**Mental Health considerations for researchers**

**December 2023**

**EXPLANATION OF RISKS:**

* Be clear in application and ICD about risks associated with mental health assessments (cognitive status assessments, IQ screens, mental health assessments, exploitation/abuse/violence assessments, and drug testing).
* Describe how and by who mental health assessments and outcomes are reviewed and reported.
* Remember to report psychiatric adverse events, including serious adverse events, appropriately.

**SELF-REPORT MEASURES:**

* Protocols using **subject self-reports** that ask about depression, worthlessness/guilt, and quality of life, should include a process of review by personnel with plan to notify investigator of pertinent positives.
* Protocols using **subject self-report reports** with items specifically addressing **self-harm or suicidal ideation, or related items indicating a subject may be at risk**, should have a mechanism for responses to be reviewed in **REAL TIME** so action can be taken as appropriate.
* Protocols using remote self-reports (Ipad, EMA device, web-based, etc.) should include a mechanism for notification of the investigator or designated member of the study team when threshold responses are received so that **REAL TIME** management can occur.

**INVESTIGATOR-ADMINISTERED MEASURES:**

* Investigator-administered measures of psychiatric symptoms should be completed by those with appropriate training.
* If the study team does not have the specific expertise, consider consultation with psychiatry or psychology colleagues.

**PHQ-9:**

* PHQ-9: Suggestion to align with Suicide Risk BPA’s used by NM PCMH clinics rooming staff starting 8/8/2022:
  + if >14 and + response to question 9= refer for emergency eval
  + if >14 and – response to question 9= refer for mental health consult
  + if <14 and + response to question 9= further assessment needed; refer as appropriate
  + if <14 and – response to question 9= no further specific intervention

**The Columbia Suicide Severity Rating Scale-Revised** **(CSSRS-R):**

* Baseline (“lifetime”) and “since last visit” versions available on-line
* Validated and available in Spanish!
* Use of this scale should include training for non-mental health providers as it explores suicidality in a very thorough manner
  + To complete the C-SSRS Training for Clinical Practice, visit <http://c-ssrs.trainingcampus.net/>
  + General information, go to http://cssrs.columbia.edu/

**RESOURCES:**

* **CURRENT** – include **988** for the suicide hotline, don’t give numbers to agencies now closed **(911 is still ok to use)**
* **ACCURATE**—know the policy for referral to the Department of Psychiatry, procedures for accessing ER, the Psychiatric Emergency Service (PES). Consider age- and/or diagnosis-appropriate services (e.g. Nebraska Family Help Line [1-888-866-8660]; Professional Partners-Region specific)
* **LOCAL**—while resources are limited in some areas of the state, please make sure you list the ones close to the subject’s home

**UNMC/NE Medicine psychiatry services:**

* Psychiatry (ADULT) accepts referrals from PCP’s within the system
* C/A psychiatry not limited to UNMC/NE Med providers
* Behavioral Health Connections team (552-6007) facilitates referrals to community agencies.
* When referring to the “PES” (Psychiatric Emergency Service), understand that patients still must go through the regular NE Med ER or Bellevue Medical Center ER first.

**Psychiatry services FOR CHILDREN**

* Immanuel (CHI) ER is primary location for inpatient triage for children/teens; other ER’s may transfer there if hospitalization is needed.
* Bryan LGH (Lincoln) has inpatient care for children/teens as well as emergency shelter placement.
* Boys Town (Grand Island) has emergency shelter placement.
* Mercy (Council Bluffs) will accept NE youth (even Medicaid if no NE beds available)
* Boys Town has an inpatient unit—triage through Methodist ER’s.

**Psychiatry services FOR STUDENTS:**

* **For UNMC students:** call UNO Health Center, 554-2374 (select option 2 to leave message for the nurse for scheduling).
* **For UNO students**: Call CAPS 559-7276 (initial appointments are covered by student fees).
* **Gender and Sexuality Resource Center (GSRC)**: Confidential and free, Student Life Center 2031. Call 402-559-7276.

**Kearney Community resources**

* S.A.F.E. Center: 24/7 hotline 1-877-237-2513

**Lincoln community resources**

* Voices of Hope: Crisis hotline 402-475-7273 (non-emergencies, 402-476-2110)

**Norfolk community resources**

* Bright Horizons: call 877-379-3798 or text 402-370-8817.

**Scottsbluff Community resources**

* Doves Program: call 308-436-4357 or 866-953-6837; text 515-599-6620.

**national Resources**

* National Domestic Violence Hotline: 1-800-799-7233, TTY 1-800-787-3224
* National Suicide Prevention Lifeline: Text or Call 988
* Trans Lifeline: 1-877-565-8860