

MEDICAL LEAVE & RE-ENTRY PROTOCOL

Carefully developed Medical Leave and Re-Entry protocols will shape students' lives when they are overwhelmed with behavioral health issues, overloaded with stress and distress, and suicidal urges. Supporting students in taking leave necessary to support their health, with encouragement to return to studies prepared to fully engage in their studies, will help them complete their education with growing confidence.

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WHY THIS PROTOCOL MATTERS

Ten percent of students living with mental health concerns drop out, according to a survey conducted by the National Alliance on Mental Illness. Of those, 64% cited mental health-related reasons. The 2012 NAMI report is titled [College Students Speak: A Survey Report on Mental Health](#).

Effective leave of absence (LOA) and re-entry help to increase retention rates, leading to a boost in workplace productivity and to Washington's economy overall.

Investment in campus mental health services show long-term financial benefits for many four-year institutions. To illustrate this, Daniel Eisenberg, founder of the Healthy Minds Study, has developed a [return-on-investment calculator](#).

LEAVE OF ABSENCE

Your institution's policy on medical leave of absence, voluntary or involuntary, will have long-term consequences for your students. A lack of medical leave policy will also have consequences.

Medical leave policies often consider two competing perspectives:

1. A student's desire, despite mental health concerns, to remain in their de facto home environment, and
2. The institution's potential concern that disruptions interfere with other students' focus on their studies and require added support from faculty and staff.

A third perspective involves legal considerations found in the requirements of the American Disabilities Act and Section 504 of the federal Rehabilitation Act, as well as Washington state law. Discussion below will explore circumstances when involuntary leave protocols may run afoul of these federal laws.

If your institution has an involuntary leave policy, it may be appropriate to review it for currency.

Financial aid and prorating tuition refunds are often the first concerns of students and families. To the extent possible, we urge generosity, which in the end will benefit all parties.

Some of Washington's public colleges and universities have **involuntary leave policies** that can be found in statute (Washington Administrative Code). These policies may not have been revisited in recent years.

- » Involuntary withdrawal policies are more common among private, non-profit colleges and universities; the content of these policies varies widely.

Not all institutions offer medical leaves, reasoning that their quarter schedule moves so quickly that a leave process is unnecessary. They also may reason that as an open-entry public institution, leaves and re-entry policies are unneeded.

- » However, the American Disabilities Act and Section 504 of the federal Rehabilitation Act cover involuntary leaves and certain provisions of re-entry policy.
- » Consider re-reading your institution's current policy on medical leaves and/or re-entry from the perspective of a student who feels their life is in limbo.
 - Is such a student likely to perceive an unfriendliness, a sense that they must prove themselves to a bureaucratic institution that shows no caring?
 - Such a tone may lead students to face both leave and re-entry processes as hurdles, not opportunities for healing and relief.

Leave of Absence Considerations

- » Consider involving your Office of Disabilities Services/Resources in discussion regarding possible accommodations.
 - This conversation should begin before a decision is made on any leave involving mental health concerns – and should continue when the student returns.

- » Consider several ways to support a student who is exploring a leave, including designating someone on staff with knowledge of this content to help the student become better aware of their options and possible implications.
 - This could be a Case Manager and/or student who returned from a similar leave in a previous year and is now flourishing.
- » Finally, encourage students (and their families) who are preparing for a medical leave to visit the disabilities resource office to start that conversation about accommodations. With stigma related to disabilities – in addition to stigma concerning mental health -- many students will hesitate before moving in this direction. A warm welcome before their leave can help to make this exploration easier when the student returns to campus.

RESOURCES FOR STUDENTS ON A LEAVE OF ABSENCE

This [Active Minds brief](#) on leave of absence legal issues was written for students. Consider making it available directly to students or posting it on your website.

[Mental Health America](#) also offers helpful and readable ideas for students who are considering a leave of absence.

Recommendations

1. Give priority to a voluntary leave whenever possible.
2. Make all medical leave policies accessible and transparent. The goal is to ensure that students, families, and faculty easily understand the process. This will reduce students' anxiety.
3. Individually tailored requirements for duration of leave and expectations for re-entry are recommended by legal counsel and will better support your students.
4. Policies for student leave of absence and re-entry should treat mental health issues as they do physical health issues. Your institution should not require documentation of a student's mental health counseling records, unless equivalent documentation of a physical health problem also is required.

Following are brief excerpts from “[Helping Students at Risk of Self-Harm: Considerations for the New Academic Year,](#)” by Peter McDonough, American Council on Education, for Higher Education Today (2019)

Institutions should consider reasonable accommodations that would enable the potentially self-harming student to remain enrolled and/or on campus.

- » Institutional policies that refer instances of self-harm to the student discipline system, and offer no other channels for accommodation, may be found to have a discriminatory effect by the federal Office of Civil Rights (OCR).

As part of an individualized assessment, institutions may consider medical and clinical information.

- » A student’s treatment provider should be given an opportunity to provide information. The provider’s input should be given serious consideration.
- » Institutional requests for the student’s medical information should not be overly broad. The requests should be tailored to whatever information is necessary for qualified personnel to assess the risk of self-harm.
- » An institution may consider the impact of the student’s behavior on others in the community in this assessment.

RE-ENTRY – ACCESSIBLE AND MEANINGFUL SUPPORT

Not all institutions have re-entry protocols or supports. The press of time is one obstacle to doing this work. However, the concepts touched on in this section may help prioritize addressing these challenges.

Common Mental Health Concerns of Depression and Anxiety

College-age individuals often live with such conditions for several years before seeking treatment. In that time, these conditions tend to accelerate, making healing or recovery more challenging.

These conditions exist on a continuum. A total absence of depression or anxiety may be the ultimate goal, however progressing toward that goal, even when in counseling and/or on medication, may involve gradually emergence from an episode of several months’ duration. A helpful way to think about recovery or healing is to realize that it involves learning to manage your own mental health condition.

In this context, a student who is ready to return to their studies may be in a healthier place on their continuum, but still need and benefit greatly from certain supports. Your institution’s re-entry protocol should refer to at least some of the available supports.

Re-Entry Supports on Campus

Your institution may already offer policies and practices that address the needs of your still fragile returning students. As you review your policies, consider the following:

- » Navigate creative solutions to allow a partial course-load for re-entering whenever possible.
- » Ensure that any student returning from a leave involving mental health concerns is matched with a single point of contact or re-entry coach who (if a good fit with the student) will remain a supportive presence in the student's academic career through graduation. This role may be best suited for an academic advisor, counselor, or other staff or faculty who has earned the student's trust.
- » The re-entry coach should help connect the student with the Disabilities Resource Office for discussion about accommodations and the process required to attain them. Also, this student may need backing as they search for a new or larger social network.
- » Peer support can make a lasting difference to a returning student. If your institution does not yet have such a program, consider building a pilot. Whitman College has developed a Peer Listeners Program. Here's their [student handbook](#).
- » Exercise is widely understood to help counteract depression. Yet advising that a student who lives with depression to exercise can be almost futile. Consider exploring a partnership between your counseling office and athletics or recreation program.

HELPING FAMILY SUPPORT A STUDENT ON LEAVE

Your institution may already engage families regarding students' mental health issues. You can also help parents and other caregivers educate themselves as they prepare to support their student during a leave of absence. Consider providing this material to families.

Student athletes could coach students who are seeking another method to help manage their mental health issues. Such coaching would benefit from a step-by-step process, focusing on the needs and barriers of individual trainees.

Other Considerations

- » Who will assess the student's re-entry documentation?
 - Counseling staff?
 - Student Affairs?
 - Academic Affairs?
 - Campus Admissions?
- » Does the individual or any member of a committee making re-entry determinations have a background in mental health care?

- » Is a partial academic load acceptable to start?
 - If not, reasons should be clearly documented.
- » What departmental policies regarding missed classes might come into play?
- » Will your institution will accept transfer credits for one or more courses taken during the leave?
 - Having written policies related to credit transfers will assist students making best use of their time away.

Recommendations

1. Priority should be given to voluntary leave whenever possible.
2. Explicit policies guiding voluntary leaves should be in place and easily accessible so students (and faculty) know what that process looks like. This will help to remove any fears that taking a medical leave may result in more permanent removal from campus.
3. Regular review and updates are advised for any policies on student medical leaves and re-entry supports.
4. Look for ways to make your re-entry process both fair and easy for students to navigate. Recovery from a mental-health crisis is often a long-term process.
5. Ensure that senior disability resource staff engage with re-entering students.
6. Discuss with staff the feasibility of creating even an informal long-term role as a re-entry coach, or ongoing single point of contact for a returning student.

ADDITIONAL RESOURCES

- » The [Jed Foundations Report on Student Mental Health and the Law](#) is foundational reading for clarity on disability law, return from a leave of absence and related issues.
- » A 2017 report on [accommodations to address student needs](#) by the National Council on Disability includes comprehensive information on medical leaves and re-entry.
- » Changes in Stanford University's [Involuntary Leave of Absence Policy](#) announced in 2020 have been recognized by disability rights advocates.
- » A summary of concerns from decisions and case statements by the Office of Civil Rights: Excerpt from article [Helping Students at Risk of Self-Harm: Considerations for the New Academic Year](#) (one in a series of articles on college student mental health and wellbeing.)

Sample Re-Entry Policies

The following examples use varied approaches.

- » Fordham University's [Mental Health and Medical-Related Re-Entry Process](#)
- » Creighton University's [Steps for Re-Entry After a Temporary Withdrawal](#)
- » Western Washington University's Commitment to Safety, Treatment
- » Also, [Bridge for Resilient Youth in Transition](#), while a high school program, may offer thoughts about further developing resources to support students in re-entry.

THANK YOU for spending time with this content. The authors' intent is to prepare you for engaging with issues outlined here, and to bring your colleagues into conversation regarding protocols that will work best for your institution and to benefit your students. You are welcome to use or adapt language from these protocols and from those that are referred here, through links. Please acknowledge the origins of any material you use.