

Student Mental Health Policy: Guidance for Staff

CONTENTS

1. Introduction	p. 2
<i>Common mental health problems</i>	p. 3
2. Useful Contacts & Resources	p. 4
3. Responding to a Crisis	p. 8
<i>Students in distress</i>	p. 8
4. Supporting Students Experiencing Mental health difficulties	p. 10
5. Procedures & Regulations	p. 11
<i>Mitigating Circumstances</i>	p. 11
<i>Academic Appeals</i>	p. 12
<i>Interruption or Cessation of Studies</i>	p. 13
<i>Conduct & Discipline</i>	p. 14
<i>Fitness to Practise</i>	p. 14
6. Requirement for Evidence	p. 15
7. Non-Crisis Behaviour Which Gives Rise to Concern	p. 15
<i>Suggested structure for addressing concerns about students</i>	p. 16
<i>Disruptive behaviour in class</i>	p. 17
<i>Case Conferences</i>	p. 17
8. Taking Difficult Decisions	p. 17
9. Confidentiality & Disclosure	p. 18
<i>Disclosure without consent</i>	p. 19
10. Students who are Studying Away from the University	p. 19
11. Employment & References	p. 20
12. Training & Awareness	p. 20
Appendix 1: List of Professional Courses	p. 21

1. INTRODUCTION

1.1 This guidance explains how practically to implement the University's Student Mental Health Policy. There is also a guidance document for Students ([link](#)). The policy and guidance applies to all our registered students. The purpose of this guidance document is to elaborate on the student mental health policy by providing practical advice on how it can be implemented, and to provide all staff with the basic information about mental health difficulties and its impact on students sufficient to enable them to react appropriately and signpost effectively.

1.2 *Mental health difficulties*

1.2.1 As with physical health, when mentally healthy most people expect to be generally 'well' and able to go about their daily business without disruption. Anyone can experience periods of mental health difficulties, and for some people these will be more serious and longer-term in impact than for others.

1.2.2 Mental health difficulties, as with other illnesses, varies in degree. It can be chronic or temporary, severely debilitating or mainly manageable. For the purposes of support within an academic context, students will generally fall into one of two groups: those who are able to manage their studies when the appropriate support is in place, and those who may need to withdraw temporarily or permanently from their studies.

1.2.3 According to the Association for University and College Counselling, between 3% and 10% of students will contact their counselling service each year. Young people are more susceptible than is the general population to mental health difficulties. Consequently, students are regarded as a vulnerable group. Coming to University is a challenging transition even for students with robust mental health, and the demands of academic life can add to the pressure. As a result, individuals with no previous history of mental health difficulties may find themselves experiencing difficulties which are unfamiliar to them. Students who have previously managed their condition may find that their symptoms are exacerbated when they come to University.

1.2.4 In some instances, mental health difficulties is classed as a disability in the terms of the Equality Act 2010, entitling students to support and reasonable adjustments with respect to participation in a programme of study. The support we provide to students experiencing mental health difficulties is informed by, but not limited to, the obligations the Equality Act imposes.

1.3 *Responsibilities of University Staff*

1.3.1 You can support students through your awareness of some of the indicators of mental health difficulties, by being prepared sensitively to raise these with students who might be affected, and by ensuring that you have an understanding of the basic support services available and know how to signpost students to them. For the majority of staff, no additional expertise will be required and you are expected not to exceed the boundaries of their knowledge and understanding when supporting and helping students. Members of staff with more specialist roles will receive appropriate training.

1.3.2 Useful contact information and other resources are listed in the Section 2. Information about the availability of more in depth training can be obtained from the Counselling Service.

1.4 *Common mental health problems*

1.4.1 The NHS Livewell website identifies some common problems that affect students. These are summarised below.

For more information visit www.nhs.uk/Livewell/studenthealth/Pages/Mentalhealth.aspx.

1.4.2 *Depression and Bipolar Disorder*

- People suffering from depression feel sad or low for weeks or months, to an extent that it interferes with their life.
- Sometimes referred to as manic depression, bipolar disorder affects a person's moods so that they swing from one extreme to another; period of depression alternate with periods of mania.
- Signs of depression may include: loss of interest in life; feeling you can't enjoy anything; feeling tired; loss of appetite; difficulty making decisions; problems sleeping; waking up too early.

1.4.3 *Eating disorders*

- Anorexia and bulimia are the main eating disorders that affect students. They are both more common in women, but can affect both men and women
- Anorexia involves severe, sometimes life-threatening weight loss. Bulimia is more common and involves bingeing then vomiting or purging with laxatives.

1.4.4 *Schizophrenia*

- Schizophrenia affects around one person in 100 and is equally common in men and women. More men seem to develop schizophrenia when aged between 15 – 25, whilst for women it's something that occurs later in life.
- Signs of schizophrenia may include: hallucinations (especially hearing voices); paranoid delusions (false beliefs); difficulty concentrating; difficulty in finding the motivation to do simple things.

1.4.5 *Drugs, drink and mental health*

- Both alcohol and drugs* can make an underlying mental health disorder worse, and abuse of either might also be an indicator of a problem.

2. USEFUL CONTACTS & RESOURCES

2.1 *Key Internal Contacts*

2.1.1 *Student Support in Schools*

- Many Schools have a named Student Support Officer or other member of staff with additional expertise in student support matters. Contact your School Office for further information.

2.1.2 *Counselling Service*

Tel : +44 (0)161 275 2864

Email : counsel.service@manchester.ac.uk

Web: www.manchester.ac.uk/counselling

2.1.3 *Disability Support Office*

Tel : +44 (0)161 275 7512/8518

Email : dso@manchester.ac.uk

Web : www.manchester.ac.uk/disability

Minicom: +44 (0)161 275 2794

Text: +44 (0)7899 663 512

Fax: +44 (0)161 275 7018

2.1.4 *Student Occupational Health*

Web: www.manchester.ac.uk/occupational-health

Tel: +44 (0)161 275 2858 (Oxford Road Site)

Tel: +44 (0) 161 306 5806 (Sackville Street Site)

2.1.5 *University Security*

Tel: +44 (0)161 306 9966

2.1.6 *Residences General Manager for Pastoral Care*

Tel : +44 (0)161 306 6102

Email : brendon.jones@manchester.ac.uk

2.1.7 *Online*

Supporting Students: www.staffnet.manchester.ac.uk/supporting-students

The Student Support Forum and mailing list offers an informal network of staff with student-facing roles and is a key channel for communication on student support matters.

www.staffnet.manchester.ac.uk/supportingstudents/forum

Students are referred to the 'Personal Life' section of Crucial Guide Live:

www.studentnet.manchester.ac.uk/crucial-guide/personal-life/

In Halls:

www.studentnet.manchester.ac.uk/crucial-guide/home-life/halls/safety-security/

2.1.8 Accommodation Office

See also Manchester Student Homes

Tel : +44 (0)161 275 2888

Email : accommodation@manchester.ac.uk

Web : www.manchester.ac.uk/accommodation

2.1.9 St. Peter's Chaplaincy

Tel: +44 (0)161 275 2894 (Oxford Road site)

Tel: +44 (0)161 306 2522 (Sackville Street Site)

Web: www.stpeters.org.uk

2.1.10 International Students Advice Team

Tel : +44 (0)161 275 8553/2110/2059/2972

Email : iat@manchester.ac.uk

Web : www.studentnet.manchester.ac.uk/crucial-guide/academic-life/immigration/

2.1.11 Manchester Student Homes

see also Accommodation

Tel: +44 (0)161 275 7680

Email : manchesterstudenthomes@manchester.ac.uk

Web: www.manchesterstudenthomes.com

2.1.12 Office of Student Support and Services

Tel: +44 (0)161 275 2071

2.1.13 Students' Union Advice Centre

Tel: +44 (0)161 275 2947

Web: www.umsu.manchester.ac.uk/advice

2.1.14 Nightline (Student-run listening service)

Students will find the telephone number for Nightline on the back of their library cards. To prevent abuse, please don't add the telephone number to any publications, either online or in handbooks etc.

8am – 8pm term time only

Tel: +44 (0)161 275 3983

Tel: +44 (0)161 275 3984

2.1.15 Student Admissions

Undergraduate Admissions Office

tel: +44 (0) 161 275 2077

email: ug-admissions@manchester.ac.uk

Postgraduate Admissions Office

tel: +44 (0) 161 275 4740

email: pg-admissions@manchester.ac.uk

2.2 External Sources of Support

2.2.1 Accident & Emergency – Manchester Royal Infirmary (MRI)

- Tel: +44 (0)161 276 4147
- Web: <http://www.cmft.nhs.uk/royal-infirmary/plan-your-visit>

2.2.2 Manchester Royal Infirmary (MRI) Emergency Mental Health Team

- Tel +44 (0)161 701 0313
- Web: <http://www.cmft.nhs.uk/royal-infirmary/plan-your-visit>

2.2.3 Police

Tel: +44 (0)161 872 5050 (to report a crime)

Tel: +44 (0)161 856 4466 (Greenheyes (local) Police Station)

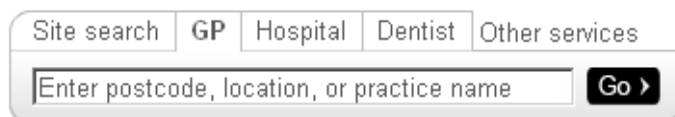
Email : B4.npt@gmp.police.uk

Web: <http://bit.ly/rNMrV1> (Police)

Web : www.manchester.gov.uk/StudentSafety

2.2.4 General Practitioners

- Students are strongly encouraged to register with a local GP, but may not have done so
- Find the nearest GP online by visiting the National Health Service (NHS) Choices website at www.nhs.uk and using the appropriate postcode to search for a GP.



Site search GP Hospital Dentist Other services

Enter postcode, location, or practice name Go

2.2.5 National Health Service Direct

Tel: +44 (0)845 4647

www.nhsdirect.nhs.uk

2.2.6 Crisis Point

Tel: +44 (0)161 225 9500

- Crisis point is a mental health crisis support centre. They can offer accommodation 'respite beds' for up to 10 consecutive days. They can also offer non-residential one to one sessions for up to 6 weeks. People can refer themselves or be referred by a professional. Referrals can be made over the telephone (8am to midday). When they are full they will run a waiting list.

2.2.7 Social Services

Emergency Duty (Social Work) Team for Social Services and Mental Health in Manchester
Tel: +44 (0)161 255 8250.

2.2.8 Help lines

		Telephone	Web
CALM	Campaign Against Living Miserably	0800 585858	www.thecalmzone.net/talk/
Drugline	Free and confidential information and support for people with drugs and alcohol related issues, their families and friends.	0808 1 606 606	www.drugline.org/
Mind helpline	For better Mental Health	0300 123 3393	www.mind.org.uk
Nightline	Student run listening service, term only	Students can find the telephone number of Nightline on the back of their library cards nightmail@nightline.manchester.ac.uk	www.umsu.manchester.ac.uk/nightline
Samaritans	Samaritans is a confidential emotional support service available 24 hours a day for people who are experiencing feelings of distress or despair, including those which may lead to suicide.	0845 909090	www.samaritans.org/
Saneline	SANEline is a national out-of-hours telephone helpline offering emotional support and information for people affected by mental health problems.	0845 767 8000	www.sane.org.uk

3. RESPONDING TO A CRISIS

3.1 *Is this an emergency?*

The answer is 'yes' if any of the following apply:

- A student seems to be at risk of suicide
- You think a student is going to hurt themselves or someone else
- A student is seriously physically ill
- A student's behaviour is extremely bizarre, distressed or out of character

If the answer is 'no' see Students in Distress below.

3.2 *Action to take:*

- Dial 999 (9999 from an internal phone) and ask for an ambulance.

3.2.1 *Are you on University premises?*

If yes, call Security and tell them an ambulance is on the way, giving details of your location.

- 0161 306 9966 (69966 from an internal phone).

3.2.2 *Are you in a University Hall of Residence?*

- Contact the Duty Tutor.

3.3 *Once help is on the way*

- Reassure the student & wait with them until help arrives

3.4 *After the incident*

- Take care of your own wellbeing:
 - You may well find that you feel upset by what's happened
 - Talk about it with your line manager or other colleagues in your School (or equivalent)
 - Talk about it with the Counselling Service

3.5 *Students in distress*

If a student approaches you in distress, or becomes distressed during a meeting:

- Listen to them, trying to remain calm and appear reassuring. Allow them time to become calm and regain control.
- If you feel the situation is too much for you or is becoming out of control, contact a colleague for help and support. You can also contact Security (69966).
- Don't make promises about confidentiality – whilst you wouldn't normally break their confidentiality, you would have to do so if you felt that they were at risk of harming themselves or others.
- Talk through with the student some options for further support, perhaps helping them to make an appointment – they could use your phone, or you could offer to accompany them.

- If they need practical information – e.g. policy, procedure etc – help them to access it. Get advice from your School office, look up telephone numbers or sections of the Crucial Guide Live website. (See Useful Contacts and Resources).
- Ask them to get back in touch by an agreed date so you can check on the situation.
- If they don't contact you, follow it up and escalate if necessary (consult School colleagues/Counselling/DSO/Occupational Health).
- If, when they've gone, you feel you'd like to talk the situation with someone do so – you don't need to divulge the student's identity, and having another person's perspective is usually useful.
- Remember, you are not a counsellor and you are expected not to exceed the limitations of your knowledge.

4. SUPPORT FOR STUDENTS EXPERIENCING MENTAL HEALTH DIFFICULTIES

4.1 *The key specialist support services*

- The Counselling Service
- The Disability Support Office
- Occupational Health
- All contact details are given in Section 2: Useful Contacts and Resources

4.1.1 Many Schools have a specialist student support officer or other officer with responsibility for student support matters who can provide advice to other School colleagues as well as support for individual students. Contact your School office for further information.

4.1.2 Although the majority of staff in the University are not – and nor should they be – counsellors, we can still help students to manage aspects of the impact of mental health difficulties on their studies.

4.2 *Study Support Arrangements*

4.2.1 The DSO and Occupational Health work with students who have disclosed mental health difficulties in order to assess their additional support needs and to put in place appropriate study support arrangements, liaising with the School Disability Support Coordinator and other appropriate School staff. Potential support needs which are more complex than usual will be discussed with the School concerned. The student will be asked to provide appropriate evidence of their additional support needs.

4.2.2 Typical study support arrangements include: longer or more flexible deadlines; extensions to deadlines; being able to take exams in a separate room; having longer time to complete an exam; alternative forms of assessment.

4.2.3 The Disability Support Coordinator (DSC) in the School is usually the member of staff responsible for ensuring that agreed study support arrangements are implemented effectively.

4.2.4 If a School DSC is concerned about the study support arrangements – for example, if the student's mental health difficulties appear to increase, or the study support arrangements don't appear to be working – they should contact the DSO for advice.

4.2.5 If a student has not registered with the DSO, but requires additional support for their studies, they can be referred to the DSO using the procedure 'Referral of Students to University Support Services for Medical or Mental Health Reasons'

(<http://documents.manchester.ac.uk/DocuInfo.aspx?DocID=647>) . The DSO will then contact the student concerned to arrange an appointment for an assessment of need. Students don't need a formal referral – if it looks likely that they are willing and able to make an appointment directly without waiting to be contacted by the DSO then they should be encouraged to do so.

4.2.6 If you are concerned about a student's mental health, you may also wish to encourage them to visit the Counselling Service or Occupational Health, and/or formally to refer them, using the same procedure as in 4.2.5 above.

4.2.7 If a student is satisfied that they are able to manage their academic studies without the intervention of the DSO, they are not required to register with the DSO. Schools should nonetheless recognise that such a student may develop additional support needs and are recommended to remain alert to their behaviour, attendance and performance. Schools may wish to develop protocols for staff to follow in the event that a student discloses mental health difficulties but does not wish a referral or further disclosure to be made (see section 9.5 for more information).

4.2.8 Certain adjustments and support do however require registration with the DSO. Any support which is provided through the Disabled Students Allowance, allowances for extra time or specially located examinations etc would usually demand an assessment of need.

4.2.9 It is not always possible to offer alternative assessments or other adjustments that might seem reasonable to the student.

- Any adjustment offered must not undermine academic standards.
- The interests of other students in any group will be taken into account.
- The University can not deviate from the competency standards demanded by professional bodies.

4.2.10 Any member of staff can seek advice from the University's specialist support services without divulging the identity of the student concerned on how to support a student experiencing mental health difficulties.

4.2.11 In implementing study support arrangements, the School Disability Coordinator is likely to need to brief individual members of staff. In doing so, they must ensure that confidentiality is respected. Bear in mind that the thought of having their personal information divulged can be a significant barrier to a student experiencing mental health difficulties to making themselves known. Whilst it's important to be clear about the limits of confidentiality, this needs to be balanced with an appreciation of someone's right to privacy. Students experiencing mental health difficulties may be more concerned about this than the average student.

4.3 *Practical help*

4.3.1 A student with mental health difficulties may not be as able as usual to sort things out for themselves and might need extra help with the paperwork and a generally more proactive approach than might otherwise be offered.

4.3.2 Examples of practical help include:

- Guiding students through our regulations e.g. mitigating circumstances application, application for interruption
- Offering them the use of your phone to make appointments, or making the call for them
- Helping with completing forms

5. PROCEDURES AND REGULATIONS

5.1 *Mitigating Circumstances*

5.1.1 If there are appropriate study support arrangements in place, and they were in place for the period of study that a mitigating circumstances application would apply to, and there has been no change to the student's mental health, then it is unlikely that any further consideration of mitigating circumstances related to the student's mental health can be given. The purpose of study support arrangements is to ensure that all relevant adjustments have been made to account for the effects of mental health difficulties.

5.1.2 An application for mitigation may be appropriate however if any of the following (or similar) scenarios are true:

- The student's mental health difficulties has only just come to light and no provision has been put in place for support
- There has been a deterioration of health so that that the agreed study support arrangements are no longer adequate
- The student has experienced a crisis which has precipitated a period of temporary mental health difficulties
- There has been a failure in the implementation of the agreed study support arrangements

5.1.3 If the student's mental health difficulties have only just come to light, as well as considering mitigating circumstances you should contact the student to discuss their situation and consider all their options (e.g. interruption might be more practical) and to refer them to specialist support services as appropriate. See section 4.2.5 for information about referral.

5.1.4 All applications for consideration of mitigating circumstances must be handled in accordance with the University's stated procedure 'Policies and Procedures on Mitigating Circumstances' or 'Policy on Circumstances Leading to Changes to Postgraduate Research Study'. Grounds for mitigation are 'unforeseeable or unpreventable circumstances that could have a significant adverse effect on the academic performance of a student.'

5.1.5 When advising students about mitigating circumstances, try to make clear the limitations of the procedures, i.e. that the best that can usually be expected is to be given an opportunity to take an exam or resubmit an assessment in the next examination period (or at an agreed submission deadline) as a first sit. If someone is confident that they will regain full health to enable them to do this, use of the mitigating circumstances procedure would be usual but if this seems unrealistic, advising them of alternatives such as considering an interruption of studies may be more appropriate.

5.1.6 Students are expected to follow Schools' established procedures when making an application for mitigation circumstances, but you should recognise that students experiencing mental health difficulties may not be able to follow such procedures. Consider taking a more proactive role than you might otherwise by assisting a student to make such an application.

5.1.7 Students will need to submit evidence in support of their application. See Section 6.

5.2 *Academic Appeals on the Grounds of Mitigating Circumstances not Previously Known*

5.2.1 University regulations normally require a student to seek consideration of mitigating circumstances before the results of assessment is known. However, many students cite previously

unknown mitigating circumstances when making academic appeals. This is allowable only if good reason can be shown why the circumstances were not notified earlier. If a student submits an academic appeal on grounds of mitigating circumstances related to mental health difficulties it would be reasonable to consider whether the student's mental health difficulties affected their ability to make an application for mitigation circumstances in the correct time frame. The Counselling Service, Student Occupational Health or DSO will be able to advise on the potential impact of mental health difficulties on the student's ability to engage with procedures such as mitigating circumstances.

5.2.2 Once an appeal has been allowed then it should be considered in the usual way.

5.2.3 All applications for mitigating circumstances will need to be supported by appropriate documentary evidence. See Section 6 for more information.

5.2.4 If mitigation is allowed it should be on the assumption that the student concerned will be fit enough to undertake the assessment/exam when the next opportunity arises. If this seems unlikely, or transpires not to be the case, an interruption of studies may be a more appropriate response.

5.2.5 It is not advisable to allow students serial applications of mitigating circumstances for an ongoing cause. The Counselling Service and Student Occupation Health will provide advice. Every case will need to be judged individually.

5.3. *Interruption or cessation of studies*

5.3.1 There will be occasions when it is more sensible for a student to seek to interrupt their studies for a period in order to regain health or to arrive at a situation where they are able to manage their mental health difficulties such that they do not have an adverse impact on their academic progress.

5.3.2 Some students will find it easy to accept such advice and, with the appropriate assistance in completing forms and other aspects of bureaucracy, will be able to make an application. Others will be reluctant to recognise that interruption is the best course of action. Whilst students can be referred to both Student Occupational Health and the Counselling Service for an assessment of their medical fitness to study, they cannot be required to interrupt their studies, and their studies cannot be terminated other than on grounds of Academic failure, Work & Attendance, Fitness to Practise, or on Disciplinary grounds (see below).

5.3.3 *Students who are reluctant to interrupt their studies*

- i) Termination of studies on any of the above grounds solely for reasons of mental health difficulties should be regarded as exceptional. Advice should be obtained from the Directorate for the Student Experience (Head of Teaching & Learning Support Office or Head of Student Support and Services) before it is seriously considered.
- ii) Interruption is usually for a fixed period (usually of no more than one academic year).
- iii) Repeated interruptions are not encouraged.
- iv) The period of interruption is agreed between the student and the School & Faculty concerned.

- v) If an interruption is made on health grounds it is usual practice to make return to study conditional on confirmation from an appropriate medical professional that a student is now fit to continue with their studies.
- vii) Degree regulations stipulate the maximum time allowable for completion of a programme of study. If the ill health is of a serious and long-term nature which seems likely to last longer for one academic year, permanent withdrawal will need to be considered. Some professional bodies may impose additional constraints on the maximum allowable time, e.g. the Nursing & Midwifery Council has a 5 year rule.
- viii) Students seeking interruption will need advice about:
- Financial implications: advice available from the Student Services Centre in respect of tuition fees and loans and from the Students Union, for benefits
 - Visa implications: **International students MUST check with the International Advice Team as interruption of study might invalidate their VISA**
 - Accommodation arrangements/liability for rent: Manchester Student Homes can advise on tenancy agreements with Private Landlords and the University Accommodation Office should be approached if the student lives in a University Hall.
- ix) Students with mental health difficulties are likely to find this level of complexity overwhelming. Practical help should be offered e.g. in completing forms, making enquiries etc.

5.4. *Conduct & discipline*

5.4.1 Whilst our first approach is to be supportive, mental health difficulties do not exclude students from the requirement to comply with the University's regulations on Conduct & Discipline.

5.4.2 The Occupational Health Service and the Counselling Service can advise on a student's fitness to participate in a disciplinary process. The Counselling Service can provide more general advice on the most appropriate way to conduct a disciplinary hearing in a case where a student *is* fit to participate, but for whom there may be some mental health issues. Every situation will be individual – if in doubt ask for advice from either Counselling, Occupational Health, DSO, Head of Student Support and Services, your Faculty Officer responsible for conduct and discipline, the GM Pastoral Care (regarding behaviour in Halls), as appropriate.

5.4.3 Students may also be liable to disciplinary procedures if their mental health difficulties cause behaviour which contravenes Regulation XVII, Conduct & Discipline of Students.

5.5 *Fitness to Practise*

5.5.1 Some professional programmes of study (see Appendix 1) have specific requirements in relation to Fitness to Practice, which may be affected by a diagnosis of mental health difficulties, and which might preclude a student from practising the profession concerned, at least until the condition is treated and/or stabilised.

5.5.2 The competency requirements of professional programmes will place limitations on the scope of 'reasonable adjustments' that are possible, and the University will not deviate from competency standards set down by such professional bodies.

5.5.3 As with conduct and discipline, Occupational Health can undertake a formal assessment of a student's fitness to continue with a programme of study. This may result in the initiation of Fitness to Practise procedures (which may also be initiated without recourse to Occupational Health). Information on Fitness to Practise procedures in the Faculty of Medical and Human Sciences are available from the Faculty intranet or by contacting Head of Academic Services in MHS (Sally Bray).

5.5.4 When advising a student who is facing a fitness to practise process it is important that you make it clear that although the process most often enables students successfully to complete their programmes of study with the appropriate support, on rare occasions a fitness to practise process *can* result in the termination of their studies. You may wish to consult the Counselling Service, DSO or Occupational Health for practical advice on how to approach this sensitively.

5.5.5 If a student's mental health difficulties are impinging on their ability fully to benefit from their programme of study, but there are no professional implications, an interruption might be the most appropriate response.

6. REQUIREMENT FOR EVIDENCE

6.1 In order for the University to make any adjustments to its normal procedures, or for receipt of Disabled Students Allowance or for consideration of mitigating circumstances, evidence of the impact of the mental health difficulties on the student's academic studies will be necessary.

6.2 Any evidence submitted by a student will be treated confidentially and only divulged on a 'need to know' basis and in support of the purpose for which it was submitted. (It may be used for other purposes with the agreement of the student. For example, evidence submitted in respect of an application of mitigating circumstances is likely to be relevant to the subsequent development of study support arrangements and could be copied to the DSO as part of the referral process. Students should not be asked unnecessarily to supply separate instances of the same documentary evidence.)

6.3 Evidence of mental health difficulties is personal information which is protected by the Data Protection Act. If students do not wish to divulge information about their health to a non medical professional, they may be referred to Occupational Health or to the Counselling Service either of which will be able to report back to the School concerned the likely impact on the student's studies of the mental health difficulties. They will also be able to advise on an appropriate response. Documentation from an appropriate medical professional which concentrates on the *impact* of a student's mental health difficulties, rather than the details of the condition, is acceptable.

6.4 It is recognised that it is sometimes difficult to obtain appointments with appropriate professionals and that this can lead to delays. Each situation will need to be treated on a case-by-case basis, with a degree of flexibility being applied. It might be that an Occupational Health appointment or Counselling service appointment is more readily available and/or could serve in the interim. Ultimately evidence from a recognised source will be necessary.

6.5 It is more important that evidence should address the *impact* of the mental health difficulties than it names a condition. If students provide evidence of a particular diagnosis which does not address impact, staff should seek the advice of Occupational Health/Counselling in the first instance (rather than automatically asking the student to obtain further evidence).

7. NON-CRISIS BEHAVIOUR WHICH GIVES RISE TO CONCERN

7.1 When experiencing mental health difficulties, students may exhibit behaviour which is not usual to them, or be seemingly unable to manage their day-to-day life. Common impacts might include loss of concentration, unkempt appearance, sleeping too much or too little or being withdrawn. As a result students might, for example, find difficulty in meeting deadlines or show a surprising deterioration in performance or a change in attendance pattern. Changes from their normal pattern of behaviour might indicate that something's wrong.

7.2 Attendance monitoring (including absence from tutorials/adviser meetings, failure to meet deadlines) is a critical method of spotting emerging problems and should be undertaken with this in mind.

7.3 If you are concerned about a student's absence or behaviour, check with your School office: if other colleagues have also noticed problems it should certainly be investigated further. If it's just an isolated occurrence, it would still be a good idea to raise it informally with the student concerned.

7.3.1 *Suggested structure for addressing concerns about students*

i) We recommend a staged approach to students who are exhibiting behaviour which gives rise to concern.

Stage 1 Emerging Concerns

Raise your concern sensitively (informally) and supportively with the student. Summarise the behaviour which is causing problems and explain the possible consequences.

- e.g. the student is failing to hand in work on time: need for good time management, impact on academic progress, ultimate consequence might be academic failure or exclusion on grounds of work and attendance
- e.g. student seems disruptive in class e.g. shouting out, disturbing others: draw it to their attention, explain why it is a problem and they should stop, explain that it could, if it continues, lead to them not being allowed to remain in the class, and possible disciplinary procedures.

Both discussions would allow you the opportunity to ask the student how things are going generally, is everything alright, you feel concerned, how they are finding the demands of their course. Such conversations often enable the student to divulge other problems which can then be addressed. Sometimes a student simply doesn't realise that their behaviour has been a problem and rectifies it.

If you don't feel confident about doing this yourself, you can seek advice from DSO/Counselling/Occupational Health.

It may be enough simply to signpost the student to the appropriate support services, keeping in touch with them as appropriate, or you may feel it necessary formally to refer a student to DSO/Counselling/Occupational Health (see section 4.2.5).

Disruptive behaviour in class

You have the right to require a student to leave your class/equivalent if they are being disruptive and do not respond to requests to desist. (See Regulation XVII, Conduct & Discipline of Students). If this has occurred, you should liaise with your School office to follow it up, either to invoke disciplinary procedures (which start with a formal warning) or to establish if there are other problems which are causing the behaviour.

Stage 2 Continuing Concern

If there is no improvement, or more serious concerns are raised, it may be appropriate to invite the student to a case conference to discuss the issues.

Case Conferences

Case conferences are invaluable when supporting a student whose mental health difficulties are having an impact across all areas of their University life and/or who is experiencing symptoms which are much more extreme than the norm. Case conferences typically involve key members of School staff, residential staff (General Manager for Pastoral Care/Warden), the Counselling Service, Occupational Health, Head of Student Support and Services, as appropriate. They can also include external mental health professionals who have been involved with the student (with the student's consent). You can initiate a case conference through your School office, which will contact the Office of Student Support and Services (x 52071).

Case conferences can take place either with the student's knowledge/presence or, in more exceptional circumstances, without.

The case conference should result in an action plan, agreed by all present, which is intended to support the student and which will usually enable them to continue with their programme of studies. The action plan should also make clear what will happen if the agreed arrangements are not successful.

8. TAKING DIFFICULT DECISIONS

8.1 'Difficult decisions' include

- Decision to call a case conference (contact your School office)
- Decision to disclose a student's personal information without their knowledge and consent (See Disclosure without consent)
- Decision to raise concerns about a student's Fitness to Practise procedures (contact your School office if you decide this is necessary)

8.2 The procedures and consequences following from these decisions will involve senior members of University staff and are not the sole responsibility of one individual. They are governed by the University's policies and regulations which are there to ensure that no student is treated unfairly or inconsistently.

8.3 If you are faced with a difficult decision:

- Try not to avoid the issue: it is always better in the long run to face up to it.

- Seek advice. You don't have to disclose the identity of the student concerned in order to discuss the situation with colleagues in your School, Counselling, DSO or Occupational Health. Don't shoulder the burden alone.
- Keep a record of the factors you have taken into account, explaining why you have taken the decision that you have. Some simple bullet points will often be enough and will enable you to explain your reasoning if called upon to do so in the future.

8.4 *Delivering an unwelcome decision to a student*

- When delivering an unwelcome decision to a student, whether face-to-face or in writing, try to be as clear as possible about your reasons.
- In a face-to-face situation, if you feel uncertain about seeing a student on your own, seek the support of a colleague. A colleague could also take a note of the meeting as a record of what was said.
- Plan the meeting carefully in advance with short notes of what you intend to say. If the student is likely to be upset or you are worried that they won't understand, suggest that they have someone with them.
- Make sure you are able to signpost them to any support services that you feel would be relevant.

9. CONFIDENTIALITY AND DISCLOSURE

9.1 Details about a student's health, mental or physical, are classed as personal information within the scope of the Data Protection Act. They must not normally be disclosed to external agencies or third parties without the student's express permission. In normal circumstances, a student's sponsor, doctor, family, friends or equivalent are seen as third parties.

9.2 Advice on handling enquiries from concerned third parties is online within the Supporting Students area of Staffnet, and offers ways of providing a positive response as well as advice on recognising where an enquiry should give rise to further investigation and action. See <http://www.staffnet.manchester.ac.uk/supporting-students/>.

9.3 Within the University, it would be usual to disseminate information about a student's support needs on a 'need to know' basis, and this should be done with the consent of the student. The purpose of asking students to disclose their additional support needs is solely to enable them to receive the level of support to which they are entitled. Staff in receipt of such information will be briefed accordingly.

9.4 A student is entitled not to disclose such information, or might choose to provide evidence of the impact of mental health difficulties on them without disclosing exact details of the mental health difficulty itself. (Professional programmes are likely to require full disclosure. Students who do not wish to make such a disclosure to someone who is not a medical professional should be referred to Occupational Health).

9.5 If a student makes a disclosure, but refuses to for example, register with the DSO, or allow any further disclosure, this necessarily limits the support they can access and you may find it necessary to ask them to sign a statement which recognises this. This protects the University against a future claim from the student under the terms of the Equality Act which deems that the institution

knows about the student's disability if they have disclosed it to any single member of the institution. You can seek the advice of the DSO in general terms, without naming the student, and they can advise you of the best route, or consult 'Referral of Students to University Support Services for Medical or Mental Health Reasons': <http://documents.manchester.ac.uk/DocuInfo.aspx?DocID=647>

9.6 It is expected that staff advising students will make it clear at the outset of any discussion the degree of confidentiality that can be expected. It is never possible to give an absolute guarantee of confidentiality because there are circumstances in which our duty to others might take priority. The most likely reason for breaking confidentiality would be when you have judged that there is a risk of an individual student harming themselves or other people. (See section 9.7)

9.7 *Disclosure without Consent*

9.7.1 Information should rarely be disclosed without the consent of the student. Except in an emergency, if you are considering such a decision you are advised to discuss the issues in general terms with more senior colleagues before taking any action.

9.7.2 Circumstances where disclosure without consent could be appropriate include:

- If there is a risk of harm either to the student or to other people
- If there is an obligation arising from Fitness to Practise requirements of a particular programme of study (see Section X)

10. STUDENTS WHO ARE STUDYING AWAY FROM THE UNIVERSITY

10.1 Although distance from campus places constraints on the support available, the University's support services are available to students studying away from the University. All the specialist support services offer telephone consultations, and 'My Manchester' is also a rich source of advice and information for all students.

10.2 Part of the briefing for all students who are working or studying away from the University should include suitable contact details, should the student need support from the University, and Schools (or equivalent) are responsible for ensuring that there are clear mechanisms for communication and that contact with the student is made at agreed intervals.

10.3 Students with known mental health difficulties should have arrangements required for their period away incorporated into their assessment of need from the DSO – seek advice from DSO/Counselling/ Occupational Health if in any doubt.

10.4 If you are concerned about a student's fitness to undertake a placement, period of study away from the University or field trip, you can refer them for assessment to Occupational Health. If a student is deemed unable, owing to mental health difficulties, to participate in such activities which are an assessed part of their programme of study, consideration should be given to alternative ways of meeting and assessing the learning outcomes of the activity concerned. However, should the activity be a professional requirement for a programme of study, non-participation might compromise the student's ability to complete the course. Adjustments cannot always be made in these situations and a period of interruption, if possible, might be a more appropriate resolution.

10.5 Students participating in field trips may be asked to complete a Health Declaration Form and will be issued with a Fitness for Field Trip certificate subject to vaccinations and consideration of other medical conditions.

10.6 If you are with a group of students on a field trip or equivalent and a situation arises with a student, contact your usual sources of advice in the University for assistance: e.g. your School, the Counselling Service, Occupational Health. It would be a good idea to make a note of these numbers in case of need. In an emergency, contact the local emergency services first.

11. EMPLOYMENT AND REFERENCES

11.1 Students are encouraged to disclose any mental health difficulties to the Careers service so as to receive the most accurate advice and support with respect to their proposed career, what to disclose to potential employers etc. Any such disclosure would remain confidential within the limits described in this guidance.

11.2 Disclosing any personal information, including mental health difficulties, to a potential employer is a decision for the student concerned. Health of any kind is personal information that should not be referred to in a reference, unless a student specifically asks that it should be – to explain a dip in performance, or to illustrate determination in the face of adversity, for example. Students are recommended to discuss this with a careers adviser before asking for it to be included in a reference.

11.3 Referees are expected to follow the University's guidelines on providing references for students.

- <http://documents.manchester.ac.uk/DocuInfo.aspx?DocID=1921>

12. TRAINING & AWARENESS

12.1 Regular briefing sessions on key mental health issues are coordinated by the University Counselling Service.

12.2 Signposting information is included in training for New Academic Staff.

12.3 For staff who are expected to have more frequent interaction with students with all kinds of issues, the University provides a 6 day staff development course, Supporting Students. Details are available from the STDU.

12.4 Following the 2011 review of the Mental Health Policy, work is underway to develop other levels of training.

Appendix 1: List of Professional Courses

- BA in Community Justice
- BA in Social Work
- BDS
- BMidwif
- BNurs
- BSc in Audiology
- BSc in Nursing Practice
- BSc in Oral Health Science
- BSc in Speech and Language Therapy
- ClinPsyD
- MBChB
- MOptom
- MPharm
- MSc in Audiology
- MSc in Educational Psychology
- MSc in Genetic Counselling
- PGCE
- Dip in Professional Studies in Midwifery
- Dip in Professional Studies in Nursing
- MA in Social Work
- Dip in Social Policy and Social Work
- Dip/MSc in Psychiatric Social Work
- MA in Counselling

Document control box: documents available online from: http://documents.manchester.ac.uk/list.aspx	
Policy / Procedure title:	Student Mental Health Policy: Guidance for Staff
Date approved:	December 2011
Approving body:	
Version:	2.1
Supersedes:	v 2
Previous review dates:	2010 - 2011
Next review date:	2013 - 2014
Related Statutes, Ordinances, General Regulations:	Degree Regulations. Regulation XVII, Conduct & Discipline of Students, Academic Appeals, Student Complaints Procedure
Equality relevance outcome:	High
Related policies:	Student Mental Health Policy, Equality & Diversity Policy, Dignity at Work and Study Policy, Admissions Policy, Mitigating Circumstances Policy, Data Protection Statement, Policy on Circumstances Leading to Changes to Postgraduate Research Study
Related procedures:	Referral of Students to University Support Services for Medical or Mental Health Reasons, Procedure for admitting applicants for courses requiring Medical Fitness Assessment & Procedure for Applicants with a Disability
Related guidance and or codes of practice:	Guidance for Students Guidance on writing references for students
Related information:	N/A
Policy owner:	Head of Student Support and Services (Pat Sponder)
Lead contact:	Student Experience Officer (Jenny Wragge)