

CONCERN FOR WELLBEING

Dental education is rigorous, and each of us carries responsibilities both inside and outside the clinic and classroom. When life adds additional stress, having a community that notices and cares can make a meaningful difference. To support this culture of care, we have established the Concern for Wellbeing form.

If there is immediate danger or risk of harm to any person - call 911 and Campus Security at 313-993-1234. Once emergency professionals have established control of the situation, you can utilize this form to document the event. The Concern for Wellbeing form is not monitored 24/7.

This process is intended to connect individuals with supportive resources early.

The focus is care and support - not discipline.

Submitting a form is not about getting someone in trouble; it's about looking out for one another and helping safeguard no one navigates challenges alone.

All information is handled with discretion in accordance with university policy and applicable privacy laws. The information is reviewed by the Office of Health & Wellness to assess next steps, which may include outreach or referral to appropriate resources. In situations that warrant the information to be shared, it will only be shared in strict adherence to university policy and applicable privacy laws.

RED FOLDER

The Red Folder is an initiative strategically design help to faculty and staff identify and respond to students in distress. Red Folder is nationally well-recognized and originally started at the University of California, Berkeley.

The UDM Dental Red Folder was compiled through collaboration with the Office of Health & Wellness (OHW) and faculty. There are four discernable categories for DISTRESS; Low, Moderate, High and Safety Risk. Within each of these, here are four categories of signs/symptoms to recognize; Physical, Psychological, Academic and Quotes (quotes were a contribution from faculty). Click on each of categories for DISTRESS to see how to recognize and respond. Below is the UDM Dental Red Folder Decision Tree.

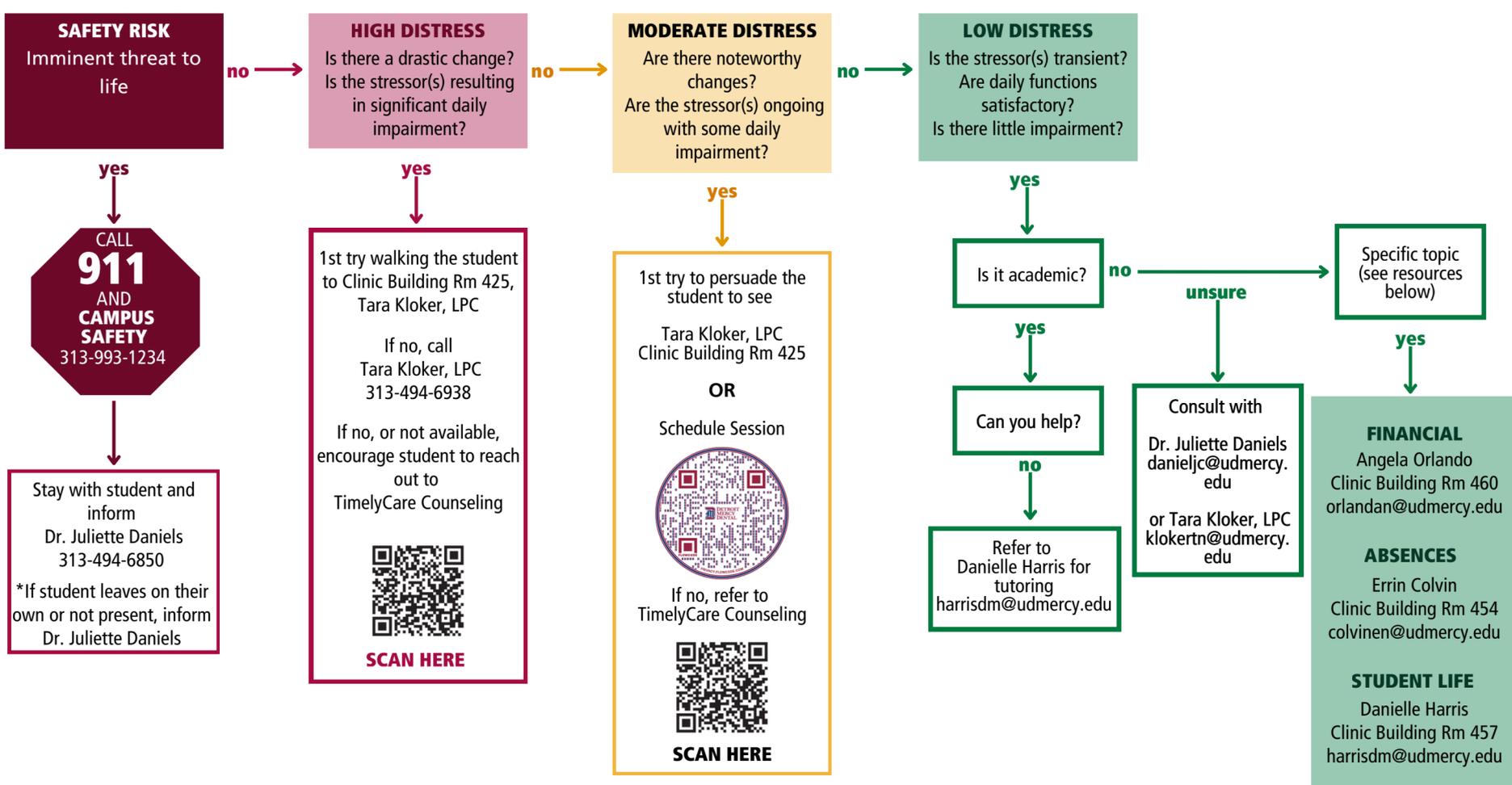
Low Distress

Moderate Distress

High Distress

Safety Risk

DECISION TREE



***If at anytime you are unsure, reach out to Dr. Juliette Daniels (313-494-6850) or Tara Kloker, LPC (406-202-5528).**

Low Distress

Someone with Low Distress will have stress that is transient, comes and goes. The daily functions of this individual will be satisfactory and there will be little impairment. This category allows the individual to become aware of what the stressor(s) is and how to healthfully cope with that stress. This can sound like: *"I'm not understanding and I need help."*

RECOGNIZE This is not an exhaustive list.

Academic

- Daydreams or easily distracted - can refocus self
- Dip in grades, still passing
- Lower performance compared to prior level of work

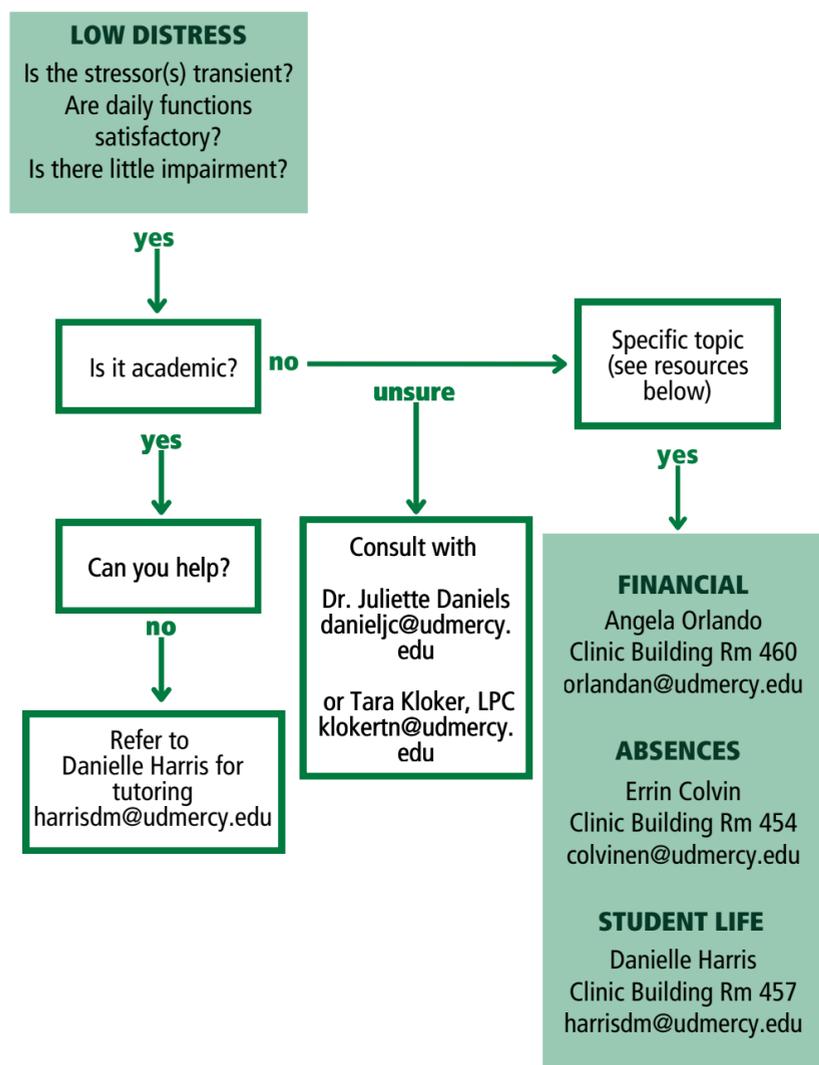
Physical

- Some disagreements with other(s), and still respectful
- Generally participates
- Rarely sleepy
- Fair energy

Psychological

- Disappointment or frustration where appropriate
- Feels supported and can redirect mood
- Moderate motivation
- Expresses hope
- Engages socially outside school and minimally with classmates

DECISION TREE



RESPOND

Validate

Give them your full attention. Use active listening skills; restate what they say, ask clarifying questions, and give encouraging nods of your head. This step is incredibly important as it gives the person a space to feel heard and seen.

"It sounds like you are experiencing a lot and I want to support you."

If the person prefers not to speak, continue to be present; silence is support!

Gather Information

Ask the person what they need or want for a positive outcome.

"What would a positive outcome look like? Or what could help reduce the stress?"

Use open-ended questions and clarify what the person says for better understanding.

"I hear you say you're not sure how best to study."

Ask what steps they have taken to manage the stress.

Offer Resources & Follow Up

Brainstorm together what could resolve or lessen the distress. Reinforce your support by following up.

"Let's touch-base next week to see how things are going."

UDM Dental Resources

FINANCIAL: Angela Orlando, Clinic Building Rm 460
orlandan@udmercy.edu

ABSENCES: Errin Colvin, Clinic Building Rm 454
colvinen@udmercy.edu

STUDENT LIFE: Danielle Harris, Clinic Building Rm 457
harrisdm@udmercy.edu

Documentation

Utilize the [Concern for Wellbeing form](#) to document and connect the student to the right resources and continue to encourage open communication.

Moderate Distress

Someone who is experiencing Moderate Distress will have noteworthy changes; in appearance, in mood, in behavior, and in beliefs. The stressor(s) are ongoing, which will impair some daily activities and responsibilities. This can sound like: "Today is not my day."

RECOGNIZE This is not an exhaustive list.

Academic

- Inconsistent attendance or arriving late/leaving early
- Often distracted or unable to stay focused
- Decrease in performance
- Missing or falling behind on assignments
- Occasionally unprepared
- Failing "out of the blue"
- Asking for an extension

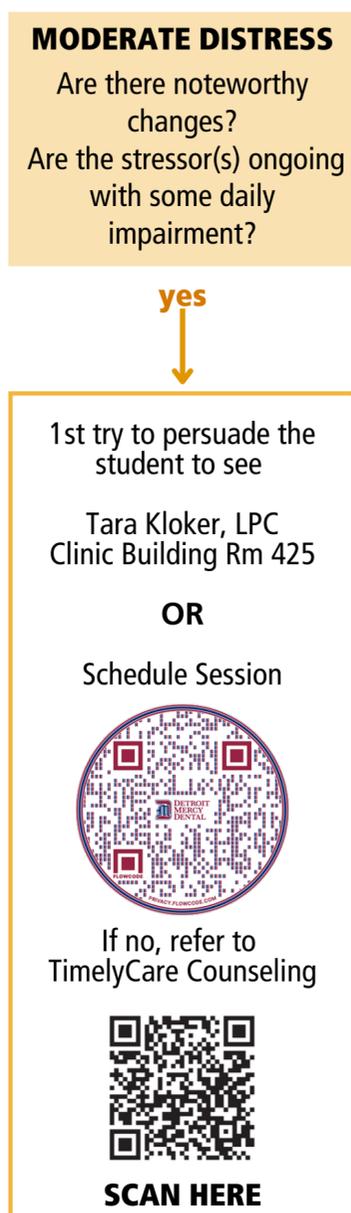
Physical

- Tired or haggard look
- Low effort and energy
- Nail biting
- Change in appearance (not drastic)
- Excessive sweating
- Shaking hands or visually nervous

Psychological

- Disclosing personal distress
- Anxious or "jumpy"
- Low motivation
- Seems mentally drained or looks withdrawn
- Sitting alone or withdrawn from others
- Irritable or apprehensive
- Change in beliefs or core values

DECISION TREE



RESPOND

Calm Yourself

Stress is a natural reaction to a crisis. Take 3 deep breaths, ground through your feet. It could be helpful to ask the person to do this with you. Speak with confidence and compassion, moderate pace and volume.

"I am going to take a deep breath to calm my brain and think clearly, would you like to do this with me?"

Pause

Take a moment to gather yourself and reassess the situation.

"Let's take our time and figure this out together."

If the person becomes angry or combative, remind them in a calm voice, you care and want the best for them.

Validate

Give them your full attention. Use active listening skills; restate what the person says, ask clarifying questions, and give encouraging nods of your head. This step is incredibly important as it gives the person a space to feel heard and seen.

"It sounds like you are struggling and I want to support you."

If the person prefers not to speak, continue to be present with the person; silence is support!

Consult

Tell the student you want to consult with someone.

"I would like to reach out to a colleague to make sure we are exploring all options for next steps."

Let the person know who you will be consulting with and if they would like to invite someone to help in the process. See Resources on the Decision Tree. If you are unsure, consult with Dr. Juliette Daniels at 313-494-6850 or Tara Kloker, LPC at 313-494-6938.

Gather Information

Ask the person what they need or want for a positive outcome.

"What would a positive outcome look like? Or what could help reduce the stressors?"

Use open-ended questions and clarify what the person says for better understanding.

"I hear you say you're not sure how to best study?"

Ask what steps the person has taken to manage the stressors.

Persuade

Let the person know you think it's best to see a therapist.

"Have you ever spoke with a professional therapist about coping with stress. I think it could be beneficial."

Offer Other Resources & Follow Up

Brainstorm together what could resolve or lessen the distress. Reinforce your support by following up.

"I will check in with you on Friday to see how things are going."

Documentation

Utilize the Concern for Wellbeing form to document and connect the student to the right resources and continue to encourage open communication.

High Distress

Someone with High Distress will display drastic changes; to character, behavior, mood, thinking or belief. And the stressor(s) will result in significant daily impairments. The stressor(s) may occur in clusters or be an extreme acute change that is noteworthy. The stressor(s) are ongoing and consistent. This can sound like: *"Everyone else does well and I'm struggling."* *"I'll never get out of here."* *"I may not be able to come back."* *"I'm not learning anything."*

RECOGNIZE This is not an exhaustive list.

Academic

- Requesting special considerations, unrelated to learning accommodations
- Frequently reschedules appointments
- Not responding to meeting requests
- Refusal to participate
- Overly demanding of faculty time outside regular instructional needs
- Sudden decline in grades and performance fluctuations
- Stops showing up to class, multiple absences
- Disturbing content in writing or presentations
- Disruptions in class or clinic

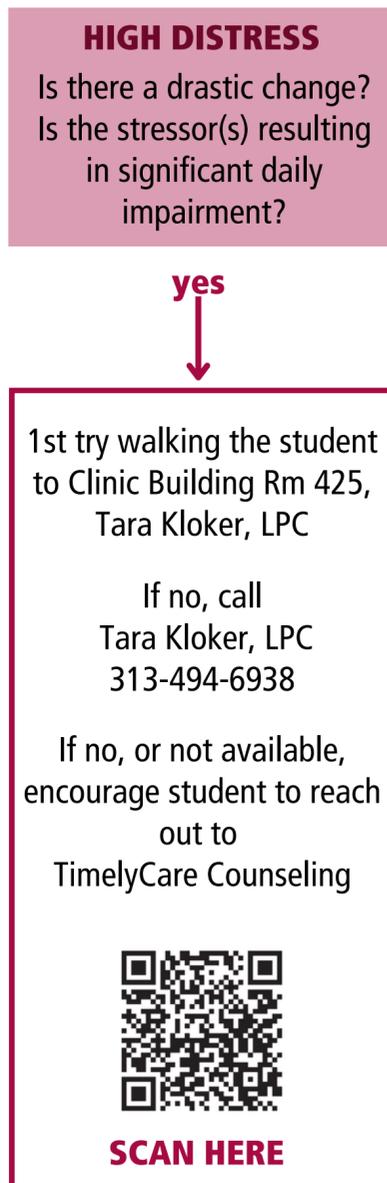
Physical

- Drastic change in appearance, sudden changes in weight
- Strange or bizarre behavior, loss of contact with reality
- Decrease in sleep or insomnia
- Rapid speech or manic
- Depressed mood or decreased energy
- Long sleeves on hot days
- Marks or bruises

Psychological

- Self-disclosure of intense distress - abuse, assault, discrimination
- Unusual or extreme emotional response to an event
- No emotional fluctuations, always happy, sad, mad ...
- Verbally abusive - intimidates, taunts
- Isolating, feels no sense of belonging, or completely withdrawn

DECISION TREE



RESPOND

Calm Yourself

Stress is a natural reaction to a crisis. Take 3 deep breaths, ground through your feet. It could be helpful to ask the person to do this with you. Speak with confidence and compassion, moderate pace and volume.

"I am going to take a deep breath to calm my brain and think clearly, would you like to do this with me?"

Pause

Take a moment to gather yourself and reassess the situation.

"Let's take our time and figure this out together."

If the person becomes angry or combative, remind them in a calm voice, you care and want the best for them.

Consult

Tell the person you are going to consult Dr. Juliette Daniels at 313-993-6850 or Tara Kloker, LPC at 313-993-6938.

"I need to reach out to Tara or Dr. Daniels, and they will help us brainstorm best possible next steps."

If the person does not want you to do this, remind them we all want the best for them and either Tara or Dr. Daniels will need to know about this situation. Sometimes it can be helpful to invite the person to be on the call with you. Once this call has taken place, you can ask if there is anyone they would like to call.

Validate

Give them your full attention. Use active listening skills; restate what the person says, ask clarifying questions, and give encouraging nod of your head. This step is incredibly important as it gives the person a space to feel heard and seen.

"I am concerned and want to support you."

If the person prefers not to speak, continue to be present with them; silence is support!

Direct Questions

"Are you suicidal? Do you want to harm yourself or someone else?"

If either of these is "yes," that is a safety risk, and you need to call 911 and get Campus Security. Extensive research has shown you cannot put these ideas into someone's head by asking these questions. It actually allows the person the space to not feel judged or shameful for having these thoughts. It breaks the ice for them to talk about it.

Concrete Help

Offer to walk the person to Clinic Building Room 425, if Tara was not who was consulted earlier.

"I would like to take you to Tara. You don't have to do this alone."

If they don't want to go, validate that feeling and offer TimelyCare. Remember validation is not condoning or agreeing with someone, it is letting them know their perspective is true for them.

Documentation

Once the person is safe and has been connected with support, document the interaction. [Concern for Wellbeing form](#)

Safety Risk

This is an imminent threat to life. It can sound like: "Doesn't matter how hard I try." "I'm going to kill myself if I fail." "I'm dying here." "If I was not on meds, I'd kill myself."

RECOGNIZE This is not an exhaustive list.

Warning Signs

- Verbal, written or implied suicide, homicide, assault or self-harm
- Unprovoked anger, aggressive behavior or physical violence
- Themes of extreme hopelessness, helplessness, isolation, rage, or despair
- Stalking behavior

DECISION TREE



RESPOND

Make the Call

Tell the person you need to call 911 and get Campus Security.

"I am going to call 911. I will be here with you."

If the person asks you not to do that, state kind and assertively,

"I am concerned about you and I need to bring in someone who can help you."

Calm Yourself

Stress is a natural reaction to a crisis. Take 3 deep breaths, ground through your feet. It could be helpful to ask the person if they would like to do this with you. Speak with confidence and compassion, moderate pace and volume.

"I am going to take a deep breath to calm my brain and think clearly, would you like to do this with me?"

Notify

Tell the person you need to inform Dr. Juliette Daniels at 313-993-6850 of the situation. Tell the person they can be on the call with you.

"I need to let Dr. Daniels know what is happening. Would you like to be on the call with me?"

If there are others around, you can ask one of them to notify Dr. Daniels of the situation and where it is happening.

"We need to let Dr. Daniels know what is happening. I am going to have [bystander] inform her and will stay here with you."

Validate

Give them your full attention. Use active listening skills; restate what the person says, ask clarifying questions, and give encouraging nod of your head. This step is incredibly important as it gives the person a space to feel heard and seen.

"I am concerned and want to support you."

If the person prefers not to speak, continue to be present with the person; silence is support!

Documentation

Once the person is safe and has been connected with support, document the interaction. [Concern for Wellbeing form](#)