THE ROBERT GORDON UNIVERSITY

Student Mental Health Policy

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1. Scope

The policy set out in this document applies to all students of The Robert Gordon University.

This policy does not apply to the staff of The Robert Gordon University. Although the policy and related procedures and documentation refer to members of staff collectively and individually, these references are to staff responsibilities towards student mental health only. Occupational stress policies and procedures applicable to staff are being developed separately.

2. Definition of Mental Health Problems and Mental Illness

2.1 Throughout this document the primary focus is upon the needs of those students with some form of mental health problem, although consideration will be given to ways in which mental wellbeing can be promoted and improved.
2.2 Because it is not always used in a consistent manner, terminology within the area of mental health/mental illness can sometimes be confusing. This may be a reflection of different approaches across various professional disciplines. In this policy document ‘Mental Health’ refers to a range from the possession of positive attributes at one end of the spectrum, to the lack of, or loss of, those attributes at the other end.

2.3 At the positive end of the spectrum ‘Mental Health’ properly describes a sense of wellbeing: the capacity to live in a resourceful and fulfilling manner, having the resilience to deal with the challenges and obstacles which life presents. At the negative end, mental health ‘problems’ or ‘difficulties’ describe temporary reactions to a painful event, stress or external pressures, or symptoms of drug or alcohol use, lack of sleep or physical illness; this terminology is also sometimes used confusingly to describe long-term psychiatric conditions which may have significant effects on an individual’s functioning. In this policy document the preference is to specifically use the term, ‘Mental Illness’ to describe these conditions.

2.4 Mental Illness is not just the negative extreme of the ‘Mental Health’ spectrum. It refers to a distinct set of conditions, diagnosable by properly qualified medical experts.

2.5 When viewed separately in this way, it is possible to see that one may take actions to create environments that positively enhance the mental health of the community, including those members who experience mental illness.

2.6 The enhancement of mental health is not an activity that can be compartmentalised. Architecture, interior decoration, timetabling and scheduling of student assessments are as much matters intrinsic to good mental health as are matters such as counselling and student support.

2.7 ‘Mental Wellbeing’ is a term used to describe the state of positive mental health.

3. Purpose of the policy

3.1 To create a context, culture and appropriate services in the University to positively promote mental wellbeing and help prevent mental health problems.

3.2 To ensure that all students who experience mental health difficulties are treated fairly, sensitively and with respect, and are offered the support that they need to deal with their particular situation.

3.3 To provide consistent, fair and effective procedures to ensure the mental well being of the student population, and take action to deal with any issues that arise.

3.4 For the purposes of this policy, mental health promotion is taken to include the promotion of positive mental wellbeing of all students, the prevention and management of mental health problems such as stress, anxiety and depression, as well as support for those with a defined mental illness.
4. **General Principles**

4.1 The promotion of mental wellbeing is essential to enable the University to realise its mission of carrying out teaching and research to the highest standards.

4.2 Promoting mental wellbeing effectively involves the whole University organisation, including its services, ethos, policies, organisation, management, patterns of communication, relationships, working conditions and physical environment, all of which need to be explicitly organised in ways that support mental wellbeing.

4.3 The University is an ethical institution that embodies a community committed to educational excellence, where the well-being of each member is supported and service to others encouraged. It is a community that affirms the dignity of individuals and upholds equality of opportunity.

5. **Policies**

5.1 This policy should be seen as complementing other existing policies and should be considered as part of the University’s positive approach to mental wellbeing. These include:

- Equity and Diversity Policy including Disability
- Student Induction
- Health and Safety Policy
- Staff Training and Development
- Admissions Policy
- Student Conduct Appeals and Complaints Regulations

6. **Promotion of Positive Mental Health**

6.1 To promote the positive mental health of all students the University will:

- Make every effort to foster and create an environment, attitudes and practices that promote and support mental wellbeing

- Support all students to take positive steps to safeguard their own mental wellbeing by ensuring regular and proper breaks and working reasonable hours.

- Regularly embark on positive campaigns to promote awareness of mental health issues

- Encourage students to seek help with mental health difficulties

- Encourage healthy lifestyles, including an appropriate work life balance
7. **Student Support Services and Liaison with External Agencies**

7.1 To ensure that it is not discriminating against students with mental health difficulties, and to ensure that all those experiencing such difficulties are given appropriate support, the University will:

- Provide appropriate and well advertised support services to which students can be referred, or can refer themselves, where appropriate, for support. (Appendix one refers to these services and their responsibilities within this policy).

- Encourage all students to be aware of the services available to them, and seek support for any mental health difficulties they experience. As some students may find it difficult to seek such support for fear of subsequent discrimination, it is vital that they are given the confidence and support to seek the assistance they require.

- Require that students with mental health difficulties are treated with consideration, sensitivity and respect, in confidence and in a non-judgmental manner. Every effort should be made to assist students in dealing with their difficulties and to safeguard their ability to study at the University.

- Ensure that students who seek help with mental health know that anything they say will be treated in strictest confidence unless there is an overriding reason to the contrary. Information in relation to the mental health of any individual will be treated confidentially and wherever possible an individual’s consent will be sought before taking any action or making any referral to any other agency. There can, however, be no absolute guarantee on matters relating to confidentiality and consent. This is because, in the very exceptional circumstances of acute mental health crisis, a person may not be capable of giving informed consent, and this may require that his or her details be passed to an agency for reasons related to his or her own health and safety or for the protection of other persons. In such a situation every effort will be made to ensure that only those who absolutely need to know, for the purposes of managing the crisis, will receive any details about the student’s mental health.

- Require that those who become aware of the mental health problems of students, especially those with management and supervisory responsibilities, refer students who consult them to appropriate support agencies, recognise their own limitations, and the boundaries of their role, and seek and receive the help they need to help them to support others.
APPENDIX 1: ROLES AND RESPONSIBILITIES

This appendix sets out the implications of the policy for various sections of the University. It should be regarded as illustrative rather than exhaustive.

1. University

Members of University Senior Management should:

1.1 Ensure practices are in place to identify the types and level of mental health needs that exist amongst students, by carrying out specific information gathering as necessary, collecting, collating and interpreting routine data, and regularly updating this information to monitor and keep abreast of changing needs.

1.2 Ensure adequate and effective service provision and communication between agencies

- Provide levels of staffing and resources in key services, for example student support services that are appropriate and adequate for the types and level of need of its students, and audit and monitor the effectiveness of this provision.

- Ensure that lines of communication and referral are clear and open between the key agencies that are concerned with mental well being in the University and externally, and that different parts of the University are fully aware of others roles and responsibilities, and are working together effectively to promote student mental health internally and externally

1.3 Ensure the development and implementation of effective policies and procedures

- Actively disseminate clear policies and procedures in areas that relate to or effect student mental wellbeing.

- Actively disseminate and enforce, sound policies and practices that particularly relate to student mental wellbeing e.g. oversight of student welfare, student guidance and support, teaching and tutorials.

1.4 Provide a positive physical and cultural environment

- Provide a physical environment that helps promotes mental health, for example, by providing adequate facilities for students to work without undue interruption, to communicate effectively with one another, to take proper breaks, to eat healthy food, to relax in peace, and to engage in physical exercise if they wish.

- Encourage sound management and good working practices throughout the University in relation to student mental wellbeing, for example: promoting a proper work-life balance; by encouraging all students to work sensible hours and take proper leave; encouraging clear and
effective lines of communication between people; encouraging participation in decision making etc.

− Promote a positive response to mental health problems particularly where negative stereotypes and attitudes exist.

1.6 Identify those with difficulties

− Encourage lecturers and tutors who engage with students who may be experiencing mental health difficulties and facilitate support. Provide those staff with clear information about procedures and referral processes to do this.

1.7 Ensure adequate training and information

− Ensure there is adequate and appropriate training and support to encourage mental well being, for example, stress management for students, study skills for students, and student support skills for personal tutorial staff.

− Ensure that there is adequate and appropriate information available to staff and students on mental health issues.

2. Heads of Schools and Departments

2.1 Manage Schools and Departments in ways that promote student mental wellbeing

− Ensure that communication between all members, staff and students, is open and respectful; that departmental policies and procedures are clear, fair and transparent; that workloads and responsibilities are allocated fairly; that students take proper leave; that expectations of students are clear, well publicised, and reasonable; that students are taught and tutored effectively; and that students take part in the decision making process.

− Encourage all students to take positive steps to safeguard their own mental wellbeing

2.2 Liaise with other parts of the University

− Where potential problems have been identified to collect and analyse appropriate data

− Liaise with others in the University to ensure that the whole organisation is promoting mental wellbeing, for example alerting others to developing problems within Schools and Faculties, giving feedback to others on the effectiveness of actions to support students.

− Plan any appropriate interventions in conjunction with student services providers.

− Encourage a climate of support for those with mental wellbeing problems, and actively challenge, and/or identify other ways to address
negative, unhelpful and judgmental attitudes towards mental wellbeing problems.

2.3 Raise awareness and spread information

- Be aware of the procedures for helping students who are having mental health problems, the services available and the referral processes that exist to help, and publicise these procedures within Schools, and especially to students having difficulties.

- Understand their own role in responding to students with mental health problems, including looking after their own mental health as managers

- Ensure that individual staff in their department understand their roles and responsibilities in this area and undergo appropriate training.

- Ensure that information about changes in policies and practice that affect mental wellbeing is disseminated to staff and students

2.4 Working with those in difficulties

- Know how to recognise students who may be having mental health difficulties, and be prepared to take appropriate action, communicate with others, and refer as appropriate, with due regard for the need for sensitivity and confidentiality, and awareness of their own limitations.

- Carefully and sensitively manage the return of students to study after a period of absence due to mental health problems.

3. Student Services Department: Student Counselling & Wellbeing Centre

3.1 The Student Counselling Team will:

- Observe the procedures and codes of practice of the University, and also be bound and responsible to the detailed codes of ethics and practice of its professional body, BACP.

- Embody in every part of its functioning, a positive and respectful culture of commitment to the well-being of all students.

- Work in collaboration with staff and external agencies to ensure maximum awareness and support for maintaining student mental wellbeing.

- Provide, in collaboration with the Disability Team, negotiated support for consenting students with declared mental health difficulties

3.2 Work with students to improve or maintain their psychological well being by:

- Providing a confidential self-referral facility, offering a range of counselling interventions to students e.g. group work and time limited counselling
− Undertaking thorough assessment of referred individual students to identify risk and level of need.
− Maintaining scrupulous professional and confidentiality boundaries in accordance with BACP procedures and provide students with information relevant to attendance at the Counselling Centre and in accordance with the Data Protection Act
− Providing clear procedures for Counsellors to refer to GPs who have access to mental health consultative support
− Monitoring maximum waiting times for assessment and allocation to a counsellor post assessment
− Responding to all identified levels of risk
− Providing suitable premises, with a degree of privacy.

3.3 Help provide appropriate education and raise awareness of issues relating to student mental health and well being
− Actively promote the Student Counselling Service through publicity materials, attendance at student induction, leaflets, posters, self help booklets, University publications, the web and provision of a 24 hour message system

3.4 Help prevent and manage problems
− Engage in preventative strategies to promote positive well being
− Monitor level of risk throughout attendance for counselling
− Contribute to policy formulation and engage in training and support work e.g. with personal tutors, wardens, Student Union
− Monitor client needs and outcomes, research and liaise in the wider counselling field and maintain appropriate management data
− Ensure support for Counsellors through regular independent counselling supervision as specified in professional requirements
− Case management of workload and monitoring of staff development needs
− Provision of an environment which protects the safety of staff by provision of security systems and adequate indemnity insurance.

4. **General Practitioners**

GPs are independent, self employed medical practitioners, contracted to the Health Authority to provide personal medical services to NHS patients. It is therefore not possible or proper for the University to have any direct influence over the roles and responsibilities of GPs. However the following information
has been compiled to help others in the University to understand and appreciate their role more clearly:

**GP Practices**

- Offer appropriate confidential NHS based services, including advice and pharmacological and other treatments, to those who have, think they might have, or may be at risk of developing mental wellbeing problems

- Identify and help the distressed individual, ascertain their medical history, and explore the effect of their health on their studies or work and their study or work on their health.

- Explore the effect of their health on those aspects of their life important to the student, including social and family relationships, leisure activities, identity and self esteem

- Aim to help students with their mental health problems promptly and efficiently, with the aim of minimising disruption to studies and to help the student recognise and work towards their full potential mental well being

- Are aware of the range of services available for those with mental health problems, and share this awareness with the student and, with the student’s permission, to involve other NHS professionals in the student’s care where this is appropriate to their needs.

- Work with the student towards a shared understanding of the current and potential risk to personal well being and safety caused by a mental health issue, so that the student has appropriate insight which allows them to work effectively with those providing help.

- Recognise how mental health legislation can protect those at very serious risk and whose illness prevents them from any understanding necessary to accepting essential treatment.

5. **Student Accommodation**

Members of staff in University owned residences can help prevent and manage problems by:

- Supporting the maintenance and enhancement of the quality of communal living within University owned accommodation; by contributing to a social infrastructure and positive and supporting environment.

- Providing pastoral support to student residents, maintaining discipline and good order, and sustaining and developing social life and cohesion within the accommodation.

- Informing residents about the support available within the University and externally for those with mental health problems.
− Directing residents where appropriate, with mental health problems to University Student Support Services.

− Being aware of and sensitive to, within the bounds of confidentiality, the impact of those with mental wellbeing problems on fellow residents, and intervene where appropriate.

− Liaising and communicating with other supporting bodies and agencies.

6. The Disability and Dyslexia Centre

6.1 The Disability and Dyslexia Centre will:

− Provide a professional service for students with disabilities, including those related to mental health problems.

− Set examples of good practice in relation to work with students and others within and outside the University.

6.2 Education and Awareness

− Ensure that students are aware of the services available, the implications of the Service’s confidentiality policy, and its limits.

− Provide appropriate information for prospectuses and other University publicity / other materials.

6.3 Work with prospective students and applicants with mental well being problems

− Write to applicants who have been offered a place and disclosed a disability, including a mental health problem, to identify potential support needs

− Deal with any enquiries from potential applicants who may have a disability, including mental health difficulties.

− Liaise with the applicant and academic department to arrange a visit for the applicant which permits them to discover the facilities available at the University and other support (e.g. the Disabled Students' Allowance) which may be available once they enrol.

− The Disability and Dyslexia Service will, with the student’s permission inform the teaching school and any other relevant student support department of the student’s support needs and how these needs can be met, including alternative examination arrangements, etc.

6.4 Work with current students experiencing mental health difficulties

− Where students have not been referred through the admissions process, to advise them as appropriate, about obtaining the evidence and other information required for access to Disabled Students’ Allowance and other resources.
– Assist students as necessary in making their support arrangements and obtaining the Disabled Student’s Allowance and other funding.

6.5 Liaise with Departments

– Make recommendations to departments regarding how students with mental health difficulties can best be enabled to access course materials; undertake exams and other assessments, etc.

– Provide information on appropriately qualified colleagues who may be available to undertake various support roles (e.g. specialist study skills tutors, note takers, etc.) and to assist students with mental health difficulties in obtaining and funding that support.

– Be aware of behaviours which may indicate increasing, or very high levels of stress, illness or distress and to undertake the appropriate actions, including referral to other agencies as appropriate.

6.6 Work on behalf of students

– Represent the interests of students with a range of disabilities, including mental health problems, across the University, for example on appropriate University Committees.

– Advocate on behalf of students with mental health problems as appropriate.

6.7 Education and awareness raising

– Assist in drafting policies and guidelines as appropriate to the needs of students with disabilities, including mental health problems.

7. The Student Union

The Student Union is an independent body, and as with the GPs, the University cannot and should not influence it directly. The following suggestions have however been provided voluntarily by the Student Union and approved by them.

– Ensure that student life contributes to the overall culture, ethos and environment of the University in a way that helps prevent and manage mental health problems and promotes positive mental well being.

– Offer information and advice concerning the services available to students who are experiencing mental health difficulties, such as contact names, telephone numbers, and addresses of services and self help organisations.

– Run regular educational events, awareness campaigns and promotional activities which promote mental wellbeing, for example by helping reduce stress, by increasing students’ understanding of mental wellbeing and tolerance and understanding of those with problems, and giving information about sources of help.
Ensure that student related policies reflect appropriate attitudes and encourage actions conducive to mental wellbeing.

Through the Student Association, provide, in conjunction with the Director of Sports, organised and accessible physical and sporting activities, and through clubs and societies to provide organised and accessible extra curricular activities, to help promote mental wellbeing, good relationships and reduce stress among students.
APPENDIX 2: SIGNS THAT A PERSON IS EXPERIENCING A LACK OF WELLBEING, OR THAT A PERSON OR GROUP IS EXPERIENCING STRESS

1. Caveat

These signs should be interpreted with caution. Many people have personalities that may be for example, naturally withdrawn, anxious or volatile: it is when normal patterns of mood or behaviour change that there may be cause for concern. There may also be many reasons why a person or group is exhibiting these types of behaviour, and it should not be assumed that they necessarily have a mental health problem. Even if they do, the cause of that problem will almost certainly lie not solely in themselves, but in their interaction with others, including those at the University. So these signs should be used simply as a trigger to starting to explore with the person or group what they think may be the matter and encourage them to seek help if appropriate or, if they will not talk and the problem seems serious, seeking advice from elsewhere in the University as to what to do.

2. In an Individual

Changes in mood or behaviour, such as:

- Change in working patterns, working much longer hours, or a lot less, not taking leave entitlement
- Deteriorating relationships e.g. with colleagues - students and/or staff, avoiding people
- Increase in negative emotions, e.g. irritability, anger, moodiness, loss of motivation and commitment, cynicism, despair, self deprecation, self blame
- Decrease in intellectual abilities, e.g. indecisiveness, lack of concentration, reduced memory, reduced creativity
- Increased absence
- Increased lateness
- Accidents, or dangerous occurrences
- Reduced performance e.g. unexpectedly poor exam results in students
- Over perfectionism: over meticulous work, or inability to present on time due to desire to make the work ‘perfect’
- Smoking and/or drinking more than usual, and at different times to usual
- Rapid increase or decrease in weight
- Complaints about health e.g. headaches, stomach pains, insomnia, tiredness, lack of appetite, nausea, dizziness

3. In a group, department or tutorial group

An increase in and/or an abnormally high level of:

- Absenteeism
- Short spells of sickness
- Lateness
- Disciplinary problems
- Complaints

**Some symptoms of common mental health problems***

**Anxiety**

Feeling worried all the time, poor sleep, palpitations, hyperventilating, sweating, dizziness, diarrhoea. Includes Post Traumatic Stress Disorder (PTSD) repetitive memories/flashbacks of a traumatic event.

**Depression**

Low mood, sadness, poor sleep, changes in appetite, withdrawn, loss of motivation and interest in life, low self worth/esteem, thoughts of self harming, suicidal ideas and/or intent, excessive tiredness, irritability.

**Manic depressive illness**

Also known as Bi Polar disorder. Characterised by changes in mood and behaviour. Moods can change from feeling very low to feeling high and elated. The pattern varies in individuals. Some may have more mood swings in one direction than the other or just entirely in one polarity, either highs or lows. Low moods are symptomatic of depression with feelings of despair and hopelessness. High or elated moods may include rapid thoughts, pressure of speech, boundless energy, little sleep and much less inhibited behaviours.

**Eating disorders**

In both Anorexia and Bulimia there is an intense fear of becoming fat and of feeling fat.

**Anorexia**

Over exercising to burn off calories, irregular or cessation of menstrual cycle, distorted body image, restricted dietary intake.

**Bulimia**

Binge eating, purging by induced vomiting and/or use of laxatives, irregular menstrual cycle. Maintenance of body weight despite dieting.

**Obsessive Compulsive Disorder**

Obsessional thoughts and continuous ruminations. Compulsions to repeat behaviours and rituals e.g. checking doors are locked. Intense feelings of fear which might be associated with particular objects or places e.g. open spaces, spiders/snakes.

**Psychosis**

Distorted perception of reality, characterised by disordered thinking, jumbled ideas and behavioural changes, sometimes to extremes. Hallucinations, e.g. hearing imaginary voices talking and/or directing you.
Delusions, which are erroneous beliefs, e.g. believing you are being persecuted. Lack of insight is a prominent feature in untreated illness. Other symptoms may include: becoming socially withdrawn, a loss of motivation, lethargy. Schizophrenia is by far the most commonly diagnosed form of psychosis which affects about 1 person in every 200.

Self harm

Sensitivity is essentially important as the student may see self harm as their coping mechanism. It is a method of coping with difficulties by being harmful to oneself. It is a sign of distress and NOT attention seeking behaviour usually. There are many forms of this: drinking alcohol to excess, substance misuse and over working are some examples. Deliberate self harm often refers to the attempts people make to try and kill themselves, e.g. taking overdoses. Self harm can also include: cutting, hitting and biting oneself, pulling out bodily hair and inserting objects into the body. Eating disorders are another form of self harm.

* Based upon information from the Royal College of Psychiatrists’ website [www.rcpsych.ac.uk/] and literature from the Health Education Board for Scotland.