mental health. Administered by: Staff from the Macro International cross-site evaluation team. Completed by: campus faculty who are members of a mental health/suicide prevention advisory group, coalition, or committee.

We are interested in interviewing you because of your participation on a campus committee dealing with student mental health and/or wellness, as well as your perspective, as faculty, on campus attitudes around mental health, student behavior and risk factors, as well as the offices and efforts on campus which promote student wellness.

- 1. To begin, could you tell me about the responsibilities of this [committee or initiative]?
 - a. Can you give me some examples?
 - b. What is your role on the committee?
 - c. Who are other campus community members represented on the committee?
- 2. One of the things that I want to talk to you today about is student mental health and general wellbeing. Do you think that there is a difference between the two? What is it?
 - a. How would the school officially define student mental health, as opposed to general student wellbeing?
 - b. Are there any differences in general campus attitudes towards mental health as opposed to overall wellbeing?
- 3. What are the departments, offices, and committees involved in student mental health and wellness?
 - a. To what degree do these groups collaborate?
 - b. Is there an overarching plan? What is it?
- 4. Are you aware of any policies and procedures that are in place for students, faculty, and staff to share mental health concerns about others on campus? What are they?
 - a. Can you give me an example of a time that you have had report a concern about a student? If not, have you heard of a faculty member doing so?
- 5. How are faculty expected to be involved with promoting student mental health and wellness?
 - a. If there is an expectation, how is this communicated to faculty?
- 6. Beyond your participation on the committee, have you attended any trainings or events directed to raise the awareness and skills of faculty around issues of student mental health? What trainings or events have you attended?
 - a. Where can faculty get information on the identification and referral of students who may need additional mental health support?
- 7. We work with dozens of campuses, and many of them report that it is often difficult to engage faculty in issues of student mental health and wellness. Do you find that to be the case on your campus? Why or why not?
 - a. What strategies has your campus employed to get faculty involved?
 - b. How do they encourage attendance at trainings and other events?
- 8. What would you recommend that your campus do to further increase faculty involvement and attendance at trainings or awareness events?
- 9. I want to shift a bit, and ask you some questions about the students on [insert campus name]. Tell me about them]. What is unique about them?
 - a. What student-level risk factors are you aware of?
 - b. Are any groups more at risk for becoming victims of violence or harassment than others? Which groups and why?
 - c. What about groups more likely of using violence? Which groups and why?
 - d. Are there any groups that are more at risk for drug and alcohol abuse? Which groups and why?

- e. Are there any groups that are more at risk for depression? Which groups and why?
- 10. I'm going to ask you about some of the different situations that students might experience, and what you would recommend to them if you became aware.
 - a. If you had a student who had a drug or alcohol problem, what would your advice to them be?
 - i. What places on campus would help them with this?
 - ii. How likely do you think they would be to seek services here? Why/Why not?
 - b. What if the student was a victim of violence or harassment? Would you advise them to get help?
 - i. What places on campus would help them with this?
 - ii. How likely do you think they would be to seek services here? Why/Why not?
 - c. If you had a student who seemed really depressed? What would you do in that situation?
 - i. What places on campus would help them with this?
 - ii. How likely do you think they would be to seek services here? Why/why not?
 - d. What if the student was suicidal? Where would you refer them?
 - i. What places on campus would help them with this?
 - ii. How likely do you think they would be to seek services here? Why/Why not?
 - e. What if they were really stressed about school or money? What would you tell them to do?
 - i. What places on campus would help them with this?
 - ii. How likely do you think they would be to seek services here?
- 11. What have you observed to be student's attitudes around help-seeking?
 - a. Are some helping services more acceptable to students than others? For example academic support as opposed to counseling services? Why?
- 12. What are some of the things on campus that encourage help-seeking behaviors in students?
- 13. What is the process for students seeking mental health care? Is it easy or difficult?
- 14. How do you think mental health issues are generally perceived on campus? Do you think that there is a stigma around depression and other mental health issues, or do you think that generally people are accepting of them?
 - a. Is there a difference between faculty, staff, and students in terms of their attitudes? What is that difference?
- 15. Are there any needs that you have observed in students that aren't currently being met through services on campus?
- 16. What are some of the barriers on campus to students receiving mental health services?
- 17. Those are the last of my questions. Before we end, do you have any questions, or anything else that you would like to tell me?

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Garrett Lee Smith Memorial (GLS) Campus Case Studies

Campus Case Study Interview – P (Prevention Staff Version)

nterviewer:			
Site: (Name of Campus)			
Date: (Today's Date) □□/□□/□□□□			

Instructions for interviewer: When to Use: This qualitative interview will be conducted with an identified representative of the campus staff. The local program staff will be responsible for identifying respondents for this interview. The questions in this interview are designed to obtain information about: student risk and protective factors, campus mental health services, and campus attitudes towards mental health. Administered by: Staff from the Macro International cross-site evaluation team. Completed by: campus staff members who work on various prevention (substance abuse, violence, sexual assault) efforts.

- 1. One of the things that I want to talk to you today about is student mental health and general wellbeing. Do you think that there is a difference between the two? What is it?
 - a. Is there any difference in general campus attitudes towards mental health as opposed to overall wellbeing?
 - b. How do you think mental health issues are generally perceived on campus? Do you think that there is a stigma around depression and other mental health issues, or do you think that generally people are accepting of them?
- 2. What are the departments, offices, and committees involved in student mental health and wellness?
 - a. To what degree do these groups collaborate?
 - b. Is there an overarching plan?
- 3. Tell me about the students at [insert campus name]. What is unique about them?
 - a. What student-level risk factors are you aware of?
- 4. Are you aware of any students being more at risk for abusing drugs or alcohol than others?
- 5. What about violence? This could be anything from a fist-fight, to dating violence, to sexual assault. What types of violence are you aware of on your campus?
 - a. Are some types of violence more typical than others?
- 6. Are any groups on campus more likely to be targeted with violence or harassment? For example, racial or ethnic minorities, or LGBTQ students?
- 7. Are there any groups of students that are more likely to use violence?
- 8. Are there any other student risk behaviors that you are aware of?
- 9. Tell me about your work. I specifically want to talk about the different prevention programs that happen on campus. Could you give me an overview of the different programs on campus?
 - a. What about drinking and drug use?
 - b. dating violence or sexual assault?
 - c. Mental health promotion?
 - d. suicide?
- 10. What are the strategies used by these programs? And by that I mean, what student risk factors (on both the individual and group level) that these programs are trying to target?
 - a. In what ways do the programs overlap or work together?
 - b. What are some of the key similarities and differences between prevention programs on campus?
- 11. What protective factors are these programs trying to build?
- 12. Can you give me an example of some of the messages used by prevention programs and/or awareness campaigns on campus?
- 13. What prevention efforts have been most effective? How do you know?
 - a. Which programs have been most popular with students? Why?
 - b. What messages have been most successful?
 - c. Do you feel these programs have reached the intended populations? Why or why not?
 - d. What are some lessons learned from your involvement with these programs?

- 14. What are some of the things on campus that have encouraged help-seeking behaviors in students?
- 15. What would you recommend to other prevention programs? What would you tell them to avoid?
- 16. Are there any needs that you have observed in students that aren't currently being met through services on campus?
- 17. What's the most challenging thing about your work?
- 18. What makes your job easier?
- 19. What is most rewarding about the type of work you do?
- 20. Those are the last of my questions. Before we end, do you have any questions, or anything else that you would like to tell me?

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Garrett Lee Smith Memorial (GLS) Campus Case Studies

Campus Case Study Interview – CP (Campus Police Version)

Date: (Today's Date) □□/□□/□□□□	
Site: (Name of Campus)	
nterviewer:	-

Instructions for interviewer: When to Use: This qualitative interview will be conducted with an identified representative of the campus security or police staff. The local program staff will be responsible for identifying respondents for this interview. The questions in this interview are designed to obtain information about: student risk and protective factors, campus mental health services, and campus attitudes towards mental health. Administered by: Staff from the Macro International cross-site evaluation team. Completed by: campus police or security staff members.

We are interested in interviewing you because of your role on campus, particularly as it relates to involvement with students and their mental health concerns, drinking and drug use, and violence towards themselves and others.

- 1. So to begin, can you tell me what your role is in aiding or dealing with students who are suicidal, experiencing substance abuse issues, or threatening violence?
- 2. Can you give me some examples of times that you have responded to a student, or a group of students, around issues of alcohol or drug abuse?

Probe: Is there a specific policy or protocol related to that kind of a situation?

3. Can you give me an example of a time that you have responded to a student who is threatening to attempt suicide?

Probe: is there a specific policy or protocol related to that situation?

- 4. What if the student has already made a suicide attempt? How do you respond?
- 5. What about a situation where a student was threatening violence towards others? Have you ever responded in those circumstances?

Probe: what are the protocols governing that situation?

- 6. What types of the situations that we've discussed do you respond to most frequently?
- 7. Are there different protocols depending on whether it is a weekend or a weekday?
 - a. What about time of day?
- 8. If there was a student that a faculty, staff member, or another student was concerned might be at risk for violence or suicide, how and when would that come to your attention?
- 9. Are students ever monitored by campus police or campus security?
- 10. What policies monitor the presence of firearms on campus? How do you monitor their use?
- 11. Who makes the decisions around protocols and policies that deal with crisis response and student well-being?
- 12. How have the policies and protocols that govern your department's response changed in the last five years?
 - a. How did those come about?
 - b. Has your department been involved in that decision-making?
- 13. Does your department expect you to go to regular trainings regarding crisis response? What about student well-being?
 - a. What about other staff-members?
 - b. What trainings have you attended in the last two years?
 - c. What additional trainings would you like to receive?
- 14. What makes it hard to do your job?
- 15. What makes it easier for you to do your job?
- 16. Those are the last of my questions. Before we end, do you have any questions, or anything else that you would like to tell me?

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Garrett Lee Smith Memorial (GLS) Campus Case Studies

Campus Case Study Interview – CC (Counseling Center Version)

nterviewer:				
Site:	(Name of Campus)			
Date: (Today's Date) □□/□□/□□□□				

Instructions for interviewer: When to Use: This qualitative interview will be conducted with an identified representative of the campus counseling staff. The local program staff will be responsible for identifying respondents for this interview. The questions in this interview are designed to obtain information about: student risk and protective factors, campus mental health services, and campus attitudes towards mental health. Administered by: Staff from the Macro International cross-site evaluation team. Completed by: campus counseling staff members.

- 1. One of the things that I want to talk to you today about is student mental health and general wellbeing. How are these generally defined on campus?
 - a. Is there any difference in general campus attitudes towards mental health as opposed to overall wellbeing?
- 2. Have you observed an increase of students seeking mental health services? If yes,
 - a. Why do you think this is?
 - b. Are the financial and political resources available to support this increased demand?
 - c. How has the counseling center budget changed in the last five years?
- 3. Tell me about the students at [insert campus name]. What is unique about them?
 - a. What student-level risk factors are you aware of?
- 4. What are some of the typical issues that might lead a student to seek services at the counseling center?
 - a. Have any of these increased more than others in the last five years?
 - b. Have you observed any trends in students who seek services for substance abuse issues?
 - c. Have you observed any trends in students who seek treatment for depression?
 - d. What about other mental health issues or diagnoses?
 - e. Any other trends that you have noticed?
- 5. We're also really interested in the protective factors that naturally occur in the students on your campus. To clarify, by protective factor I mean something students may do to protect their safety. For example, having a designated driver when drinking so they get home safely; or having someone they are accountable to when they are depressed or experiencing substance use issues.
 - a. What factors have you observed to be protective against alcohol abuse? Drug abuse?
 - b. What have you noticed seems to be protective against depression?
 - c. What factors in students are protective against suicide?
 - d. What other protective factors have you observed?
- 6. Tell me about the different prevention and student wellness programs on campus.
 - a. What about drinking and drug use?
 - b. dating violence or sexual assault?
 - c. Mental health?
 - d. Suicide?
- 7. What are the strategies used by these programs? And by that I mean, what student risk factors (on both the individual and group level) that these programs are trying to target?
 - a. In what ways do the programs overlap or work together?
 - b. What are some of the key similarities and differences between prevention programs on campus?
- 8. What protective factors are these programs trying to build?
- 9. What prevention efforts have been most effective? How do you know?
 - a. Which programs have been most popular with students? Why?
 - b. Do you feel these programs have reached the intended populations? Why or why not?
- 10. I am now going to ask you some questions related to policies and procedures on campus that may support student mental health and wellness efforts.

- 11. What policies and procedures are in place for students, faculty, and staff to share mental health concerns about others on campus?
- 12. If a student, faculty, or staff member reports that a student is having problems (suicide, violence, substance abuse), what happens to that information?
 - a. Are these students monitored in any way?
 - b. What behaviors are most concerning to the campus?
- 13. What are other school policies governing how you communicate about a student's mental health issue?
 - a. When are parents involved?
 - b. Who is involved with case review and/or treatment planning?
- 14. What are the guidelines around consultations with parents or guardians?
- 15. Is there a maximum number of sessions a student may receive?
- 16. What services are available for students without health insurance?
- 17. How are the decisions governing counseling center service acquisition made?
- 18. How are policy decisions around mental health services made?
 - a. What about student wellness?
- 19. What are policy change initiatives undertaken in the past five years?
 - a. What is the policy direction in the next five years?
- 20. Those are the last of my questions. Before we end, do you have any questions, or anything else that you would like to tell me?

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Garrett Lee Smith Memorial (GLS) Campus Case Studies

Campus Case Study Interview – A (Administrator Version)

Date: (Today's Dat	te) 🗆 🗆 / 🗆 🗆 🗆 🗆	
Site: (Name of Ca	mpus)	
nterviewer:		

Instructions for interviewer: When to Use: This qualitative interview will be conducted with an identified representative of the campus administration. The local program staff will be responsible for identifying respondents for this interview. The questions in this interview are designed to obtain information about: student risk and protective factors, campus mental health services, and campus attitudes towards mental health. Administered by: Staff from the Macro International cross-site evaluation team. Completed by: members of the campus administration.

- 1. One of the things that I want to talk to you today about is student mental health and general wellbeing. Do you think that there is a difference between the two? What is it?
 - a. Is that how the school would officially define student mental health as opposed to general student wellbeing?
 - b. Is there any difference in general campus attitudes towards mental health as opposed to overall wellbeing?
- 2. What are the departments, offices, and committees involved in student mental health?
 - a. What about student wellness?
- 3. What prevention and wellness initiatives are there on campus?
 - a. What about drinking and drug use?
 - b. Dating violence or sexual assault?
 - c. Mental health?
 - d. Suicide?
- 4. To what degree do these prevention and wellness initiatives collaborate?
 - a. Is there an overarching plan?
- 5. What are the risk behaviors that you have observed in your student population?
 - a. Are any groups more at risk to be victims of violence or harassment than others?
 - b. What about groups more likely to be violent?
 - c. Are there any groups that are more at risk for drug and alcohol abuse?
 - d. Are there any groups that are more at risk for depression?

I am now going to ask you some questions related to policies and procedures on campus that may support student mental health and wellness efforts.

- 6. What policies and procedures are in place for students, faculty, and staff to share mental health concerns about others on campus?
- 7. Is technology used to communicate or monitor student mental health? Examples: webbased reporting system, facebook/myspace monitoring, text messaging in emergency situations.
- 8. Is there a mandatory reporting policy when students who show signs of suicide or express suicidal ideation?
 - a. What is the role of faculty/staff in cases where students show signs of suicide or suicidal ideation?
- 9. If a student, faculty, or staff member reports that a student is having problems (suicide, violence, substance abuse), what happens to that information?
 - a. Are these students monitored in any way?
 - b. What behaviors are most concerning to the campus?
- 10. What are other school policies governing how you communicate about a student's mental health issue?
 - a. When are parents involved?
 - b. Who is involved with case review and/or treatment planning?
- 11. Are there any circumstances that require a student to utilize counseling center services?
- 12. How would you characterize the political and financial resources supporting departments dealing with student MH and related services?

- a. How do departments that with student mental health issues and services get funding or increase funding when necessary?
- b. How has the budget for mental health services changed over the past five years?
- 13. What are the school emergency mental health protocols?
- 14. What is the crisis/response protocol for responding to someone who has attempted/committed suicide or committed a violent act on campus?
 - a. Who is involved?
 - b. What if the event occurs "after hours"?
- 15. Are there procedures are in place to address a suspected substance use issue? What are they?
 - a. Who is involved?
- 16. Are there procedures are in place to allow students to report harassment? What policies address harassment?
 - a. Who is involved?
- 17. Are there any policies that limit student access to the roofs of buildings or otherwise prohibit jumping?
 - a. What about physical barriers to hanging? Are there "breakaway" clothes racks and shower rods in the residence halls?
- 18. What policies monitor the presence of firearms on campus? How do you monitor their use?
- 19. How are policy decisions around mental health services made?
 - a. What about student wellness?
- 20. What are policy change initiatives around student wellness undertaken in the past five years?
 - a. What is the policy direction in the next five years?
- 21. Those are the last of my questions. Before we end, do you have any questions, or anything else that you would like to tell me?