



Creating an Integrated and Accessible Mental Health System at Georgia Tech

A summary report of FY24 findings and outcomes from the *Mental Health System* action strategy in the *Cultivate Well-Being Action & Transformation Roadmap with a Focus on Students*

June 7, 2024

Introduction

Goal:	Capacity and Creativity: Continue to improve the quality of and ease of access to equity-literate clinical care and intervention for students who need such services while also improving programs and services that focus on the primary prevention of health-related symptoms, diseases, and disorders; the promotion of wellness in a holistic manner; and the creation of conditions which cultivate and sustain well-being for all students, inclusive of all identities and backgrounds.
Strategy:	Strategy 2B: Through the creation of a new Center for Mental Health Care & Resources, continue to develop and sustain a coordinated, cohesive mental health care delivery system across CARE, Counseling Center, Stamps Psychiatry and the VOICE Advocates, for the purposes of facilitating timely access to culturally competent care; reducing/eliminating bottlenecks in crisis response; advancing an integrated model of triage, assessment, referral and service delivery; minimizing wait times; offering more options for self-service; responding to students' varying needs for clinical services with regard to location, time, duration, type of engagement, and modality; and implementing mental health promotion/outreach activities to promote self-agency, self-care, and self-awareness as key factors in the "well-being toolkit."

Objectives, Deliverables and Milestones	Status
11/17/23: Submit project charter and plans	Complete
11/30/23: Hold first meeting with core team to organize approach to setting and achieving the project goals (meeting schedules, tasks, responsibilities, etc.)	Complete
12/15/23: Identify components of the mental health system including prevention, self-help, community support, and intervention	Complete
1/15/24: Coordinate a meeting with offices that provide services related to the mental health system	Continuing into FY25
1/15/24: begin exploring options for a tool/guide to help students navigate the mental health system	Continuing into FY25

2/15/24: Meet with undergrad and grad student focus groups to discuss and gain feedback about the new mental health system and tool/guide	Continuing into FY25
3/15/24: Meet with Marketing and Communications to begin developing promotion and marketing plan for the mental health system	Continuing into FY25
4/15/24: Develop a launch plan and date for the mental health system	Continuing into FY25
6/15/24: Begin sharing information about the mental health system through different channels on campus	Continuing into FY25
7/15/24: Launch new mental health system with tool/guide to campus, including new and returning students	Continuing into FY25

Mental health continues to be an important concern for students at Georgia Tech, and the Institute has identified this as an area of focus. This is clearly reflected in Georgia Tech's 10-year strategic plan and one of its goals of cultivating well-being on campus. High quality and accessible mental health care is critical because research shows that students' mental health and well-being is a determining factor in their academic engagement and persistence towards graduation.

As demand for mental health services on campus has grown over the past few years, Georgia Tech has had to respond. In Fall 2022, following up to the *Cultivate Well-Being Action & Transformation Roadmap with a Focus on Students*, the process began to reorganize the two offices that were primarily responsible for student mental health into an integrated center. These offices were CARE (Center for Assessment, Referral, and Education) and the Counseling Center. At the time, CARE was the first stop for all students who were seeking mental health care. The case managers in this program would conduct an initial assessment and then make a referral to the Counseling Center, where students would get short term counseling and related clinical services, or they would be referred to Stamps Psychiatry for psychiatric services. If they were deemed to be out of scope for on-campus counseling, they would be connected to off campus providers. With the formation of the new Center for Mental Health Care & Resources (CMHCR), Georgia Tech was addressing concerns that were inherent in having two separate offices, such as longer wait

times, challenges with referrals, and lack of connection between the offices, to building a stronger foundation for mental health care on campus.

In addition to the formation of CMHCR, there was also a push to increase contact and collaboration between all the mental health and well-being offices and programs on campus.

These offices included CMHCR, the Wellness Empowerment Center which provided health education and other

wellness services, and Stamps Psychiatry where students could receive psychiatric care.

The aim was to go beyond case management and counseling services as the sole means of addressing mental health concerns, and to create a more comprehensive *mental health system* that included prevention options, self-care strategies, community support, in addition to intervention.

The goal of the Mental Health System, as reflected in the *Cultivate Well-being Action & Transformation Roadmap with a Focus on Students Strategy 2B*, is to create an integrated, connected, seamless process that could fully meet the needs of Georgia Tech students. In Fall 2023, a core team was formed to work on this project. The team is composed of the AVP and Dean of Students (Dean John Stein), the chief psychiatrist of Stamps Psychiatry (Dr. Shannon Croft), the director of the Wellness Empowerment Center (Joi Alexander), and the senior director for CMHCR (Dr. Vidal Annan).

Based on their respective and collective experiences, perspectives, and office missions, the core team proposed the following opportunity statement for the project: *To create a mental health system that identifies, clarifies, and organizes the range of prevention, self-help, community support, and intervention resources available to Georgia Tech students, and to educate the wider campus as to how students can actively navigate and engage with these resources to meet their psychological, social, and emotional needs.* The core team has been meeting consistently for the fall 2023 and spring 2024 semesters and have made significant headway in meeting the goals of the project.

Discovery

Over the course of several meetings during the fall and spring semesters, the core team identified two important areas of focus related to mental health care on campus.

Addressing these questions would be critical if a true, effective, functioning, mental health system was to be developed for the campus.



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- (1) How are the three main offices (CMHCR, Stamps Psychiatry, Wellness Empowerment Center) collaborating among themselves, and with other student-serving offices on campus, to create an effective system to address the mental health and wellness needs of students?
- (2) Are students able to access the appropriate office on campus to meet their mental health and wellness needs?

The first question addressed the professional collaborations between the offices. How did individual offices relate with each other in order to address the mental health and wellness needs of students? It was clear from the data reviewed during the meetings, which included student feedback, satisfaction surveys, and other outcome measures, that when students were able to access each *individual* office, they often felt that they received quality care and their needs were met. This reflected the ongoing work that each office was engaging in to address issues such as staff availability, wait times, new programs, and customer service. The challenge was in coordinating these efforts *across* the offices.

The data also indicated that, in terms of collaboration, the three offices were not starting from zero, in fact, there had been important partnerships over the years. However, it was clear that more could be done. For example, one observation that became apparent was that other than at the core team meetings, there were no other scheduled times for some of the leaders of the three offices to meet, discuss challenges, and explore new ideas and solutions. As their supervisor, the Dean of students had regular 1-1 meetings with the senior director of CMHCR and the director of the Wellness Empowerment Center, but these directors did not meet with each other. As a result, even though each office was addressing its own internal needs, there were few discussions across offices. There had also been changes in leadership and staffing, which also challenged ongoing collaboration. The senior director for CMHCR, for instance, had only arrived at Georgia Tech the previous summer, therefore he was still adjusting to the new environment and forming stronger working relationships with his staff and the other offices.

Over the course of the first few core team meetings, meaningful progress was made and the core team proposed several steps to reach the goal of improved collaborations. These recommendations were in line with the Strategy 2B goals and the missions of each office. Below is a table which provides a breakdown of some of the steps that were implemented over the last two semesters.

Goal (from Strategy 2B)	Measure	Progress
Coordinated, cohesive mental health care delivery system across CARE, Counseling Center, Stamps Psychiatry and the VOICE Advocates	Referrals between offices, leadership coordination meetings, service collaborations	<ul style="list-style-type: none"> - Biweekly meetings between CMHCR Senior director and Stamps Chief Psychiatrist - Monthly meetings between CMHCR senior director and WE Center director - Continued weekly case conference meetings with CMHCR and Psychiatry staff - Scheduled summer meet-n-greet and professional development with CMHCR, Psychiatry, and WE Center - Clinical Case Manager Supervisor hired in CMHCR - Continuation of Eating Disorders collaborative Treatment Team
Timely access	Wait times	<ul style="list-style-type: none"> - Data from Fall 2023 show 4.3 days for intake and 7.9 days for CMHCR counseling
Culturally competent care	Satisfaction survey questions	<ul style="list-style-type: none"> - Reviewed data from 2024 CMHCR Satisfaction surveys - Scheduled a meeting with LGBTQIA Resource Center on mental health care in the LGBTQIA community

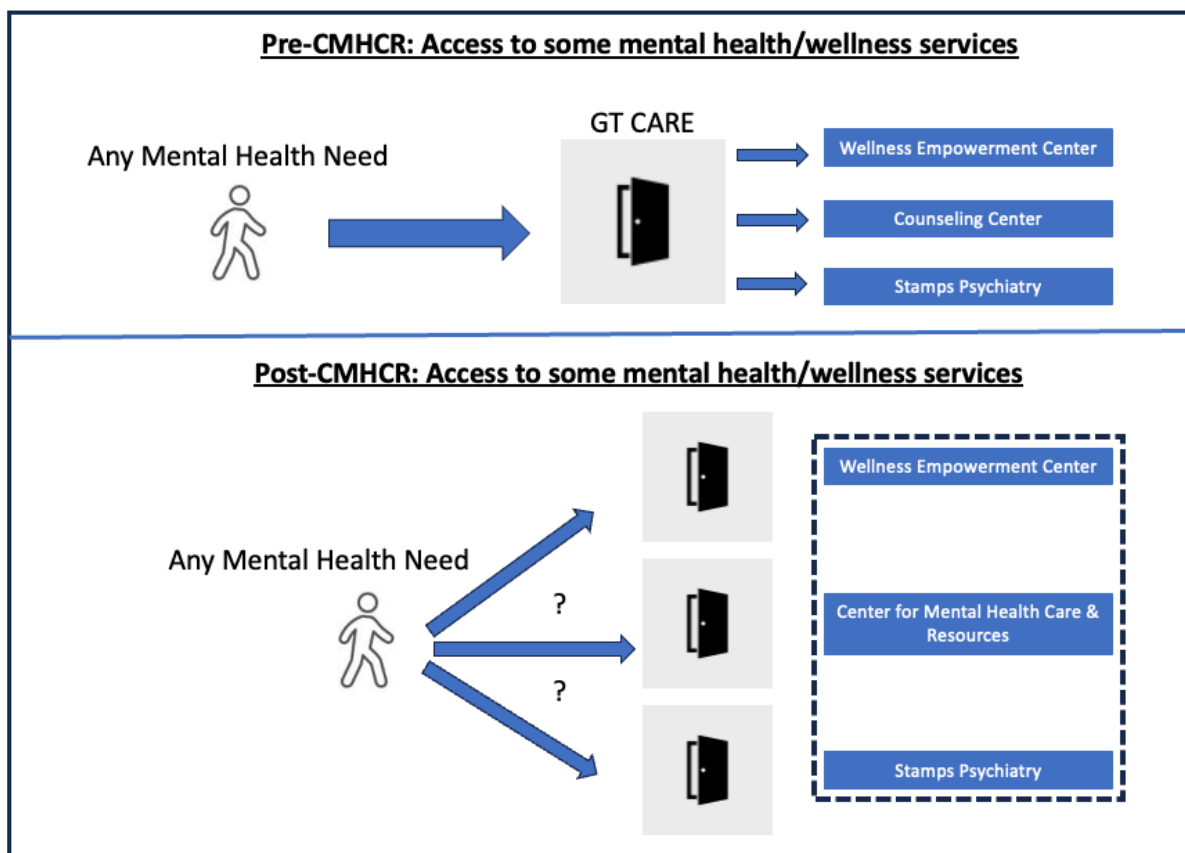
Reducing/eliminating bottlenecks in crisis response	Wait times (for same day service), triage process	<ul style="list-style-type: none"> - Development of Same-Day Service Assessment form - Same Day Wait times < 1hr
Integrated model of triage, assessment, referral, and service delivery	Established service workflow for appointments, same-day service, referrals	<ul style="list-style-type: none"> - Developed an interoffice workflow and referral diagram (see appendix I) - Updates to CMHCR P&P manual regarding triage and referrals to Psychiatry and Wellness Empowerment Center
Minimize wait times	Wait times	<ul style="list-style-type: none"> - Data from Fall 2023 show 4.3 days for intake and 7.9 days for CMHCR counseling - Same Day Wait times < 1hr
More options for self-service	Self-service options available; promotion of self-service options on website and outreach	<ul style="list-style-type: none"> - Implementation of USG-sponsored Uwill platform - CMHCR website being updated
Responding to students' varying needs for clinical services with regard to location, time, duration, type of engagement, and modality	Virtual appts, in-person appts, extended hrs during the week, types of services available	<ul style="list-style-type: none"> - Continuation of Satellite counseling program - New Satellite Counselor hired - Medicat data review of clients' presenting problems to determine new programs and resources - Review and updating of referral procedures in CMHCR P&P manual

		<ul style="list-style-type: none"> - Job search started for Alcohol and Other Drug Counselor
Implementing mental health promotion/outreach activities to promote self-agency, self-care, and self-awareness	Outreach activities, self-care page on website	<ul style="list-style-type: none"> - Continue CMHCR Outreach & Programming Committee weekly meetings - Attendance at monthly outreach and program collaboration meetings sponsored by Marketing & Communications officer - Updating of outreach process developed in CMHCR - Proactive outreach to student orgs to promote services and collaborations - Asst Dir for Outreach hired (Spring 2024) - Continuation of Collegiate Recovery Program and job search for program coordinator - Continued tracking of outreach data in Medica

The second question that the core team addressed focused on how students were responding to the changes in the mental health offices on campus and how they were engaging with these offices. Some of the data and anecdotal reports from students seemed to indicate that there were some challenges in figuring out which office to access when they felt that they had concerns about their mental health or wellness. Students seemed to understand that there were many different kinds of mental health and wellness resources on campus but could not determine which office to access based on their

specific level of need. In addition, there were other programs on campus that did not directly address mental health but provided support and services for overall well-being and self-care (ex. the Bee Well program in ISyE).

Another important observation from the core team, based on student feedback, was that the merging of CARE and the Counseling Center into CMHCR had changed students' understanding of how to access services. Whereas in the past, CARE was the identified "main doorway" for accessing services, the creation of CMHCR changed that understanding. Students did not seem to be sure when they had to come to CMHCR versus going to Wellness Empowerment Center or Stamps Psychiatry directly. Despite the obvious benefits of integrating services, the creation of a new office had, in some ways, increased confusion regarding access. The image below attempts to capture the confusion that students were reporting.



Considering this situation in more depth, the core team identified four levels of need that would move a student to seek out services. These are:

1. Exploration: Learning and acquiring information about mental health and wellness

2. Maintenance: Engaging in wellness practices to maintain one's state of well-being
3. Coping with Stress: How to deal with tension and strain experienced in response to adverse or challenging circumstances
4. Crisis Management: How to deal with a significant decrease in functioning and high emotional/psychological distress.

A student who is at one of these levels may feel that they need to visit a different office. For example, a student at the “maintenance” level could connect directly to a wellness coach in the Wellness Empowerment Center or be referred after an assessment at CMHCR. Students did not feel that they knew which office matched their level of need and which “doorway” to go through.

The core team explored two possible paths to a solution. The first option involved CMHCR, Wellness Empowerment Center, and Stamps Psychiatry doing a better job of coordinating services across the offices

and then promoting a simple access system to the campus community. In the current setup, students who were seeking mental health *wellness* supports (exploration and maintenance) could access Wellness Empowerment Center directly or they could be referred from CMHCR. If a student needed mental health *intervention* (coping with stress or crisis management), then they should contact CMHCR for an assessment. Stamps Psychiatry can only be accessed with a referral from CMHCR. The systems were in place but more needed to be done with marketing and promoting this information to students and the campus at large.

Another possibility is to develop a “navigation tool or system” to help students determine which office matched their needs. This approach would potentially allow students, who are only aware of their psychological state, to engage with a tool that could then offer concrete options for care based on which offices on campus could address that particular concern. This solution may be technological or relational. The core team has begun a process of exploring these options.

Limitations

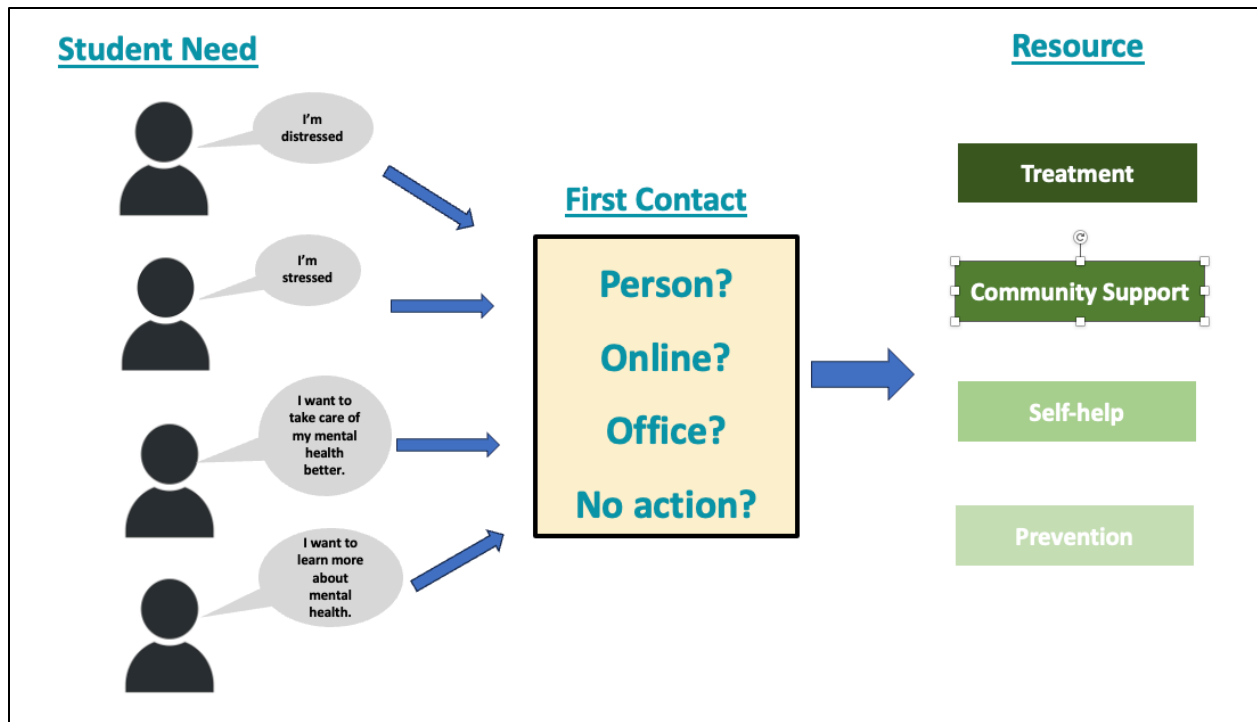
The core team was able to propose and institute many different steps to address the questions of how to improve collaborations and student access. The recommendations for collaborations are captured in the table provided above. These changes have already

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begun to reap rewards in the form of more frequent partnerships in outreach activities for students and better processes for referrals and communication between the offices. These changes are hopefully producing clinical and learning impacts for the students.

Addressing how students can better determine access to services has been more challenging. After exploring the issue in detail, the core team determined that a critical piece of information was missing. For students who knew about services on campus, they were easily able to call or walk in to the appropriate office for support. What was the process for students who did not know about services or did not feel ready or able to reach out to one of the mental health offices? What was the first step they took to get their needs met? These questions were important because if the core team was going to initiate a navigation tool or guide, it would work best if built on a foundation of the natural or typical ways that students who have mental health needs try to get their needs met. For example, if these students tend to talk to their resident assistants as a first contact, then providing additional information to the RAs about services would be the most effective solution.

The core team explored several strategies for finding out more about students' help-seeking habits on campus, including surveying GT1000 classrooms or speaking with the SEWB Emerging Leaders Advisory Boards or other student groups. The most workable option was to convene a focus group of students and engage them in a conversation about how they and their peers accessed services when they had mental health needs. The focus group would be conducted with the Wellness Empowerment Center Healthy Jackets, who are student peer educators. The goal would be to get their feedback regarding how their fellow students, who are at different levels of concern, take steps to get their needs met on campus, especially those who are not knowledgeable about services. The image below diagrams the problem as it would be presented to the Healthy Jackets for feedback.



Unfortunately, due to time constraints caused by the ending of the semester and final exams, the focus group could not be conducted. There is a plan in place to meet with the Healthy Jackets at the beginning of the Fall 2024 semester, and perhaps expand to other groups such as GT1000 classes or residential students. The creation of a navigation tool or guide is predicated on getting this information, therefore next steps in that plan have also been postponed for now.

One solution that came to fruition regarding students accessing services was how the services were marketed and promoted to them. Members of the core team met with Communications Officer, Ashlie Bowman, from the SEWB Marketing and Communications office to explore ways to improve this process. After many in-depth discussions, it was agreed upon that a new webpage would be developed that identified and listed all the different kinds of mental health resources on campus, and provided the most basic information that a student would need to know in order to take action. This included a short description of the service, the focus of the service, location and hours, and whether the services was on campus or provided by an external source. There was also a link from each service listing to the official website of the associated office. For those services that were app-based, such as the USG-sponsored Uwill counseling platform, the app could be downloaded directly from the resource page. The resource page, titled “Student Mental health Resources” has been linked to the main webpages of CMHCR, WE Center, and Stamps Psychiatry. To view the website, please click [here](#).

Recommendations

The Core Team was able to make significant progress on addressing its goal, which is to develop an *Accessible and Effective Mental Health System* at Georgia Tech that removes barriers and makes mental health services more accessible and available to students. This process would involve identifying and clarifying all the mental health and well-being services available on campus and increasing collaborations between the offices that house these programs, and also developing a system to make it easier for students to engage and navigate these resources in order to address their mental health needs.

There is much hope that this goal can be achieved despite challenges related to scheduling, coordination, and data gathering. The members of the core team, who represent all of the major mental health offices on campus, bring a wealth of experience and ideas to the table. Also, the Dean of Students provides the team with a broader perspective on student life and needs, and ultimately a larger lens to view the problems, and indeed the solutions. The team plans to meet at least once in the summer months to advance the agenda and continue to plan for the next steps in this important and critical project.

Acknowledgements

Core Team Members:

John Stein – AVP of Student Life and Dean of Students

Shannon Croft – Chief Psychiatrist, Stamps Health

Joi Alexander – Director, Wellness Empowerment Center

Vidal Annan – Senior Director, Center for Mental Health Care & Resources

Subject Matter Experts:

Heather Zesiger – Director, Cultivate Well-Being Action and Transformation

Ashlie Bowman – Communications Officer, Marketing & Communications

Grad and Undergrad Emerging Leaders Advisory Boards

Grad and Undergrad SGA Mental Health Committee members

Members of the Emerging Leaders Advisory Boards (ELABs)

Student – Megan Kemp

Appendix I:

