

Disclosure Statement

Mandated Assessment for Risk of Suicidality and Self-Harm

The following is a description of Mandated Assessment for Risk of Suicidality and Self-Harm (MARSSH) at Counseling, Health & Wellness Services (CHWS) at the University of Puget Sound.

This description represents the minimum students must complete when campus officials (the Suicide Prevention Team, or SPT) refers a student to MARSSH. These guidelines do not limit the type or extent of counseling services available to any Puget Sound student; they simply outline what is expected of those students whose behavior has prompted the SPT to require an assessment of their safety.

Purpose of Disclosure Statement. Although there may be consequences for your student status if you choose not to complete the MARSSH protocol, engaging in an assessment at CHWS or with an off-campus clinician is your decision. Because we want to make sure that your decision is an informed one, you are required to read a disclosure statement (like this one). This explains your rights and responsibilities in detail.

Authorization to Release Information Form. CHWS services (and those of off-campus clinicians) are confidential, within the limits of the law. For this reason, you are required to sign a release if you choose to complete the MARSSH protocol. This release enables the clinician you see to communicate to the SPT that you have followed-through with your assessment. Without your written authorization, your provider cannot confirm for the SPT that you've been seen, thus you will not have met the University's requirements.

Nature of Confidentiality. Although you are required to sign a release, your clinician will only communicate whether you have completed the required four sessions to the SPT; (s)he will not reveal the content of what you've discussed, except as required by law. The special circumstances under which a clinician would be legally compelled to break confidentiality are explained under "Frequently Asked Questions."

Free assessment. There is no charge to students who complete the MARSSH protocol through CHWS. However, failure to give a minimum of 24 hours notice cancellation of a scheduled appointment will result in a \$20 fee charged to your student account. Students referred to complete MARSSH have the option of completing an equivalent series of assessment sessions with a provider off campus, at their own expense (Refer to the MARSSH Frequently Asked Questions that accompanied your notification letter for more details.)

Intake Paperwork. A student referred to MARSSH is expected to complete all of the same paperwork any new CHWS counseling client would. Here you will have the opportunity to indicate what issues other than self-harm are important to you. The clinician will certainly be asking you in depth about self-harm feelings and behaviors in order to complete the assessment, but you are welcome to discuss other issues of concern to you as well.

Participation. You are required to participate in this process. This means making four appointments (in accord with your counselor's schedule). It means arriving for each appointment on time. It also means working as honestly and fully as you can. Failure to appear for scheduled appointments or failure to give 24-hour notice of need to reschedule at CHWS will result in a \$20 charge.

Non-Compliance. If the Suicide Prevention Team does not receive verification of you having made an initial appointment by the date required, and/or it does not receive timely confirmation that you have engaged in a full assessment, there may be further consequences for you, up to the possibility of the University dis-enrolling you from your courses.

Repeated Concerns. If there are additional reports to the SPT concerning your behavior and welfare, even after you have begun or completed your four sessions, further actions to protect you and community well being will follow. For example, you may be asked to complete another assessment with a different clinician, you may be disallowed from residing in university-owned halls or houses, or you may be dis-enrolled from your courses. Other consequences are possible as well, at the discretion of the Dean or her designate.

Right to Appeal. Our hope, of course, is that you will look upon MARSSH as an opportunity to discuss important issues in your life, including (but not limited to) suicidal feelings and risky behaviors. However, you may choose to appeal the SPT's decision. In order to appeal this mandated assessment, you must call the Dean of Students office within 24 hours to arrange for a personal appointment. The decision of the Dean regarding any appeal is final.

Limited Authorization to Release Information Mandated Assessment for Risk of Suicidality and Self-Harm

MARSSH Disclosure Statement

The Counseling, Health and Wellness Services (CHWS) staff wants you to be knowledgeable about the rights and responsibilities you have as a student participating in a mandated assessment through the MARSSH program.

All of your rights apply as described in the Counseling Services Disclosure Statement. However, in order to satisfactorily complete this program you must agree to allow your CHWS provider to share selected information with the University officials who referred you to participate in MARSSH. If you choose not to authorize this release, the CHWS provider will work with you to find an appropriate off-campus practitioner who is qualified to provide a comparable service (although in order to meet the requirements of this mandate you will need to authorize that clinician to release information about your compliance to University officials). If you have questions about anything in this document you may bring it unsigned to your first appointment, in order to have these questions answered. Initiation of this protocol does not begin (that is, your four assessment sessions have not begun) until you are satisfied with the Disclosure Statement above and have signed the Limited Authorization to Release Information.

The Mandated Assessment of Risk of Suicidality and Self-Harm (MARSSH) is a four-session protocol in which the referred student and a CHWS clinician work together to assess the student's risk of attempting suicide or engaging in other self-harming behaviors. They collaborate on ways of reducing the likelihood of behaviors that may put you or others at risk.

As a participant in MARSSH you will be considered a client of CHWS and a written record of this service provided you will be kept, as required by law.

I, _____, hereby authorize _____
(Client name) (Clinician)

to release information regarding my completion status for the MARSSH protocol as described on these pages.

This information is to be released to: Houston Dougharty, Associate Dean for Student Services, University of Puget Sound, (253) 879-3360.

The purpose of this release is to notify University officials of this student's progress toward completing MARSSH.

I understand that this consent is subject to my written revocation at any time. Unless I revoke my consent, this release shall remain in effect for ninety days, or until , whichever comes first.

Print Name: _____

Signature: _____

Student ID #: _____

Date: _____

MARSSH Disclosure Statment

Rev- 12.1.03/12.23.03

Donn Marshall

Contact: marshall@ups.edu
