**CONSULTATION**

Seeking information/advice

*Your Response Timeframe: Anytime

**CONCERNING**

Non-urgent, but may need referral/connection to resources to get back on track

*Your Response Timeframe: Within couple of days to couple of weeks

**SELF HARM**

- Cutting, burning, hitting oneself, other self-injurious behaviours
- Noticeable weight loss or gain
- Observed or disclosed substance use and concerns

**MARKED CHANGES IN MOOD OR BEHAVIOUR**

- Difficulty moderating emotions
- Notable changes in behaviour, energy levels, appearance, or hygiene
- Exaggerated emotional response that is obviously inappropriate to the situation
- Withdrawing or isolation from relationships or social interactions

**DIFFICULTY COMMUNICATING/DISTORTIONS OF REALITY**

- Disorganized, disjointed, rambling thoughts
- Difficulty completing sentences/irrational conversations
- Hyperactive or rapid speech
- Unexplained crying, laughing to self

**THREATS/HARM TO OTHERS OR DISRUPTIVE BEHAVIOURS**

- Actions which habitually interfere with the learning environment or require inordinate time and attention of faculty and staff

**LEARNING & ACADEMIC CHALLENGES**

- Deterioration in quality of work
- Frequently missed assignments
- Frequent absence from class
- Excessive procrastination
- Avoidance of participation
- Frequently dominating class discussions
- Listlessness or regularly falling asleep in class
- Excessive requests for special consideration that are undocumented, especially when changed from previous functioning

**HARM FROM OTHERS/CHALLENGES WITH NECESSITIES OF LIFE**

- Experiencing financial hardship; disclosed or observed to be struggling with finances
- Some form for food insecurity, such as: limited or uncertain access to regular, nutritionally adequate and safe food, struggling to afford groceries
- Struggling to afford rent; insecure or unsafe living situation

**URGENT/DISTRESS**

Non-life threatening and may be headed towards crisis but no imminent safety risk to self or others

*Your Response Timeframe: Within couple of hours to couple of days

**SELF HARM**

- Suicidal thoughts, but no clear plan or means
- History of suicide attempts, self-harm, aggression
- Observed or disclosed changes in self-harm behaviours, such as: increased frequency of cutting or self-harm; cutting or self-harm in different areas of the body or changing direction of cutting
- Excessive dieting that is visible or noticeable
- Uncontrolled binge eating and induced vomiting after eating

**LEARNING & ACADEMIC CHALLENGES**

- Prolonged absence from class
- Not responding to multiple outreach attempts about academic performance
- Significant drop in marks/grades, especially when changed from previous functioning

**HARM FROM OTHERS/CHALLENGES WITH NECESSITIES OF LIFE**

- Traumatic event, such as current or past experience with witnessing sexual violence, domestic violence, abuse (i.e., emotional, physical), loss of a loved one
- Stalking
- Observed or disclosed harassment, bullying
- Observed or disclosed discrimination
- Debilitating financial hardship; unable to pay for necessities
- Debilitating food insecurity, such as: does not know where to find next meal; going hungry for days; serious affects to physical and mental health
- Significant safety issues with living situation or homelessness

**EMERGENCY/CRISIS**

Life threatening or possible imminent risk to self or others

*Your Response Timeframe: Immediate

**SELF HARM**

- Suicide attempt/serious self-harm in progress
- Suicidal ideation with clear plan and means
- Direct or indirect reference to wanting to die/suicide
- Potential drug overdose or alcohol poisoning
- Other medical emergency

**THREATS/HARM TO OTHERS OR DISRUPTIVE BEHAVIOURS**

- Behaviour toward self or others that is harmful, violent, destructive, hostile, aggressive, or threatening
- Physical violence toward self or others causing bodily harm
- Specific threats of violence or harm

**MARKED CHANGES IN MOOD OR BEHAVIOUR**

- Cannot be calmed

**DIFFICULTY COMMUNICATING/DISTORTIONS OF REALITY**

- Incoherent or unintelligible

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**PRIVACY OF INFORMATION:**

Where there is a concern for the health or safety of a member of the Brescia community, or a threat of physical harm, privacy laws do not prohibit, and in fact encourage, the appropriate sharing of information. While information should not be shared indiscriminately, sharing within the University College, particularly with Campus Police, the Vice-Principal, Students, and Brescia’s Care Team, is both appropriate and necessary to maintain a safe campus community.

*Response timeframe will vary depending on nature of concern*
RESPOND

1) RECOGNIZE
Pay attention to warning signs
• Meet with student privately (unless it feels unsafe to do so)
• Express your concern
• Be specific about the behaviour that worries you

“I’ve noticed you’ve been absent from class lately and I’m concerned about you.”

2) RESPOND
Trust your instincts. Any response is better than silence

Inquire + Listen
• Remain calm and listen carefully
• Give your undivided attention
• Understand the student’s perspective without being judgmental

Support
• Take student’s concerns seriously
• Acknowledge their thoughts and feelings in a compassionate way
• Offer hope and support; however be cautious about giving advice

“How is everything going? Are you okay? Can you tell me more? What can I do to help?”

“It sounds like things are difficult right now. You’re not alone; there are resources to help and I would like to help you.”

3) REFER
Reach out and help

• Provide information about resources and encourage the student to contact one, visit: brescia.uwo.ca/mentalhealth
• Offer to make the call with the student to ease the process
• Make a Care & Concern Submission through the Care Program regardless of perceived severity and let the student know that you did: ccs.bresciauc.ca

“There is a lot of support available. While you are here with me, we could call together to connect you. Would you like to do that?”

Care Program helps faculty and staff provide better support for students who are facing difficulties that put their success at risk, before these difficulties become overwhelming.

“I participate in a Care Program that helps me support students who are facing difficulties interfering with school. I’m going to share your situation with a specialized advisor to ensure we provide you with the best support possible.”

If a student says “no” to a referral
• If not an emergency, respect student’s right to refuse
• Leave the door open for later reconsideration

“I respect your decision. I hope you will keep these options in mind. My door is always open.”

4) FOLLOW UP
Ensure your referral was effective

• Make sure the student was connected
• No need to insist on knowing what the student has done

“Hey! How are things since we talked last week? Did you get connected to the resource we talked about?”

Based on a concept by McMaster University, Queens University, Wilfrid Laurier University, and University of British Columbia with thanks.

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