University of Washington  
Faculty Council on Student Affairs  
April 2, 2019  
1:30 p.m. – 3:00 p.m.  
Odegaard Undergraduate Library 320

Meeting Synopsis

1. Call to order
2. Review of the minutes from March 5, 2019
3. Mental health resources and concerns (Megan Kennedy, Glenna Chang, Natacha Foo Kune)
4. Hazing regulations update (Elizabeth Lewis, Anton Ward-Zanotto)
5. Voluntary medical leave update (Elizabeth Lewis)
6. Medical excuse notes resolution update
7. Good of the order
8. Adjourn

1. Call to order

The meeting was called to order at 1:30 p.m.

2. Review of the minutes from March 5, 2019

The minutes from March 5, 2019 were approved as written.

3. Mental health resources and concerns (Glenna Chang, Megan Kennedy, Natacha Foo Kune)

Glenna Chang, Interim Associate Vice President for Student Life, Megan Kennedy, Interim Special Assistant to the Vice President for Student Life, and Natacha Foo Kune, Director of Counseling Center, attended the council and provided an update on student mental health resources and concerns (Exhibit 1).

A member asked about the time commitment associated with each program. Kennedy responded that each training is 60 to 90 minutes (some are held over several weeks).

If council members want additional information about any program they may reach out to Kennedy, Chang, and/or Foo Kune.

4. Hazing regulations update (Elizabeth Lewis)

Elizabeth Lewis, Director of Community Standards & Student Conduct, attended the council and presented updates to University hazing regulations (Exhibits 2-4).

The chair asked if there was a motion to approve the proposed changes to Scholastic Regulations and forward to the Senate Executive Committee (SEC). The council voted to approve the legislation for SEC and Faculty Senate consideration.
5. **Voluntary medical leave update (Elizabeth Lewis)**

Lewis presented updated language for an undergraduate voluntary leave of absence policy (Exhibit 5).

A member asked about capacity constrained majors. Lewis responded that there is a concern that students enrolled in a capacity constrained major may not take a voluntary leave of absence because they think they will lose their position.

The council reviewed the policy language and voted to approve the new chapter in Student Governance Policies. Lewis will work with the University Policy and Rules Office to determine the appropriate process for creating a new chapter in the Student Governance Policies.

6. **Medical excuse notes resolution update**

The chair shared an updated version of the draft Class C resolution regarding medical excuse notes (Exhibit 6).

The council reviewed the document and offered amendments. The council then voted to approve the Class C resolution to be forwarded to the Senate Executive Committee and Faculty Senate for consideration.

7. **Good of the order**

Nothing was stated.

8. **Adjourn**

The meeting was adjourned at 3:00 p.m.

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*Minutes by Lauren Hatchett, lehatch@uw.edu, council analyst*

**Present:**
- **Faculty:** Ann Culligan, Bruce Hevly, Chris Laws (chair), Dean Heerwagen, Andrea Carroll, Selma Powell
- **Ex-officio reps:** Angelia Miranda, Erin Conor, Aileen Trilles
- **President’s designee:** Lincoln Johnson
- **Guests:** Megan Kennedy, Natacha Foo Kune, Glenna Chang, Elizabeth Lewis, Sam Akeyo

**Absent:**
- **Faculty:** Christopher Campbell
- **Ex-officio reps:** Afua Tiwaa, Karen Martinez

**Exhibits**
- Exhibit 1 – FCSA Presentation 4-2-19.pptx
- Exhibit 2 – HazingExecutiveSummary.4.1.19.pdf
- Exhibit 3 – WAC 478-121-135 EDIT.docx
- Exhibit 4 – SGP 209 EDIT.docx
- Exhibit 5 – Voluntary Leave of Absence Undergraduate Students DRAFT 4.1.19
- Exhibit 6 – Medical Excuse Note Bill -- FacSen.v2 Revised 04.02.19.docx
Update on Student Mental Health & Well-Being
INTRODUCTION

Natacha Foo-Kune, Ph.D.
Counseling Center Director
fookune@uw.edu

Megan Kennedy, MA, LMHC
Interim Special Assistant to the Vice President for Student Life
meganken@uw.edu

UNIVERSITY of WASHINGTON
AGENDA

> Student Mental Health & Well-Being Data

> Counseling Center and Hall Health Trends

> Focus on a Comprehensive Approach and Upstream Interventions
Student Mental Health & Well-Being

As reported by the American College Health Association, 40% of undergraduates have felt severely depressed in the last year and more than 10% have seriously considered suicide.
Student Mental Health & Well-Being

There is evidence that a leading reason students drop out of UW is emotional distress.

(UW Retention study, 2014)
# NATIONAL COMPARISON

<table>
<thead>
<tr>
<th>Mental Health Concerns</th>
<th>National college student data</th>
<th>UW student data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rates of mental treatment</td>
<td>19%</td>
<td>34%</td>
</tr>
<tr>
<td>Suicidal Ideation</td>
<td>5.8%</td>
<td>10.8%</td>
</tr>
<tr>
<td>Stigma about receiving mental health treatment</td>
<td>64%</td>
<td>46%</td>
</tr>
</tbody>
</table>


*Source: 2017 Healthy Minds Study, conducted on Seattle campus in spring 2017
<table>
<thead>
<tr>
<th></th>
<th>Counseling Center</th>
<th>Hall Health Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students seen (2017-18)</td>
<td>2,105</td>
<td>2,619</td>
</tr>
<tr>
<td>Staffing</td>
<td>15.8 FTE; 3 interns</td>
<td>10.1 FTE; 1.8 Psych Med; 0.2 Resident</td>
</tr>
<tr>
<td>Counseling model</td>
<td>Average sessions: 5 93% seen for &lt;12 sessions</td>
<td>Average sessions: 6 84% seen for &lt;12 sessions</td>
</tr>
<tr>
<td>Growth in crisis cases</td>
<td>+40% from 2015-16 to 2017-2018. +61% from Aut. 2015 to Aut. 2018.</td>
<td>+66% from 2015-16 to 2017-2018. (+55% requesting MH svcs)</td>
</tr>
<tr>
<td>Funding model</td>
<td>Central (GOF/DOF) SAF Temporary No charge for therapy</td>
<td>Insurance revenue SAF (costs for services not billed to insurance)</td>
</tr>
</tbody>
</table>
Students of concern in Residential Life

Training:
- Annually at beginning of year and ongoing throughout the year for RAs and RDs
- RAs go through didactic and extensive role play trainings with mental health professionals and RD.

Protocol:
- When a student is suicidal, RAs are to refer to the RD, who takes over. RD consults with MH professional.
- Res Life is hiring a case manager as the volume of these cases has increased and is now too much of a burden on the RDs.
Student Mental Health & Well-Being

Through SWBC it was identified:

- Need for more upstream/prevention approaches
- Need to address issues of health equity
- Consider adaptive solutions (vs technical)
- Opportunity to collaborate with UW researchers
Student Mental Health & Well-Being

We are exploring how to offer broad-based prevention work while still addressing more complex and urgent cases.

> Developing a **Centralized Wellness Website** by June 2019.
> Expanding “Let’s Talk” - a free, drop-in counseling program
> Adapting CCFW’s “Be REAL” program
> Piloting the *Wellbeing for Life & Learning Initiative*
> Let’s Talk About Mental Health – training for staff, faculty, and student audiences

**UNIVERSITY of WASHINGTON**
Centralized Wellness Website

The Student Well-Being Collaborative envisions a website that centralizes student health-related services at the University of Washington in Seattle to make resources more accessible to students.
Husky Health & Well-Being

Graduating in June?
Contact us for support establishing health care or insurance for life after UW.

All Your Health Services in One Place

The UW offers a wide range of health and wellness services, from exceptional medical care and counseling services to recreation classes, safety resources, peer advocates, trainings and more.

Our goal is to support your health, safety and well-being so you can make the most out of your Husky Experience. How can we help you today?
Let’s Talk

> Connects UW students with support from experienced counselors from the Counseling Center and Hall Health Center without an appointment.

> *Informal consultation* – it is not a substitute for regular therapy, counseling, or psychiatric care.

> Drop-in Monday through Thursday 2-4pm, when classes are in session.
Let’s Talk

- **Mondays, 2-4PM**
  Odegaard Library, Room 222

- **Tuesdays, 2-4PM**
  Ethnic Cultural Center

- **Wednesdays, 2-4PM**
  Q Center

- **Thursdays, 2-4PM**
  Mary Gates Hall, Room 134E
Be REAL

• 6-week course, 1.5 hours each week

• Includes mindfulness, self-compassion, cognitive-behavioral, dialectical behavior therapy practices

• Significant improvements in: executive function, active coping, acceptance and reframing, perceived stress, self-compassion, mindfulness, resilience, flourishing, and social connectedness. (Gains maintained at 3 months)
Be REAL

Spring & Fall Pilot Locations

• Hall Health and the Counseling Center
• OMA&D: EOP Scholars, CAMP,
• Undergraduate Academic Support Services (e.g., CLUE)
• Graduate School
• Evan’s School, Public Health, College of the Environment
• Q-Center
• FIUTS
• General Studies (2 sections during Spring Quarter)
• First Year Programs

UNIVERSITY of WASHINGTON
WELL-BEING FOR LIFE & LEARNING INITIATIVE
Promoting well-being and resilience in UW learning environments.

Pilot Phase
Spring 2019

- Tri-Campus
- 12 academic departments
- 17 faculty fellows
- 8+ skills and mindsets
Let’s Talk About Mental Health

> Designed for staff, faculty or student audiences

> Training is adaptable and can be responsive to your needs and questions (e.g., Law School, International Students, etc.)

> Co-trainers typically representing the Counseling Center or Hall Health and other connected units who are the “right fit” to meet your needs
Let’s Talk About Mental Health

Learning Objectives

- Understand mental health as a factor that affects the UW community
- Learn how to support someone who is in distress in an inclusive, caring, and appropriate way
- Learn how to intervene with someone who may be thinking about suicide
- Identify the campus resources available to help staff and support students
Questions & Discussion
Student Mental Health & Well-Being

The UW Counseling Center recorded a 70% increase in the number of calls to the crisis counselor during the sixth week of Fall quarter (2018) compared to the same time-period the previous year.

(UW Counseling Center, 2018)
PREVALENCE AMONG GRADUATE STUDENTS

- Grad students **six times** more likely to experience depression and anxiety compared to general population


- Grad students who experience symptoms of depression & anxiety are far less likely to cite positive relationship with advisor/PI


- Just under **half** of surveyed PhD students met criteria for depression

Source: UC Berkeley Graduate Assembly, Graduate Student Happiness and Wellbeing Report (2014)

- More than **3/4** of graduate students reported being overwhelmed

- **Over half** reported experiencing somewhere between “more than average” and “tremendous” stress

Source: Comparing Mental Health Issues Among Graduate and Undergraduate Students, *American Journal of Health Education* (2013)
Provides a safe environment to help UW students explore the challenges of life and learning through counseling, outreach, preventive programming, advocacy, and consultation.

- Students' need for services is high, with a sharp increase since fall quarter '17.
- Recently administered Healthy Minds Survey (May '17) reveals high rates of anxiety, depression, other mental health challenges across schools/colleges, degree programs, student communities.

Steady increases over the past 5 years, trending toward continued growth:

- 80% of students reported some academic impairment due to emotional or mental difficulties in the past 4 weeks.

- 12% of survey respondents contemplated suicide in the last year.
- 20% engaged in other forms of self harm in the past year.

- 250 calls received per week.
- 3.5x more weekly requests than available intakes.
- 7 in 10 are requests for intake.
EXECUTIVE SUMMARY – HAZING POLICIES AT THE UNIVERSITY OF WASHINGTON

Problem Statement
Hazing is a serious public health problem that endangers the well-being of college students nationwide. Hazing in Washington State is regulated by RCW 28B.10.900, RCW 28B.10.901, RCW 28B.10.902. RCW 28B.10.903 instructs institutions to promulgate rules outlining sanctions for engaging in hazing by organizations or groups.

Three University of Washington policy documents define “hazing”. Collectively, these three policies meet the obligations specified by RCW 28B.10.903. They include:
- General Code of Conduct (WAC 478-124-037)
- Student Conduct Code (WAC 478-121-135)
- Student Governance and Policy, Chapter 209(7)(D)(11)

However, these three existing policies at the University of Washington are inconsistent with each other. The inconsistencies introduce risk to University of Washington and are confusing to students, staff, and community.

Moreover, national attention to hazing at colleges and universities is growing and it is incumbent upon the UW to help students understand the behaviors that characterize hazing and the consequences for hazing.

Problem Resolution
Align WAC 478-121-135 (Student Conduct Code) and WAC 478-124-037 (General Conduct Code)
- Update Student Conduct Code WAC 478-121-135 by including the major sections of WAC 478-124-037, which outlines two types of hazing and the consequences for hazing behavior.
- Update the Student Conduct Code WAC 478-121-135 to include RCW 28B.10.902, which specifies consequences related to state financial aid.
- Update the examples of hazing behavior to be more relevant and instructive to students and student organizations.

Problem Resolution
Changes to WAC 478-121-135:
- Add “humiliation by ritual act” to be consistent with WAC 478-124-037
- Move “encouraging or promoting the abuse of alcohol” to section (b) to reflect that other behaviors related to abuse of alcohol are present in (a)
- Replace “mental” with “psychological”
- Add section (b) to introduce greater clarity and nuance to potential hazing behaviors
  o New language generated by workgroup regarding personal beliefs, behavior prohibited in the Student conduct Code, and clarification of unnecessary clothing or other items based on committee feedback
- Add of section (c) from WAC 478-124-037 to provide clarity regarding consent
Add of “cultural events” to section (d)
- Expand section 2 from WAC 478-121-135 regarding hazing investigations
- Add section 3 to meet obligations under RCW 28B.10. 902

**Hazing WAC Workgroup**
The Hazing WAC Workgroup was assembled on three occasions during the Winter 2019 quarter to discuss revisions to the Student Conduct Code WAC 478-121-135. Participants included members from:

- Faculty Council on Student Affairs
- Interfraternity Council
- Panhellenic
- National PanHellenic Council
- United Greek Council
- UW Intercollegiate Athletics
- Associated Students of the University of Washington
- Graduate and Professional Student Senate
- Army, Air Force, and Navy ROTC
- UW Club Sports
- Office of Fraternity and Sorority Life
- Community Standards & Student Conduct

Together this group evaluated examples of hazing behavior and the resulting text benefits from the collective participation of the Hazing WAC Workgroup.
Hazing.

All university organizations, associations and student living groups are prohibited from hazing.

(1) Hazing includes:

(a) any method of Conduct associated with initiation or admission into a student organization or living group, or any pastime or amusement engaged in with respect to such an organization or living group, that causes, or is likely to cause, bodily danger or physical harm, or serious mental psychological or emotional harm, to any student or other person. Hazing activities may include, including but are not limited to:

i. humiliation by ritual act, encouraging or promoting the abuse of alcohol;

ii. striking another person whether by use of any object or any part of one's body;

iii. causing someone to experience excessive fatigue or physical and/or psychological shock;

iv. causing someone to engage in degrading or humiliating games or activities that create a risk of serious mental psychological, emotional, and/or physical harm; and

(b) Hazing also includes conduct that is not a violation of (a) of this subsection associated with initiation or admission into a student organization or living group, or any pastime or amusement engaged in with respect to an organization or living, including but not limited to:

i. encouraging or promoting the use of alcohol and/or drugs,

ii. requiring only new members to perform certain tasks or chores,

iii. requiring the wearing of unnecessary clothing or other items,

iv. requiring participation in physical or intramural activities,

v. causing someone to believe they may be required to engage in degrading or humiliating games or activities that create psychological, emotional, and/or physical harm,

vi. behavior that interferes with academic obligations,

vii. engaging in acts contrary to an individual's personal beliefs, or

viii. engaging in behaviors prohibited in the Student Conduct Code.

(c) Consent of a victim or victims is not a defense to an allegation of hazing.

(d) Hazing does not include customary athletic or cultural events or other similar contests or competitions.

(2) Any university organization, association or student living group that knowingly permits hazing as defined in subsection (1)(a) of this section shall be deprived of official recognition, approval, or
registration granted by the university. Any university organization, association or student living group
that knowingly permits hazing as defined in subsection (1)(b) of this section shall either be deprived of
official recognition, approval, or registration or be placed on probation for a period specified by the
university.

(3) Students found responsible for violations of this WAC shall forfeit any entitlement to state funded
grants, scholarships, or awards for a specified period of time determined by the university.

7/14/17, effective 8/18/17.]
Student Governance and Policy, Chapter 209 – Student Conduct Policy for Academic and Behavioral Misconduct

7. Prohibited Conduct

D. Behavioral Misconduct

11) Hazing

Under WAC 478-121-135, hazing includes:

(a) any method of conduct associated with initiation or admission into a student organization or living group, or any pastime or amusement engaged in with respect to such an organization or living group, that causes, or is likely to cause, bodily danger or physical harm, or serious mental or emotional harm, to any student or other person. Hazing activities may include, including but are not limited to, encouraging or promoting the abuse of alcohol:

i. humiliation by ritual act;

ii. striking another person whether by use of any object or any part of one's body;

iii. causing someone to experience excessive fatigue or physical and/or psychological shock;

iv. causing someone to engage in degrading or humiliating games or activities that create a risk of serious mental, emotional, and/or physical harm.

(b) Hazing also includes conduct that is not a violation of (a) of this subsection associated with initiation or admission into a student organization or living group, or any pastime or amusement engaged in with respect to an organization or living group, including but not limited to:

i. encouraging or promoting the use of alcohol and/or drugs,

ii. requiring only new members to perform certain tasks or chores,

iii. requiring the wearing of unnecessary clothing or other items,

iv. requiring participation in physical or intramural activities,

v. causing someone to believe they may be required to engage in degrading or humiliating games or activities that create psychological, emotional, and/or physical harm,

vi. behavior that interferes with academic obligations,

vii. engaging in acts contrary to an individual's personal beliefs, or

viii. engaging in behaviors prohibited in the Student Conduct Code.

(c) Consent of a victim or victims is not a defense to an allegation of hazing.

Any university organization, association or student living group that knowingly permits hazing as defined in subsection (a) of this section shall be deprived of official recognition, approval, or registration granted by the university. Any university organization, association or student living group that knowingly permits
hazing as defined in subsection (b) of this section shall either be deprived of official recognition, approval, or registration or be placed on probation for a period specified by the university.

Students found responsible for violations of this WAC shall forfeit any entitlement to state funded grants, scholarships, or awards for a specified period of time determined by the university.

When assessing “hazing,” the agency's interpretation of the code is that hazing does not include generally accepted practice, training, and conditioning activities, or activities reasonably designed to test a participant's ability to meet eligibility requirements for established athletic events such as intramural or club sports, intercollegiate athletics, or other similar contests or competitions, or customary cultural events.

AND

8. Conduct Proceedings
D. Full Adjudicative Proceeding

Under WAC 478-121-207, if it becomes apparent that a full adjudicative proceeding is necessary, is in the public interest, or is more appropriate to resolve issues affecting the participants, a full hearing will be held in accordance with WAC 478-121-400 through 478-121-427 that is in compliance with RCW 34.05.413 through 34.05.476.

The following are factors that may be considered as guidelines to determine whether the issues and interests involved warrant a full adjudicative proceeding:

1) If a respondent has been placed on emergency suspension;
2) If a respondent has been charged with hazing defined in section 7(D)(11)(a); or
3) If a respondent has been charged with a felony offense related to the alleged conduct under Washington State criminal code.

AND

9. Disciplinary Sanctions
A. Applicable Disciplinary Sanctions
7) Sanctions for Hazing

Any university organization, association or student living group that knowingly permits hazing as defined in subsection 7(D)(11)(a) shall be deprived of official recognition, approval, or registration granted by the university. Any university organization, association or student living group that knowingly permits hazing as defined in subsection 7(D)(11)(b) shall either be deprived of official recognition, approval, or registration or be placed on probation for a period specified by the university.
In addition to other sanctions, a student who is found responsible for participating in hazing of another shall forfeit any entitlement to state funded grants, scholarships, or awards for a specified period of time.
Voluntary Leave of Absence Undergraduate Students

(Approved by the President by delegation of authority ...)

*1. Purpose:

The University strives to ensure that all students can fully participate as members of the University community. However, when a student’s medical health (i.e., physical or mental health conditions) significantly impairs their ability to function successfully or safely as a student, they may request to take a Voluntary Leave of Absence from the University for treatment and recovery. This policy is aligned with the American Disabilities Act (ADA) and Executive Order 31 and Student Governance Policy Chapter 208.

*2. Definitions:

A. **Campus Designee**: A University staff person who has the authority to grant a Voluntary Leave of Absence. At the University of Washington in Seattle, this is the Associate Vice President for Student Life, or designee. At UW Bothell, this is the Dean of Student Affairs, or designee. At UW Tacoma, this is the Vice Chancellor for Student and Enrollment Services, or designee.

B. **Grant of Leave of Absence**: A notice to students with the status of their leave request and instructions specific to that student

C. **Health Care Professional**: A licensed health care provider who is qualified to diagnose and/or treat the particular medical condition or conditions that are the basis of the leave request.

D. **Health Care Provider Form**: Form completed by the Health Care Professional regarding the student’s request to take a Voluntary Leave of Absence for the purpose of receiving treatment or recovery.

E. **Voluntary Leave of Absence**: A proactive status in which the student requests to not be continuously enrolled for a specific period of time. The transcript shows the student as “On Leave.”

F. **Voluntary Leave of Absence Request Form**: An online form that indicates a student wishes to apply for leave.

G. **University**: The University of Washington, including the campuses of the University of Washington in Seattle, UW Bothell, and UW Tacoma and all programs or of and premises owned or operated by the University of Washington

3. Applying for Voluntary Leave of Absence
An undergraduate student may request Voluntary Leave of Absence from the University by submitting a Voluntary Leave of Absence Request Form online or contacting the appropriate Campus Designee. Students may meet with the Campus Designee to learn more about the Voluntary Leave of Absence process and discuss other suitable options. All requests for a Voluntary Leave of Absence must be accompanied by a Health Care Provider Form completed by a Health Care provider.

Requests for the current quarter must be submitted no later than the last day of instruction. Any requests submitted after the last day of instruction will be considered for future quarters.

4. Terms of Voluntary Leave of Absence

A Voluntary Leave of Absence typically may be granted for one or two consecutive quarters. The University may agree to extend the leave beyond two quarters for a maximum of four consecutive quarters.

5. Process for Granting Voluntary Leaves of Absence

Requests for a Voluntary Leave of Absence will be reviewed by the Campus Designee. Students will be notified via email whether their request has been granted.

The Grant of Leave of Absence will include instructions for the student regarding the University’s expectations of the student while on Voluntary Leave of Absence including but not limited to:

1. Information about engaging other relevant University processes (e.g., Financial Aid, Scholarships, Housing and Food Services)
2. Information about access to faculty, campus services and or other functions of the University while on Voluntary Leave of Absence.
3. Information about returning to the University including:
   a. How and when to contact the Campus Designee to communicate intended date of return or to request an extension of the Voluntary Leave of Absence.
   b. How and when to complete the Returning Student Application by checking the box indicating they were on leave (pertains to students on leave for two or more quarters).
   c. Information about setting up a meeting at least one month before returning from a Voluntary Leave of Absence with the appropriate Campus Designee to create a plan for any needed ongoing support and successful re-entry.

In rare circumstances, if the student’s application or documentation is insufficient, the student may be asked to provide supplemental documentation.

When a Voluntary Leave of Absence is granted, the Campus Designee will notify the Registrar’s office, which will note the student’s “On Leave” status.

7. Confidentiality
The University will comply with the Family Educational Rights and Privacy Act (FERPA), all other applicable laws, and University policies concerning the confidentiality of information related to this policy.

8. Records Retention

Records connected to this Policy shall be maintained consistent with the University records retention policy and other relevant policies.

9. Financial Aid and Tuition:

All other financial issues (e.g., financial aid, scholarship, tuition) will be addressed on a case-by-case basis depending on the student’s circumstances and the time period in which the student is on mandatory leave.

11. Additional Information

(Include links to procedures, forms, charts, addendums, etc. List in alphabetical order by name.)

12. Responsible Office

The xxxx is the main contact responsible for information contained in this policy.

13. History

(This section is for Rules Coordination Office use only for the history of creation and amendments to the policy.)

April 1, 2019

[*Starred section numbers are required sections in a required order.]
RESOLUTION ADDRESSING STUDENT ABSENCES DUE TO SHORT-TERM MEDICAL REASONS AND THE USE OF “MEDICAL EXCUSE NOTES” BY FACULTY – Chris Laws, Chair FCSA

BACKGROUND

Current UW policies regarding student absences for short-term illnesses are advisory in nature and do not specifically address “medical excuse notes” — documents from a professional medical provider attesting to the severity of a short-term illness and the need for a student to be absent from class as a result. The UW’s Student Governance and Policies, Chapter 112, Section 1B addresses the issue most directly: “A student absent from any examination or class activity through sickness or other cause judged by the instructor to be unavoidable shall be given an opportunity to take a rescheduled examination or perform work judged by the instructor to be the equivalent.” However, the lack of more explicit guidance on this important and routine student-faculty interaction is in practice problematic and leads to a disparate set of approaches across campus and inequitable outcomes across student populations — including extensive use of medical excuse notes among some members of the faculty.

Unfortunately, a curricular strategy of routinely requiring students to obtain medical excuse notes provides little or no value and has unintended, adverse consequences for the student, the University, and medical providers. Medical providers want to help students with their health needs, but students who visit a medical professional purely to obtain a document regarding illness have been pressured into entering into a costly and potentially risky provider-patient relationship without a true medical need.

Faculty Senate and ASUW leadership, in conjunction with colleagues at Hall Health, have identified several key areas of concern:

1) Hall Health Access and Resources — Hall Health is often (over) filled to capacity. Students who don’t really want to be a patient are diminishing access for those who do have a medical need to seek care and wish to be seen. The generation of excuse notes is a wasteful use of expensive and limited health care staff time and resources. Estimates from Hall Health suggest as much as $250,000 annually is spent attending to some 2,500 note requests, and that visits for such requests represent approximately 5% of total student visits.

2) Financial Burdens and Inequities — Students who are uninsured/underinsured, including low income students, DACA students, and minority students are at a financial disadvantage when seeking medical care. Policies that require a student to seek care for an administrative reason place a financial burden on these students and affect students in extremely unequal ways.

3) Student Safety — Students who see a provider to get a note have a specific objective: get the note. There is pressure to make sure that the symptoms are described in such a way that the provider will generate a note. Exaggeration of symptoms leads to testing or procedures that have risk, and patients may be harmed as a result. The risk/benefit ratio in these cases is extreme.

4) Unrealistic expectation of provider-patient relationship — Lacking omniscience, a provider must rely on the patient’s description of the symptoms. Sometimes this is after the illness has already resolved. Providers are trained to be advocates for their patients and so a note will be
generated almost 100% of the time. Thus, requiring a student to obtain a medical excuse note has no value as an actual check on student behavior.

5) Education — The academic relationship between faculty and students belongs in the classroom. Faculty are in the best position to judge academic performance by students. Further, as students develop and prepare for their careers later in life, they should experience an environment that reflects the realities that will be experienced after graduation. Hall Health in particular wants to promote responsible self-care for minor ailments and health concerns, an important educational component that encourages self-reliance and resilience.

Given these serious concerns, Faculty Senate and ASUW leadership have begun pursuing a more explicit and restricted medical excuse note policy that promotes access, encourages appropriate use of limited resources, promotes patient safety, does not place an unfair financial burden on students, and is in alignment with a holistic educational experience. Of note is that restricting routine medical excuse notes would not have any bearing on documentation needed for disability, hardship, or other significant circumstances (including medical conditions) requiring longer term absences from the University; nor would such restrictions prevent faculty from requiring students to justify the unavoidable nature of an absence, or require that faculty develop new accommodations. Faculty, furthermore, faculty who are currently asking for medical excuse notes are already making accommodations for students who do provide them – a policy that prohibited the use of such notes would simply extend those pre-existing accommodations to students without the intermediary and problematic role of a health care provider.

Implementation of such a policy will have meaningful impacts on virtually every classroom across campus, and Faculty Senate and ASUW leadership have identified several key areas that should be addressed to assure the success of a restrictive medical excuse note policy:

1) Communication of policies to students;
2) Protecting students who are asked to provide notes;
3) Communication of policies to current and future faculty;
4) Development of best practices guidelines;
5) Gaming;
6) Disproportionate faculty burden;
7) Additional workload;
8) Faculty rights and authority.

With these issues in mind, and in the interest of supporting faculty efforts to change these policies, we offer the following Class C resolution.

WHEREAS existing UW policy (SGP, Chapter 112) states that students who are “absent from any examination or class activity through sickness or other cause judged by the instructor to be unavoidable”
shall be given an opportunity to take a rescheduled examination or perform work judged by the instructor to be the equivalent”; and

WHEREAS thousands of UW students are asked annually by faculty members to provide documentation from a medical professional to justify the “unavoidable” nature of short-term illnesses; and

WHEREAS students who seek support from medical care providers purely to obtain such documents at the request of a faculty member have been pressured into entering into a provider-patient relationship without necessarily possessing an immediate medical need; and

WHEREAS providers in most cases of short-term illness must rely on patient descriptions of the symptoms of an illness that has already resolved itself, with no existing physical evidence or symptoms for the provider to evaluate; and

WHEREAS students who see a provider to get a medical excuse note experience pressure to describe their symptoms in such a way that the provider generates a note, resulting in exaggeration of symptoms and possible testing or procedures that may be costly and physically harmful; and

WHEREAS providers are trained to be advocates for their patients, and as a practical matter generate medical excuse notes on request almost 100% of the time, resulting in no meaningful check on student behavior; and

WHEREAS many UW students turn to the student-supported Hall Health Center to acquire medical excuse notes, diminishing access for those who have more pressing medical needs to seek care and resulting in a wasteful use of expensive and limited health care staff time and resources; and

WHEREAS students who are uninsured/underinsured, including low income students, DACA students, and minority students are at a financial disadvantage when seeking medical care, so that faculty policies requiring students to seek medical care for administrative reasons place a meaningful financial burden on these students, and affect students in extremely unequal, undesirable, and ultimately unjust ways; and

WHEREAS requiring medical or legal documentation of absence places a burden on faculty, in that the Health Insurance Portability and Accountability Act of 1996 (HIPAA) imposes legal requirements upon those who possess the medical information of others,

BE IT RESOLVED that instructors are strongly discouraged from requiring professional medical or legal documentation from a student in determining whether or not to grant accommodations for student absences due to short-term medical causes; and

BE IT FURTHER RESOLVED that the Faculty Senate endorses a timely revision of Chapter 112 of the UW’s Student Governance and Policies to specifically prohibit members of faculty from requiring such documentation from medical professionals by faculty, along with the development of guidance and curricular support to strengthen student-faculty communication concerning student...
absences, ensure the academic integrity of student work, and promote the health and well-being of all UW students; and

BE IT FURTHER RESOLVED that the Faculty Senate, in coordination with the Faculty Council on Academic Standards, the Faculty Council on Student Affairs, and the Faculty Council on Teaching and Learning develop guidance and curricular support to strengthen student-faculty communication concerning student absences, ensure the academic integrity of student work, and promote the health and well-being of all UW students.

Signators

Chris Laws, Chair FCSA

Thomas Halverson, Chair FCTL