

# **THE CREATION OF A MENTAL HEALTH BILL OF RIGHTS & RESPONSIBILITIES AT VANDERBILT UNIVERSITY**

Mark T. Wallace, Ph.D.  
Dean of the Graduate School



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## Background

- growing recognition of the challenges in the area of mental health and well-being for our graduate student community
- stresses on the system had produced a series of challenges in the delivery of care and miscommunication between providers, students and the administration
- long-standing concerns around the perception of a heavily undergraduate focused care model
- an additional challenge (and ultimately opportunity) was associated with the legal separation of VU and VUMC
- town hall highlighted many of the challenges and revealed a growing lack of trust between students and administration
- was happening within the backdrop of some movements on campus focused on graduate student unionization



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## The Process

- Graduate Student Council (GSC) spearheaded efforts to develop a mental health bill of rights
- Modeled after documents from our Medical Center associated with patients rights
- Subcommittee of the GSC developed a draft document, which became the foundation for a series of conversations with a host of campus stakeholders, including but not limited to:
  - The Graduate School
  - Graduate Faculty Council
  - Dean of Students
  - Office of General Counsel
  - University Counseling Center (UCC)
  - Student Care Network
  - Office of the Provost
  - Office of the Chancellor
- Went through 10+ iterations of the document before final approval by OGC, Provost and Chancellor



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## PROCESS OVERVIEW

**Launch!**

Concerns around  
graduate student  
mental health  
care

Community  
dialogues and  
townhall

Graduate  
student first  
draft

Graduate  
Student  
Council led  
committee

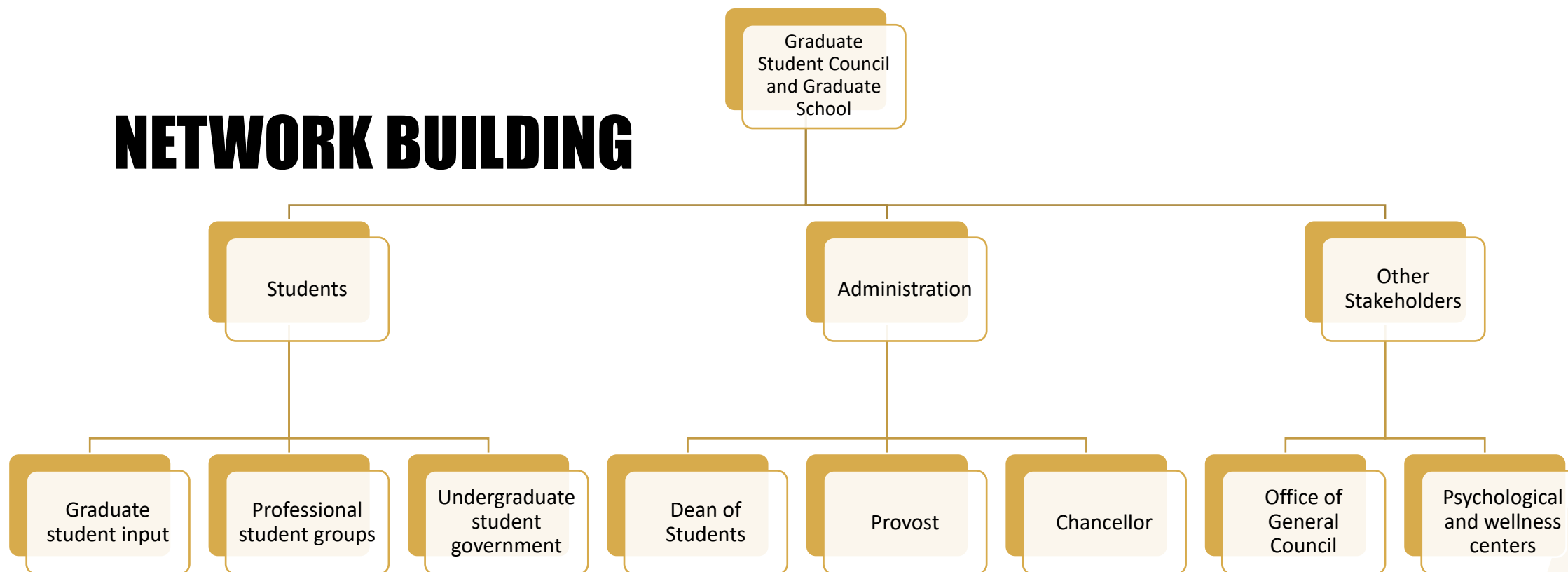
Building  
support and  
gathering  
stakeholder  
input



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## NETWORK BUILDING



# THE CREATION OF A MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES AT VANDERBILT

## Key Issues and Challenges

- initial focus exclusively on rights evolved into including language concerning responsibilities as well
- concerns from the student community about the ‘non-binding’ nature of the document
- concerns from OGC about setting unreasonable expectations
- communicating MHBRR out to all relevant stakeholders



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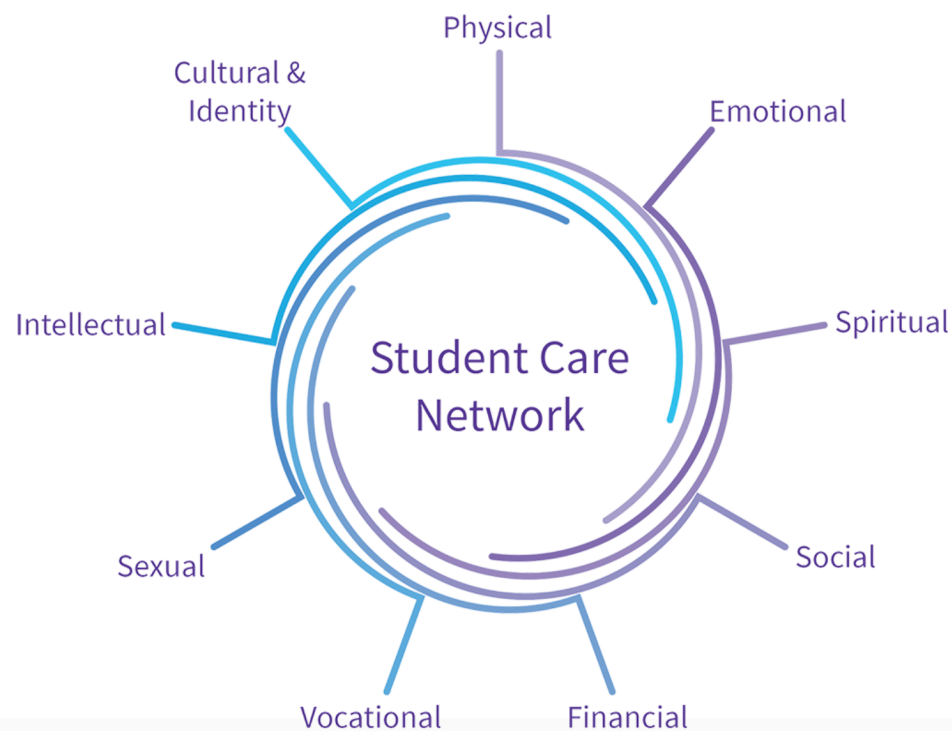
## The Benefits

- empowered the students around issues concerning their mental health and well-being – promoting a greater sense of agency
- greater transparency in what students can expect from the care network and its providers
- strong tool in building trust and greater dialogue between students, administration and care providers
- was adopted by a number of student communities on campus, including the undergraduate student body
- catalyzed creation of a new position within the Graduate School (Graduate Life Coach)



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## IMPROVED RESOURCES



Graduate Life Coach  
Stacey Satchell





# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

The Mental Health Bill of Rights and Responsibilities (MHBoR&R) outlines the Vanderbilt University community's ideals and aspirations for providing mental health care to its students, as well as student responsibilities in the mental health care process and system. Students are encouraged to use the MHBoR&R in conversation with their Student Care Network providers when discussing their mental health needs and expectations. The MHBoR&R is not binding for any parties, but rather reflects Vanderbilt's commitment to provide quality mental health care for its students.

The MHBoR&R was developed through an in-depth collaboration between the Graduate Student Council, the Graduate School, the Office of the Dean of Students, the [University Counseling Center](#), the [Student Care Network](#), the Office of the Provost, the Office of the Chancellor, and other University community members. It is intended to be a living document, and any future changes should undergo a robust process of discussions with relevant stakeholders, including those listed above.



# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

1. Vanderbilt University sees the mental health of its students as a priority and undertakes to protect student access to quality, affordable, professional, and comprehensive mental health care.
2. Vanderbilt University is committed to combat stigma surrounding mental health, to provide an environment of mental health care that is inviting and inclusive for all students, and to proactively encourage and guide students to be good stewards of their mental health.
3. In caring for the mental health of all of its students, Vanderbilt University commits to consider and support the unique needs of its students, including but not limited to: students of color, international students, LGBTQI students, students with disabilities, military veterans, students who are first-generation college students, survivors of trauma, and students from underrepresented religious and socioeconomic backgrounds.
4. Vanderbilt University commits to protecting the privacy of its students with regards to their mental health care and to providing maximum information and transparency for students regarding their privacy rights, including protection for treatment records.



# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

## 5. Vanderbilt University undertakes to provide mental health services to its students in accordance with the following guidelines:

- a. An individual Care Coordinator shall be designated as the primary point of contact for each student upon [intake into the Vanderbilt Student Care Network](#). The Care Coordinator shall assist the student in understanding, navigating, and accessing the resources within the network, and shall support the referral of the student to a provider outside of the primary Student Care Network, hereby referred to as an “outside provider.”
- b. For non-urgent mental health concerns, students shall have a right to their choice of an in-person or phone assessment by a qualified mental health trained clinician within a reasonable time after contacting the Vanderbilt Student Care Network. For urgent concerns during normal operating hours and during nights and weekends, students shall have access to an on-call provider for assessment; the on-call provider may refer the student to emergency services if the student’s condition necessitates immediate attention, or may initiate scheduling of an assessment within a reasonable time. A “reasonable time” shall be determined on an individual basis by a qualified mental health trained clinician.
- c. Individual services shall be accessible to every student at no more than a reasonable cost until a mental health clinical review panel determines that a standard of care is reached, or that such standard of care would be better facilitated by an outside provider in accordance with 5 (d).
- d. The Student Care Network shall not terminate services without first providing due notice, and shall continue providing care until the commencement of treatment with an outside provider. A readily available list of outside providers who accept the student insurance option shall be maintained by the Student Care Network. Student inability to pay out-of-pocket expenses, ease of access to off-campus services, specific student identities (see item 3), and other personal student needs associated with referral to an outside provider shall be considered during the clinical review process.
- e. The Student Care Network shall strive to create a mental health care plan that meets the needs of the student and shall engage in a collaborative referral process with the student to secure appropriate services outside the primary Student Care Network. The student shall also have the ability to request a secondary review of their mental health care plan with members of the clinical review panel or another Student Care Network provider. This request should be facilitated by the student’s Care Coordinator.



# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

**6.** Vanderbilt University shall consider the coverage for mental health care, including, but not limited to, therapy, medication, emergency services, surgery, in-patient mental health treatment, and substance abuse treatment, in selecting a student health insurance option. Vanderbilt University shall consider the fiscal limitations of its students in selecting student insurance options.

**7.** Vanderbilt University shall strive to provide mental health care within an evidence-based framework, and to ensure that each student shall have the opportunity to:

- a.** Remain apprised of the structure, policies, and practices of mental health care services for students by Vanderbilt University, through elected liaisons in student government bodies;
- b.** Provide input to Vanderbilt University regarding the structure, policies, and practices of mental health services for students, through elected liaisons in student government bodies;
- c.** Consider and comment on any proposed changes to the structure, policies, and practices of mental health services for students, through a mechanism determined by the student government bodies in consultation with the Student Care Network, and to have their comments entered into the record and duly considered before proposed changes may be adopted;
- d.** Receive detailed, transparent notice of changes following their adoption and prior to their implementation; and
- e.** Access metrics and actuarial data regarding mental health care provided by Vanderbilt to its students, or underlying all decisions to alter or discontinue mental health services.



# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

8. Students desiring mental health services should proactively contact a Care Coordinator. Vanderbilt University cannot provide care for cases of which it is unaware.
9. Students shall have a responsibility to notify Vanderbilt University of serious and imminent concerns regarding the mental health of their colleagues, students, and other members of the Vanderbilt community.
10. Students within the Vanderbilt network of care shall have the following responsibilities:
  - a. To consent to be treated and to accept the privacy policy for care;
  - b. To provide accurate information regarding medical history, medications, symptoms, and other matters relating to their mental and physical health;
  - c. To proactively communicate expectations, needs, questions, and concerns;
  - d. To make a good faith effort to keep appointments, to be on time for appointments, and to communicate if conflicts emerge;
  - e. To abide by facility rules and act in a manner that is respectful to other patients, staff, and facility property; and
  - f. To actively participate in decisions regarding their mental health care.
  - g. To inform the Student Care Network when their mental health care plan no longer meets their individual needs.



# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

11. Students within the Vanderbilt network of care are encouraged to do the following:
- a. To follow treatment and care plans;
  - b. To report any concerns or changes in condition to their health care provider;
  - c. To alert staff to any privacy concerns; and
  - d. To consider consequences before refusing treatment.



# MENTAL HEALTH BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF VANDERBILT UNIVERSITY

## Some additional resources:

- Nature, 30 August 2019
- Inside Higher Ed, October 29, 2019
- upcoming NAS panel

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Mental Health Challenges Require Urgent Response

They are serious and complex problems and should not be the sole purview of our campuses' counseling centers, write Ted Mitchell and Suzanne Ortega.

By Ted Mitchell and Suzanne Ortega

// October 29, 2019

14 COMMENTS

An 18-year-old freshman, overwhelmed at the start of the college semester, takes his own life. A 20-year-old intercollegiate athlete and academic all-star follows suit. A senior with a limitless future ends her life just weeks from graduation.

It is impossible to fully comprehend such tragedies, to understand why a young person would feel so lost that they would make the decision to end their life. But with suicides now the second leading cause of death for college students, it is incumbent on college leaders, along with our faculty members and students, to understand how we can make a difference and take action.

This fall, hundreds of thousands of students across the country are re-entering campus life. Most of them will be facing general stressors and anxieties that come with being a college or university student.

Some students will thrive under these circumstances, while others will struggle. The latest report from the [Healthy Minds Study](#) indicates that four in 10 students have positive mental health and are flourishing on our campuses. Yet suicidal thinking, severe depression and rates of self-injury among college students in the United States more than doubled in less than a decade. According to the American College Health Association's National College Health Assessment, the number of students who have had a previous diagnosis or treatment for depression has increased from about 9 percent in 2009 to over 20 percent in 2019.

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## A better future for graduate-student mental health

A consortium of US universities aims to examine how best to help a vulnerable population that is affected by anxiety and depression.

Chris Woolston



Credit: Simone Golob/Getty

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### SUBJECTS

Careers Depression Policy

An ambitious research project aims to assess the state of mental-health resources and support for graduate students. The 22-month initiative is a joint venture of the Council of Graduate Schools (CGS) in Washington DC and the Jed Foundation, a non-profit organization in New York City that focuses on the mental health of young adults. The initiative will explore current schemes and programmes centred on student wellness at CGS member universities in the United States and Canada, and provide recommendations for future approaches to promote mental and emotional well-being in students.

"We want to create a road map for moving forward," says Suzanne Ortega, CGS president and the principal investigator of the project, called Supporting Mental Health and Wellness of Graduate Students. "We'll be offering advice about policies and resources that will help students in crisis while also creating an environment where graduate students can thrive."



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