This week

Mond	SU Essentials
Tue	Understanding quality and standards in HE
Wed	Mental health in HE
Thu	The governance and democracy of SUs
Fri 9.30	Understanding student loneliness and belonging
Fri 2pm	Understanding your university's finances



WONKHE SUs

Wales!

- Everyone has the right to a happy education experience, and I want Wales to build a reputation, within the UK and internationally, for putting well-being at the centre of our education system.
- A lack of support for mental health and well-being can be a critical barrier to success in education for many learners and students.
- It is therefore vital that we ensure that providers are attentive to addressing these challenges and are supported to do so by the commission. It's clear that we face many challenges across the UK.
- Full-time students are more likely to experience sexual assaults than those in any other occupational group, and nearly a quarter of ethnic minority students experience racial harassment on campus.
- Students continually report lower levels of happiness and higher levels of anxiety than the general population, and this has been exacerbated by the recent effects of the pandemic.









Wales!

- Over the past decade there has been a reckoning, particularly within the UK higher education sector, about how providers address matters of bullying and harassment and how they support students' well-being and mental health, and I think that we would all agree that more progress is needed on these issues.
- A Universities UK report in 2015 recommended sweeping changes to the ways in which universities manage reporting and support for victims of harassment, violence and hate crime, and I think that we would all agree that more progress needs to be made on this.
- In England, the Office for Students does not formally regulate the way in which higher education providers promote and support student welfare.
- We will therefore be going further in Wales by ensuring that the new commission is empowered to prioritise the oversight of these vitally important matters.





<image>

Wales!

- I call upon members to support amendments 12 and 13, which introduce new mandatory initial and ongoing conditions of registration regarding the effectiveness of tertiary education providers' arrangements for supporting and promoting the welfare of their staff and students.
- This will ensure that consideration is given to whether providers have proper processes, services and policies in place to support the welfare, well-being and safety of students and staff.









Everything you need to know about mental health in HE





November 2021

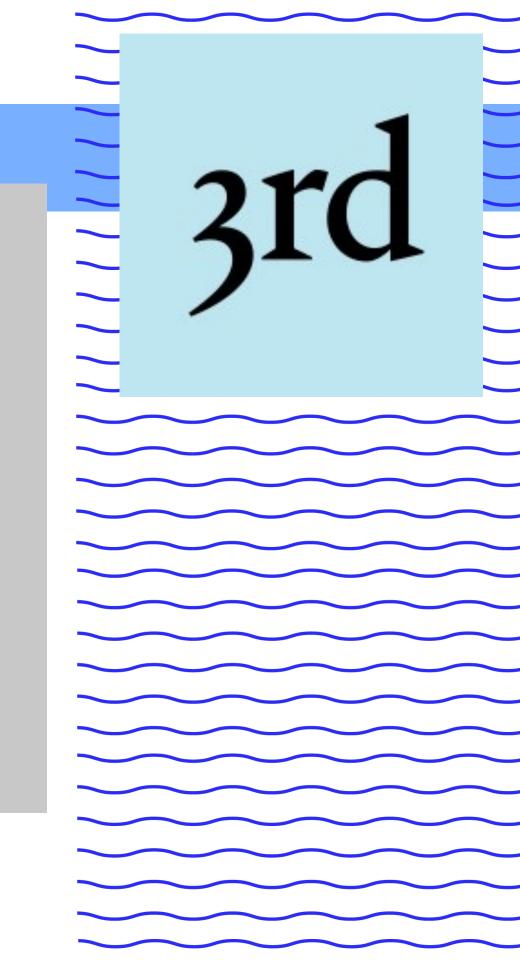
- Half of all students polled self-reported "very high" anxiety (a score of 9 or 10 out of 10),
- Almost six in ten (58 percent) for those who attended O hours of in-person teaching, learning or placement in the previous week.
- 13 percent of students reported low life satisfaction (a) score of 4 or below out of 10), increasing to 19 percent for those attending O hours.
- This group also reported higher levels of loneliness.



Third years

	2020	2021
Jan	Normal	LOCKDOWN
Feb	Normal	LOCKDOWN
Mar	→ LOCKDOWN	→ Step 1
Apr	LOCKDOWN	→ Step 2
May	LOCKDOWN	→ Step 3
Jun	STAY ALERT	Step 3
Jul	EAT OUT	→ 'Normal'
Aug	EAT OUT	'Normal'
Sep	RULE OF 6	'Normal'
Oct	TIERS	'Normal'
Nov	'LOCKDOWN'	'Normal'
Dec	TIERS	PLAN B





Third years

- 4 in 10 (43 percent) said they felt very or fairly unprepared for their next step after graduating or finishing their degree or course
- 6 in 10 say the pandemic has had a negative impact on preparedness for graduation.
- Two-thirds (67 percent) said that the pandemic had a major or significant impact on their academic performance, significantly higher than the student population as a whole (48 percent).
- Around four in ten (43 percent) said they felt fairly or very unprepared for their next step after graduating or finishing their course
- Mental health self-perception among this group was worse than both the rest of the population and other students.



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EAT OUT

TIERS

LOCKDOW

Sep

'Normal

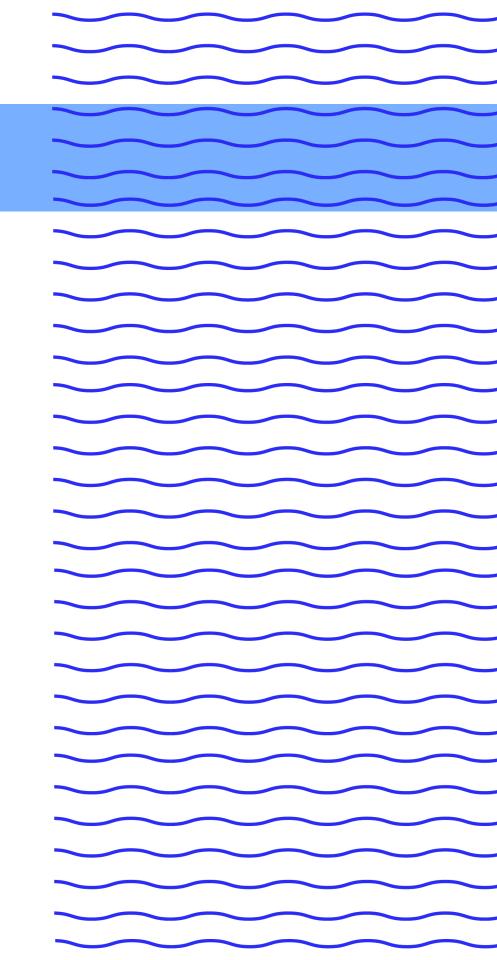
'Normal

'Normal

Plus

- Last October: 37% of first year students showed moderate to severe symptoms of depression.
- Students asked questions from ONS' Sick, Control, One, Fat, Food (SCOFF) questionnaire to assess possible presence of an eating disorder.
- Overall, responses from 23 percent of first year students suggested possible issues with food or body image, and responses from 27 percent of students suggested that they may have an eating disorder – areas that have received much less attention than others in the past.

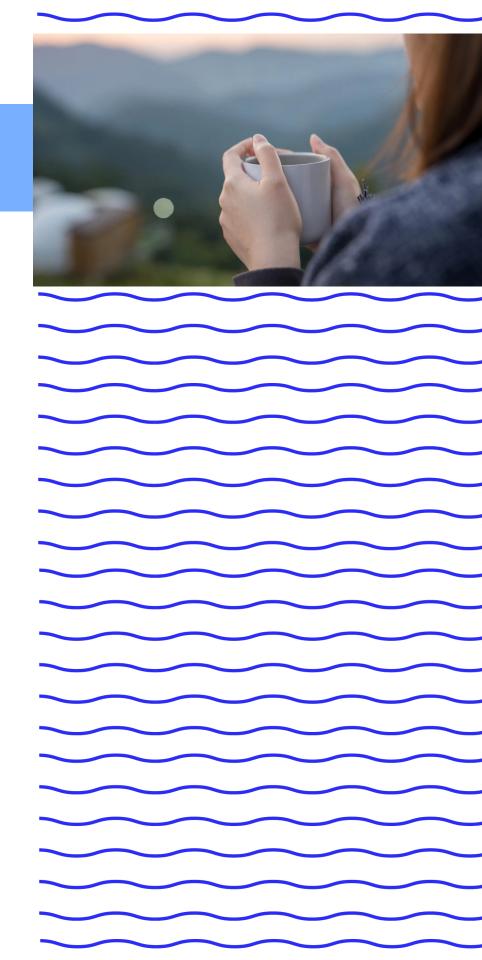




Mental health

- Specific content where related to the course
- Credit bearing or compulsory dedicated nonsubject content
- Extra curricular
- Wider community issues and activities
- Services and facilities
- How programmes are delivered, taught and assessed





- **Know**: Understand the mental health risk profile of students even before they start and proactively target interventions. SUs will want to ensure that mental health strategies assess the risks faced by particular groups and posed by particular activities to ensure that efforts are targeted.
- **Support**: Provide the right level of support, making it easy and a natural act to access it and offer multiple channels to allow students to choose an approach that's right for them. SUs will want to ensure that an appropriate mix of direct professional support and peer facilitated support is being provided and funded.
- Teach: Educate students in what good mental health is, how to maintain it, the value of seeking help early and how to support themselves and others. SUs will want to consider whether and how wellbeing education can be delivered, either with or alongside the curriculum.
- **Connect**: Help students to adapt to university life, forge meaningful friendships and reduce loneliness: there is a strong correlation between feeling connected and wellbeing. This includes actively promoting extracurricular activities.
- **Culture**: Universities should adopt the principles enshrined in the Hippocratic Oath: do no harm and prevention is better than cure. SUs will want to consider the way in which university leaders visibly and publically promoter this agenda.



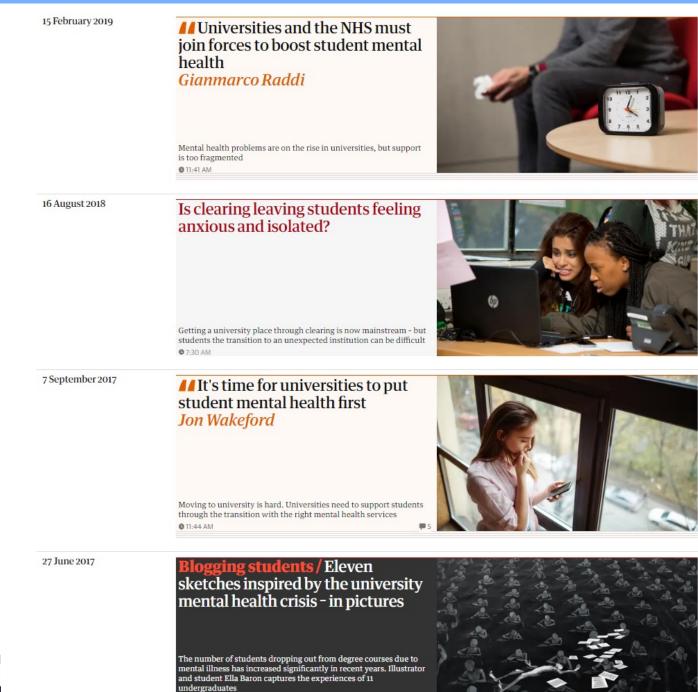
Money Goals	Salary Goals	Approach goals
Something that specific that some people get at a specific point in time	Something that people will get regularly	Agreeing the basis on which people should get things, and why
Installing three microwaves on campus	Agreeing that this is a campus that now offers facilities to warm up food	Agreeing a "healthy campus" policy that has an ambition of all students being able to access healthy and hot food



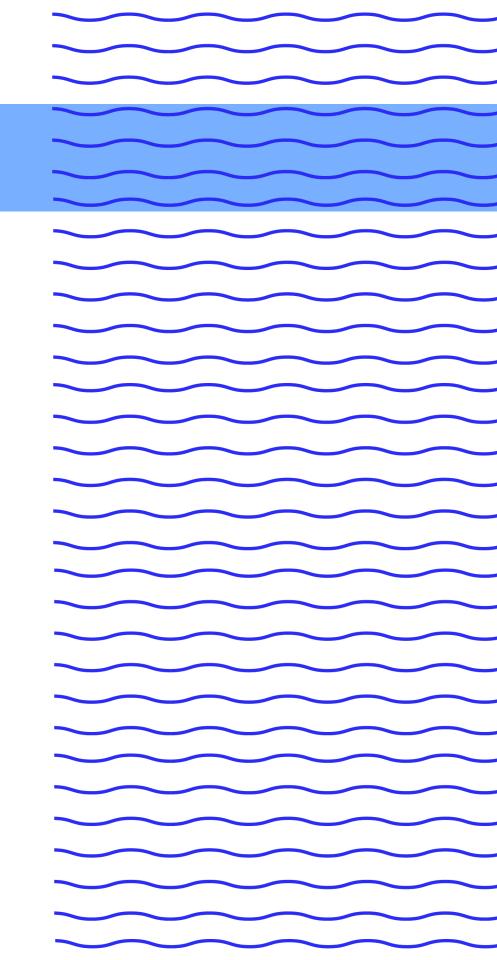
Goals!







WONKHE SUs



A > News

Don't call us snowflakes - it damages our mental health, say young people



72 per cent of 16-24 year-olds think the term is unfairly applied CREDIT: DIGITAL VISION/PEOPLEIMAGES

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By Olivia Rudgard, SOCIAL AFFAIRS CORRESPONDENT 6 DECEMBER 2017 • 12:01AM

eing called a "snowflake" is damaging to mental health, young people say. Figures show that the majority of young people think the term is unfair - and even more think it could have a negative effect of its own.



to Talance and		
15 February 2019	Universities and the NHS must join forces to boost student mental health Gianmarco Raddi Mental health problems are on the rise in universities, but support is too fragmented 91-47 MM	
16 August 2018	Is clearing leaving students feeling anxious and isolated?	
	students the transition to an unexpected institution can be difficult • 7:30 AM	
7 September 2017	Moving to university is hard. Universities need to support students through the transition with the right mental health services	
27 June 2017	Blogging students / Eleven sketches inspired by the university mental health crisis - in pictures	
	The number of students dropping out from degree courses due to mental illness has increased significantly in recent years. Illustrator and student Ella Baron captures the experiences of 11 undergraduates	

Is there a crisis in student mental health?

by Guest Author on 13 Sep 2018

Starting university should be a time for having fun and making new friends. So why are we seeing record referral rates to student counselling services and reports of student suicides in the news? And what can universities do to help? <u>Dr Nicola Byrom</u>^C, Lecturer in Psychology at King's College London, is using UK Research and Innovation '<u>Network Plus'</u> funding to find out.

Type 'Student mental health' into a search of UK news and you'll be hit by headlines referring to: 'The ticking time-bomb', 'Students being let down', warnings that 'problems are rising'. If you read these stories in isolation, you'd be forgiven for thinking that we're in the depths of a crisis in student mental health.

In reality the picture is much more complex. In June this year, the <u>Office of National Statistics</u> ¹² reported that the suicide rate among the general population is actually higher than the comparable age group of university students.





15 February 2019

Universities and the NHS must join forces to boost student mental health *Gianmarco Raddi*

Iental health problems are on the rise in universities, but support too fragmented



Is clearing leaving students feeling anxious and isolated?

etting a university place through clearing is now mainstream - but udents the transition to an unexpected institution can be difficult 7-30 AM

7 September 2017

It's time for universities to put student mental health first Jon Wakeford







Save 226

Noving to university is hard. Universities need to support students hrough the transition with the right mental health services 11:44 AM

♠ > News

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EDUCATION MORE FOR MENTAL HEALTH



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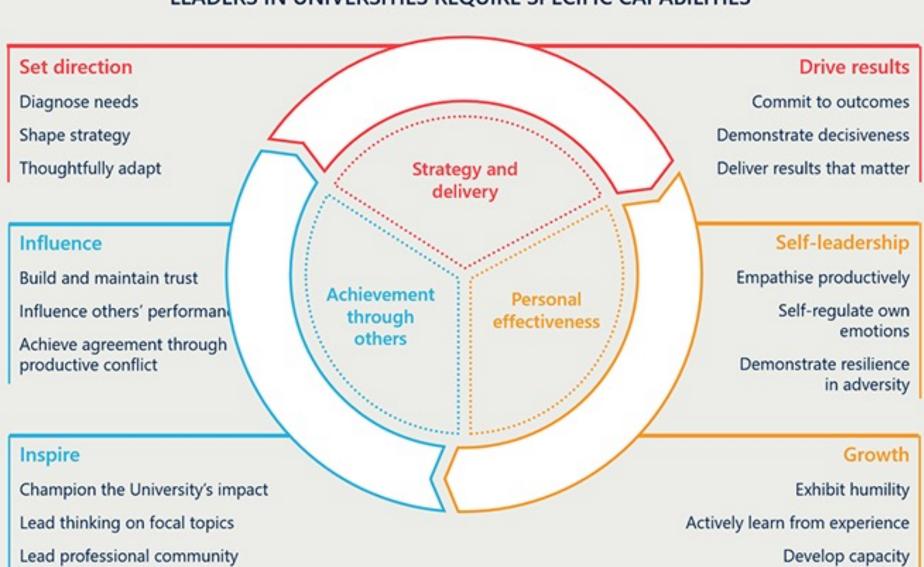


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LEADERS IN UNIVERSITIES REQUIRE SPECIFIC CAPABILITIES

Adapted from * Academic Leadership Capabilities for Higher Education, Scott, Coates & Anderson, ACER, 2008 and Patrick Lencioni, Five Dysfunctions of a Team, 2002 and The University of Edinburgh leadership and management development framework

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A transformation in mental health care since 1948



For the past seven decades, the NHS has transformed mental health services to ensure that more people are receiving the right care in the community and to minimise the amount of time people need to spend in hospital.

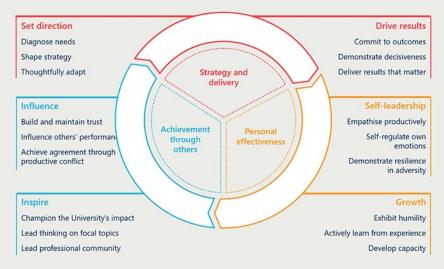


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UK students waiting up to three months for mental health care

University data shows long delays, raising fears young people's mental welfare will decline in the interim



▲ Students at the Royal College of Music had to wait 84 days to start counselling. Photograph: Phil Rowley

<u>Students</u> with mental health problems are being forced to wait up to 12 weeks for help from their university, prompting fears that some may take their own lives during the delay.

Undergraduates at the <u>Royal College of Music</u> in London had to wait the longest to start counselling last year, with the worst case being 84 days, figures collected by British universities show.

Sir Norman Lamb, the ex-health minister who obtained the data, said such long delays for care for conditions such as anxiety and depression could prove seriously damaging to undergraduates.

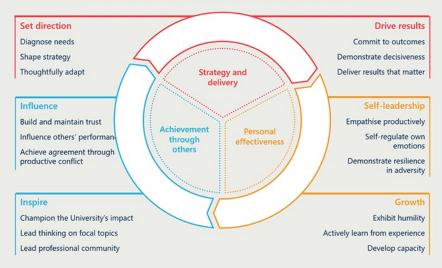


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Stepchange: mentally healthy universities is a refreshed stretegic framework for a whole university approach to mental health and wellbeing at universities. It calls on universities to see mental health as foundational to all aspects of university life, for all students and all staff.

UK universities should be places that promote mental health and wellbeing, enabling all students and all staff to thrive and succeed to their best potential. We can achieve this by all universities making mental health a strategic priority and adopting a whole university approach. This publication is a call to action and a shared framework for change.

Download Stepchange: mentally healthy universities





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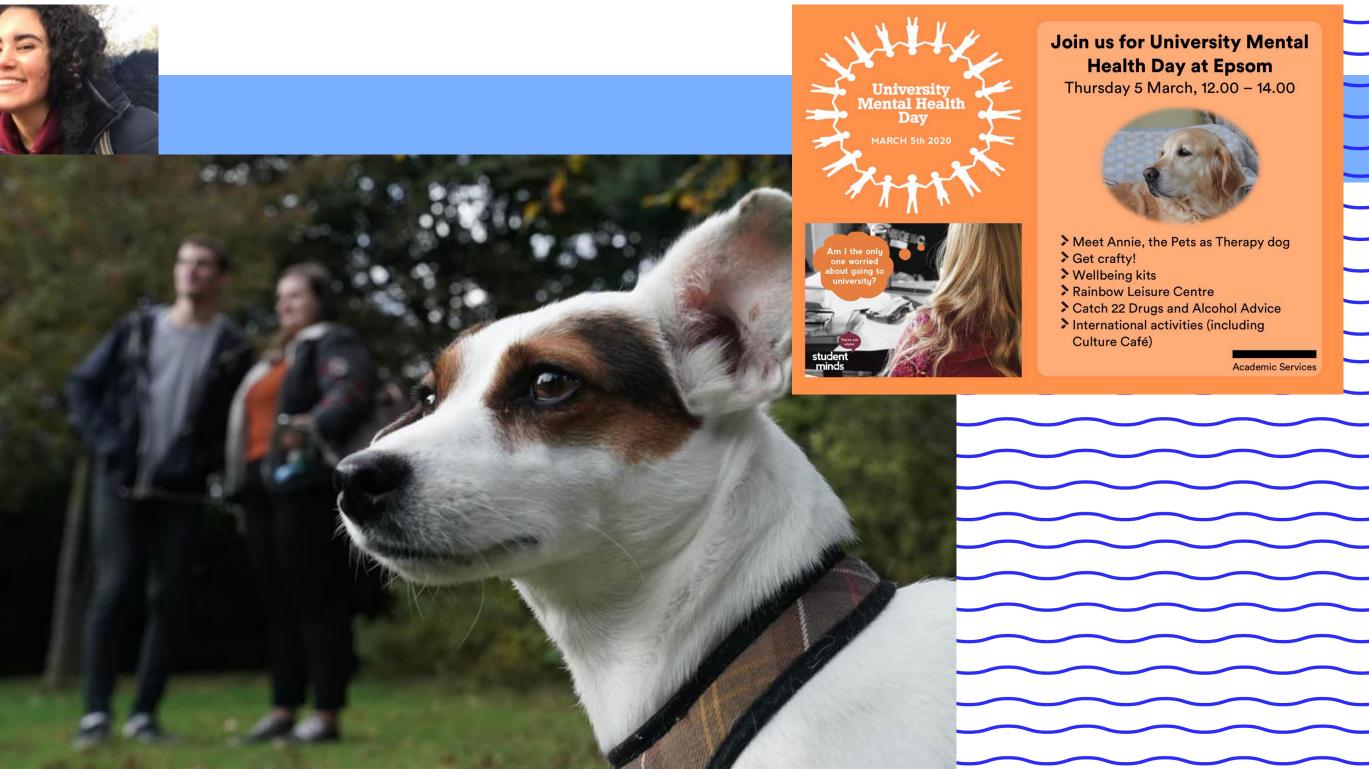
A transformation in mental health care since 1948













Mental health

- Top of the SU Officer manifesto charts for six years in a row
- Single biggest "student interest" policy challenge in higher education
- Huge amounts of "unproven" money spent on "prevention"
- Demand for "treatment" services has rocketed
- Blurring of lines between study support and medical interventions
- Significant political interest, media interest
- Quintessential "wicked problem"





Mental health

- 2000s: "student stress" starts to show up in manifestos
- 2010s: wait times, awareness weeks and puppy rooms – "welfare" issue
- 2020s: what works, correlations, what is made worse/better by UK HE practices?

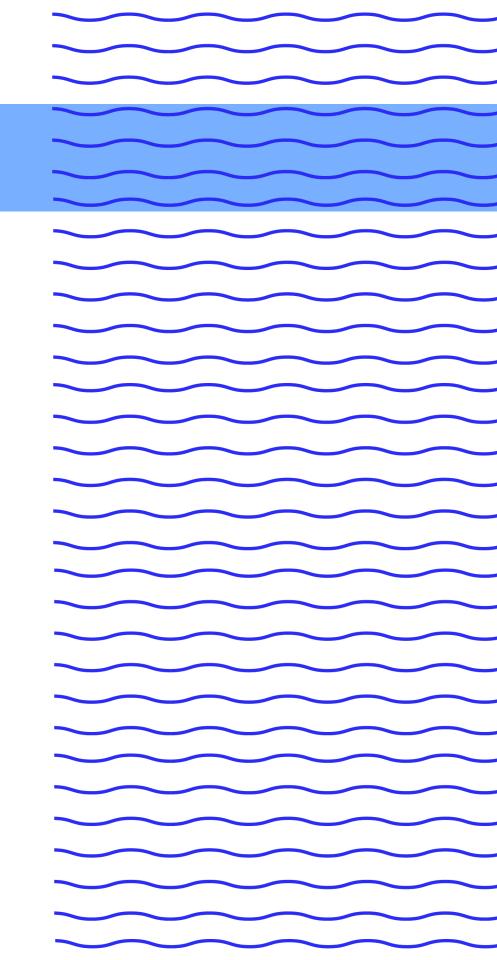




The big debates/goals

- Post pandemic recovery incoming (current) students
- The teaching and learning experience / academics
- Funding for social and loneliness
- The line between the NHS and the university
- Collaboration
- The nature, standard of and regulation of services
- Regulation in general CTER, OfS etc
- Service entitlements
- Targets, metrics and effectiveness

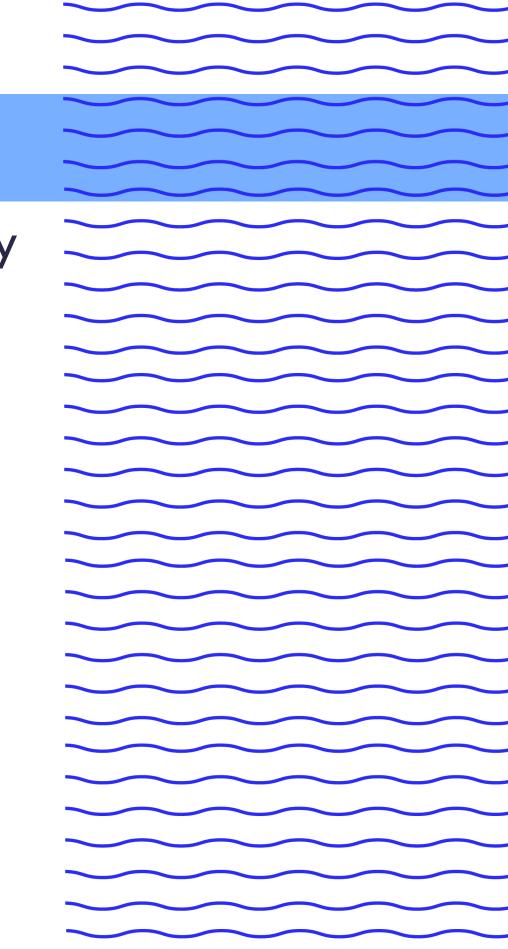




The big debates

- Intersections with disability services and policy
- The surrounding contributors
- Culturally competent delivery and strategy
- Safeguarding, infantalisation and duty of care
- Student suicide and institutional liability
- Readiness and resilience
- Disclosure of conditions to university
- Disclosure of issues to parents and guardians

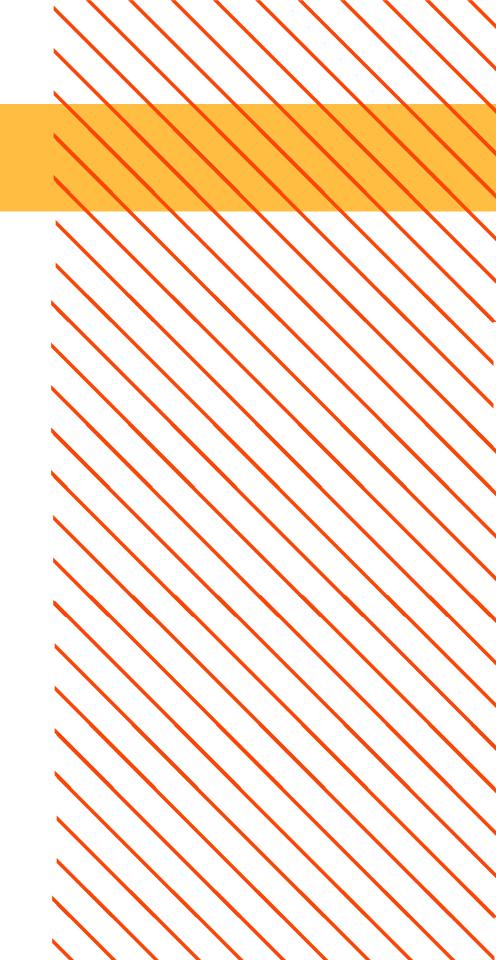




Policy "objects"

- Much public policy has "experts" and "objects"
- Students (esp "disadvantaged students") often "objects" (lab rats)
- Student movement UK has strong tradition of students themselves leading or proposing solutions to problems
- Three major strands of thinking:
- Student engagement agenda = outcomes rely on partnership both individually and collectively
- Citizen model = not passive consumer but owner of society and institutions
- Expert patient agenda...



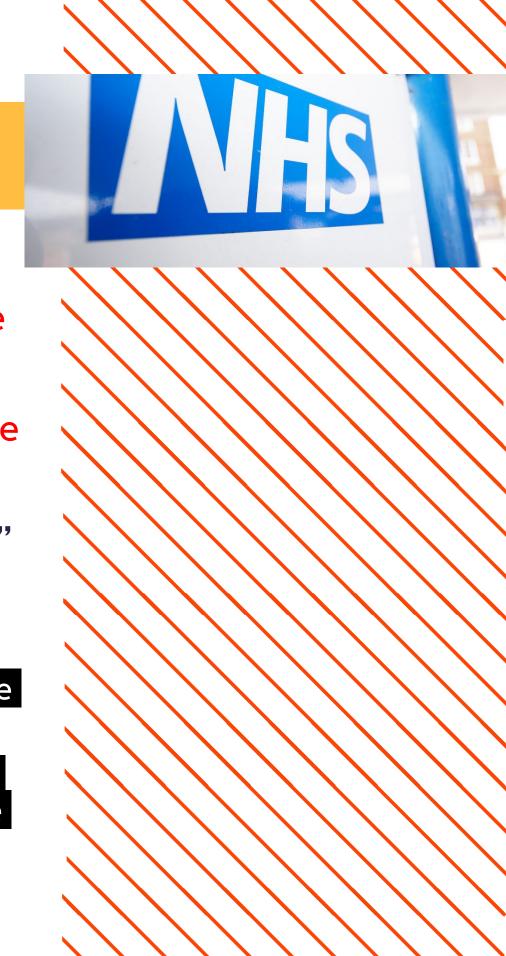


Expert patients

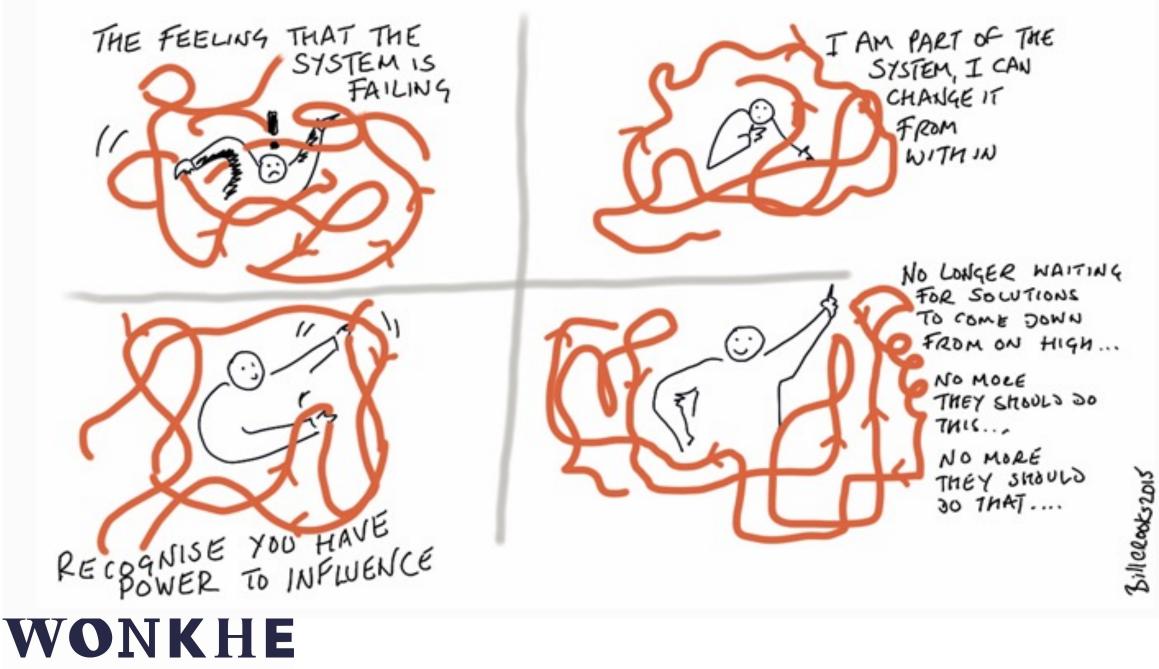
- As the patients are ones living with disease, their views and wishes should be considered
- Those living with common conditions acquire both experience and knowledge of their condition
- Expert patients "develop the confidence and motivation of patients to use their own skills and knowledge to take effective control over life with a chronic illness"
- Then "develop the confidence and motivation of patients to use their own skills and knowledge to intervene at policy level"

"As holders of personal and experiential knowledge about their issue, expert patients are adept in identifying some needs that are not considered or are only poorly considered by doctors and other healthcare professionals.

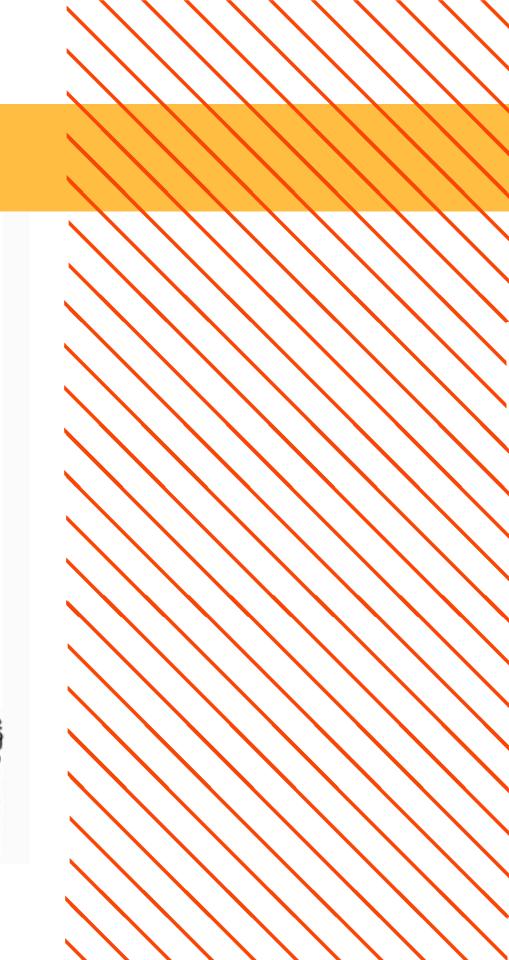
Their own experience may be further enriched by that of other patients (especially in the context of patients' associations), resulting in collective and, thus, greater experience of illness" WONKHE



Sleeves rolled up



SUs

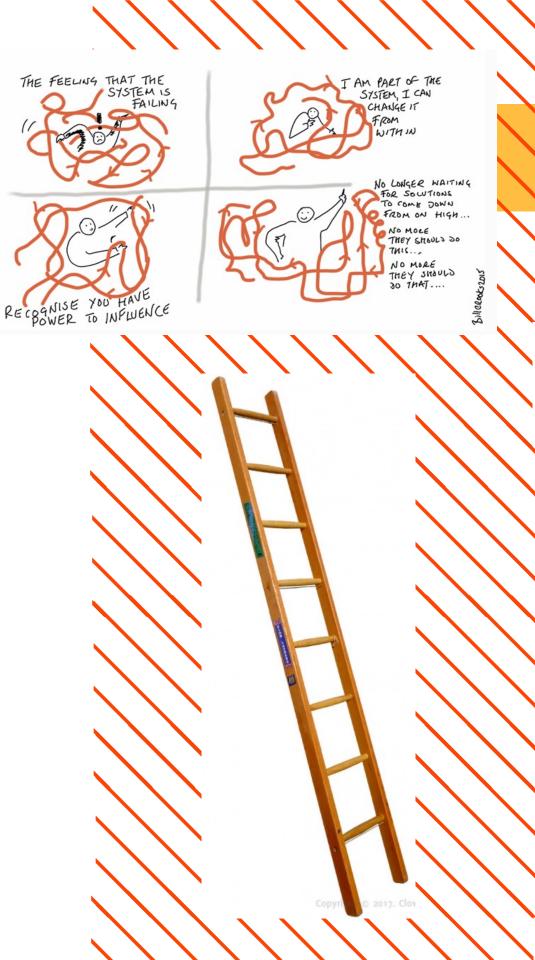


Student leadership

Where and how students can play a role:

- Designing, operating and running interventions and local work to solve a problem
- Commenting on, critiquing and improving strategic solutions to a problem (noticing issues and gaps)
- Co-commissioning evidence gathering, prioritising, designing and choosing solutions at the strategic level

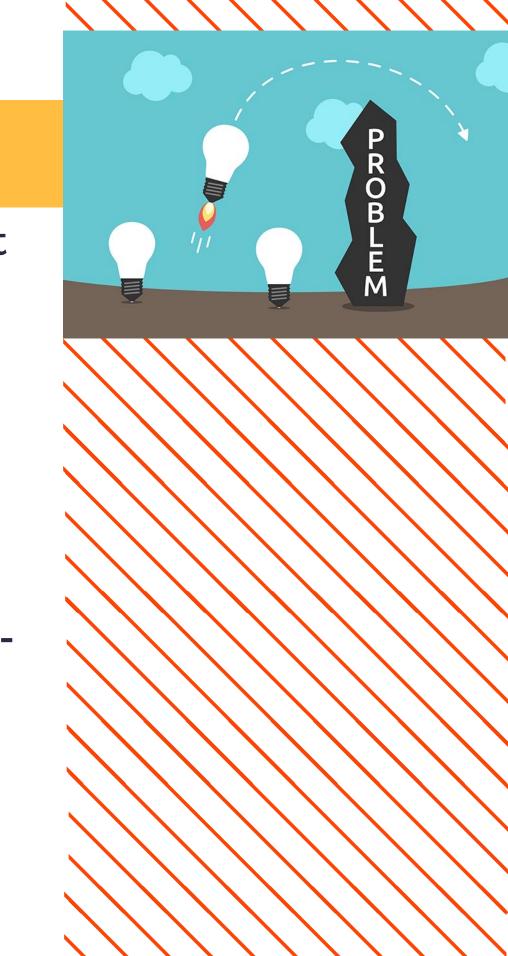




So many problems

- There are all sorts of problems that never seem to get fixed.
- In the 1970s, academics coined the terms 'Tame', 'Critical' and 'Wicked' to describe sets of problems.
 - Tame problems are complicated but easily solved
 - Critical problems are urgent and need commanding leadership
 - Wicked problems are highly complex and can't be tackled without knock-on impacts.
- Leaders everywhere- including in universities and SUslike simple solutions that might fix the tame and show leadership over critical, but don't fix the wicked.

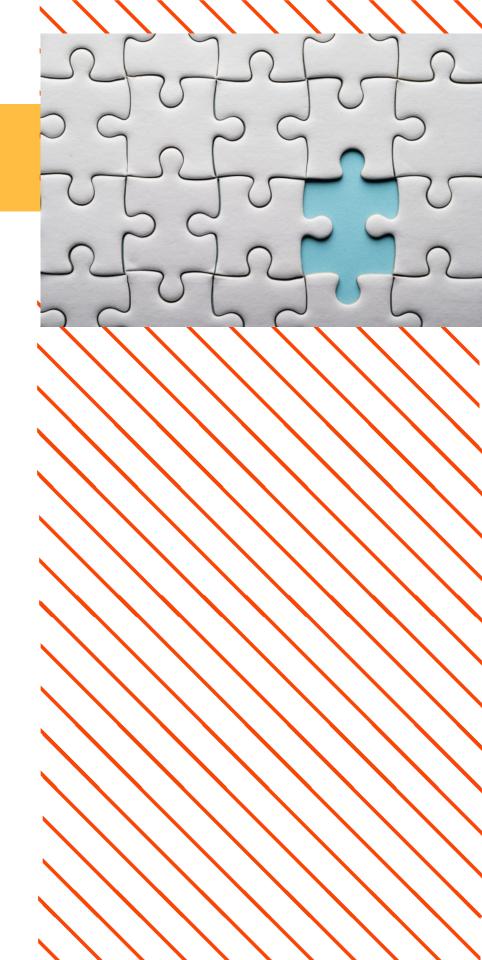




Tame

- Tame problems are those which may be complicated but which are contained and easily solved using discreet interventions.
- They only entail a limited degree of uncertainty and can be addressed by rolling out the same solutions that were used to combat the problem previously.
- Grint describes these problems as being like a puzzle "for which there is always an answer"

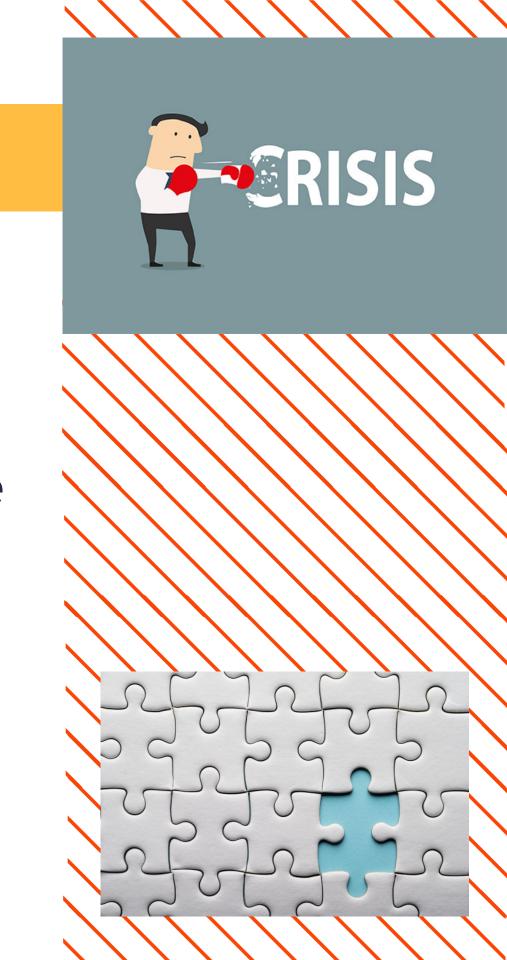




Critical

- Critical problems entail little uncertainty about what response is needed and which demand a fairly immediate reaction from leaders.
- The Cuban Missile Crisis is an obvious example of such a problem.
 - When SUs run out of money- Critical problem
 - When a student is injured on a trip and H&S was poor- Critical problem
 - Staff member accused of sexual harassment-Critical problem





Wicked

- Wicked problems are those which are complex, not just complicated
- Come about as a result of a number of interrelated drivers, each of which cannot be tackled without having a knock-on impact on the other drivers.
- Greek financial crisis where no action could have been taken without causing ripples that affected other Eurozone countries.





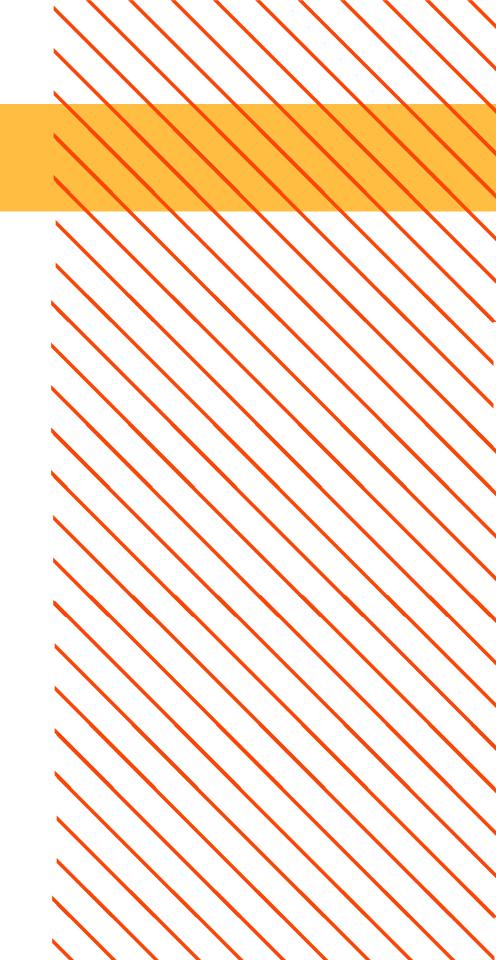
Wickedness

- Old.
- People often think the solution is easier than it is.
- Hard to define the problem.
- People often contest that the problem is, in fact a problem.
- No criteria for when the problem is fixed.
- Solutions to wicked problems are not true-or-false, but good or bad.
- Success or failure judgments are subjective.
- There is no immediate and no ultimate test of a solution to a wicked problem.
- Every solution to a wicked problem is a "one-shot operation"; because there is no opportunity to learn by trial and error, every attempt counts significantly and impacts on people.
- Every wicked problem can be considered to be a symptom of another problem.



Wheel of wickedness





How leaders define problems

Tame

There's a simple solution Programmes Planning, checking, target setting "Level headed" response Often misses issues/detail Can be hard to change - professionals

Critical

Urgent, rapid, prioritisation Emotional issue/response Significant injection of time/money Big "single solution" responses

Wicked

Complicated

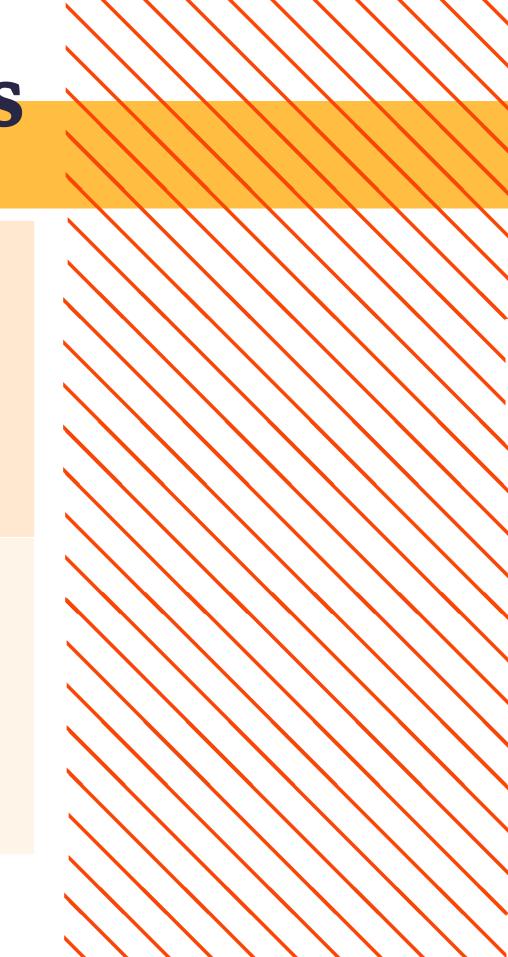
Different views on who, what, how and when

Requires lots of people to do things Requires those affected to be involved

Not a problem

Denial that it's an issue It is an issue but it's someone else's issue (NHS, State, Parents, Media) It is an issue but much more of an issue elsewhere





OfS approach

Move to solutions and action that work

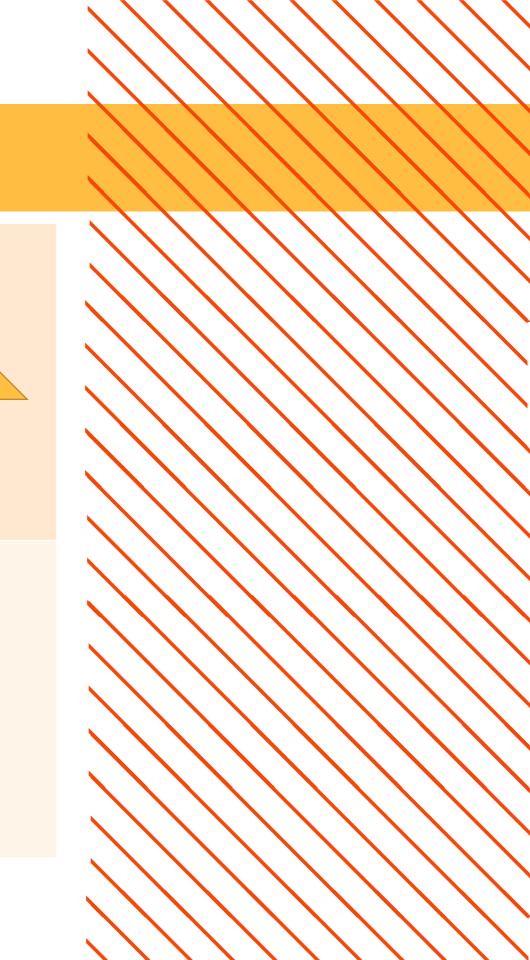
Demonstrate deep understanding

Frame as

urgent/critical

It is a problem



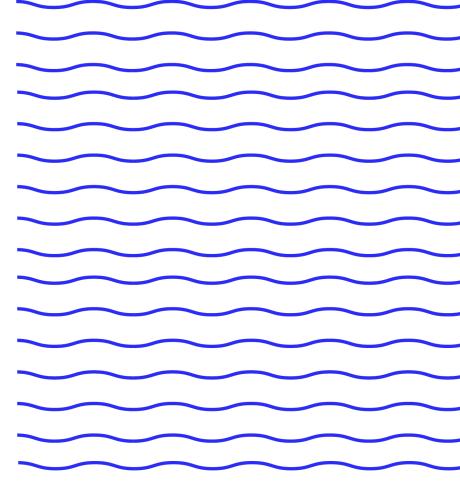


Wicked to tame

- Involve those it affects
- Gather data
- Hypothesis & trial research
- Dissemination strategy
- "Whole org" and accountability
- Allocate resources
- Manage delivery of plan







Adopting mental health as a strategic imperative

April is national stress awareness month, providing a great

opportunity to highlight work that improves student mental

health and the student experience.

Author



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Published on 27 Apr 2018

Education), UUK



How the Catalyst Fund is supporting a new approach to student success





Research metrics

Open access research

Interdisciplinary research

High-performing research

Supporting research integrit

Postgraduate researchers

REF impact

Public engagement

Research Excellence Framework

Equality, diversity and inclusion

About us Funding Research excellence Knowledge exch

Sector guidance Finance

Home > Research excellence > Postgraduate researchers

Postgraduate researchers

Research England (as a council of UKRI) have an interest in postgraduate research student Research England are responsible for research funding, including the research degree prog

We will work with the Office for Students (who are responsible for protecting the interests of they receive) to understand the pipeline of talent through this level of study.

Funding

Research England provides a stream of funding that helps universities meet the costs of sup encourage the next generation of researchers.

Research Degree Programme (RDP) supervision funding currently amounts to £260 million. receive mainstream quality-related funding in the same academic year. The allocation reflec departments that attract mainstream QR funding, the relative costs of the subjects they are

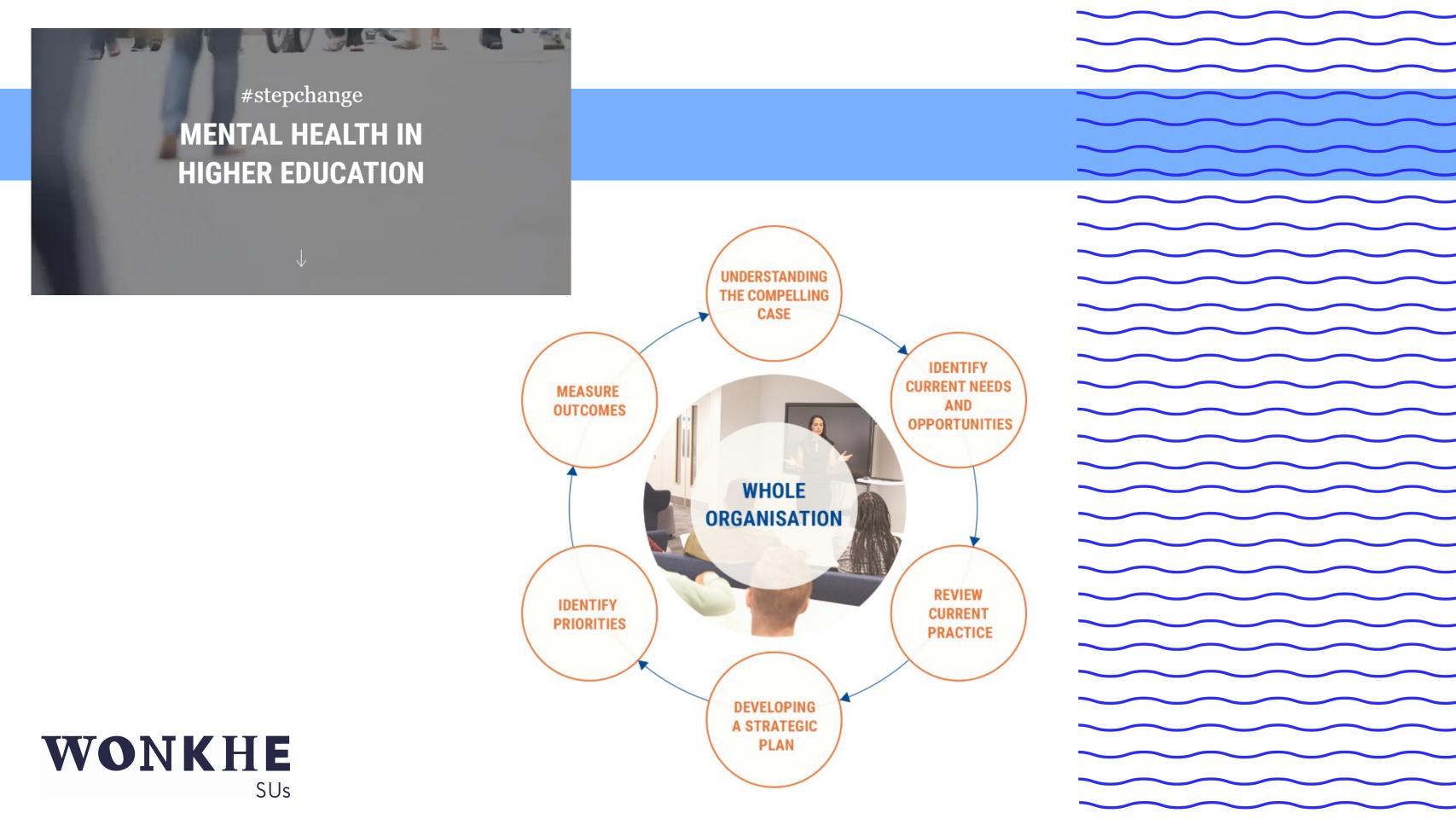
Mental health and wellbeing

We commissioned Vitae to undertake the first specific piece of research into the wellbeing at They looked at the policies and provision relating to these issues in higher education provide postgraduate researcher focus groups at ten UK HEPs between September and November . HEPs, providing an indication of the views and experiences which could be explored using a report in May 2018.

The report concludes that these students face unique challenges, including difficulties with s recognised in the undergraduate population including financial worries, harassment, and fee

The Vitae report makes recommendations to funders and HEPs to encourage a healthy and PGRs, which include:

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is and the health of the research base. ramme supervision fund.			
all students and the quality of the provision		\sim	
pervising research degree programmes to			
This is allocated to departments which will ts postgraduate research student numbers in		\sim	
studying, quality and London weighting.			
nd mental health of PGR students in the UK.			
ers (HEPs) through interviews with staff, and			
2017. They also ran a pilot survey at six a survey instrument. We published their			\sim
supervisor relationships, as well as others eling isolated and inadequate.			
supportive research environment for all			
		\sim	
		\sim	



Wicked to tame

The University Mental Health Charter

Authors: Gareth Hughes & Leigh Spanner

Please cite as: Hughes, G. & Spanner, L. (2019). The University Mental Health Charter. Leeds: Student Minds

An initiative by student minds
University Mental Health Charter

WONKHE SUs

Domain 1 - Learn

Transition into university Learning, teaching and assessment Progression

Domain 2 – Support

Support services Risk External partnerships and pathways Information sharing

Domain 3 - Work

Staff wellbeing Staff development

Domain 4 - Live

Proactive interventions and a mentally healthy environment Residential accommodation Social integration and belonging Physical environment

Enabling Themes

Leadership, strategy and policy Student voice and participation Cohesiveness of support across the provider Inclusivity and Intersectional mental health Research, innovation and dissemination



A new charter

- Announced May 2018
- Evidence-informed Charter reference point for universities to adopt a "whole-university approach" to mental health, and inform ongoing enquiry and debate
- Maps against UUK StepChange and UUK "Mentally Health Universities" due early 2020
- Charter Award Scheme, which will assess universities against the Charter and recognise providers who demonstrate excellent practice (piloted early next year, opens September 2020)
- Voluntary but who would say no (notwithstanding assessment/award) format and cost of participation)
- Has support of DfE, OfS, Nations, all the big players
- Pushed heavily by Michelle Donelan as an expectation





What's in the charter?

- 18 themes, mapped against the 4 domains and enabling themes of the UUK Mentally Healthy Universities model.
- Classic quality model. See QSA, Quality Code, ATHENA Swan etc
- Within each of the themes, the charter document sets out what the theme covers, evidence supporting why it is important and what matters within this theme, and principles of good practice.
- The principles really matter. They will form the basis of the Charter Award Scheme and universities that apply to the Award Scheme will be asked to demonstrate their progress towards the principles to achieve the Award.
- Principles ("standards") are designed not to be prescriptive.
- Award scheme will ask universities to demonstrate how they are addressing the principles of good practice "within their own context".



The University Mental Health Charter

Authors: Gareth Hughes & Leigh Spanner

ase cite as: Hughes, G. & Spanner, L. (2019)

student Wiersity minds University Mental Health

Learn: Transition into university

- Universities take a whole university approach to transition, embedding measures to support the positive transition of all students across their provision and into the curriculum.
- Measures to support transition begin from preapplication and continue through application, pre-entry, arrival, induction and through the first year.
- Measures to support transition aim to promote wellbeing, efficacy, academic integration and social connectedness.
- Universities provide additional or specific interventions for students who face additional barriers.



Domain 1:

Learn

- Transition into university
- Learning, teaching and assessment
- Progression

Learn: Learning, teaching and assessment

- Universities ensure that curriculum takes a holistic and inclusive view of learners, using evidence informed practice and secure scaffolding to enable all students to develop skills, confidence, academic self-efficacy and improve performance.
- Universities ensure that curriculum is designed to facilitate students to acquire skills, knowledge and understanding at an appropriate pace.
- Universities ensure that curriculum and pedagogic practice encourages deep learning, meaning, mastery and development.
- Universities ensure that curriculum design, pedagogic practice and academic processes consider and seek to impact positively on the mental health and wellbeing of all students.
- Universities clarify the role of academics in supporting student mental health and guide staff to maintain supportive, appropriate boundaries.
- Universities ensure that staff in teaching and learning support roles understand how they can support student mental health and wellbeing through good pedagogic practice.



Domain 1 Learn

- Transition into university
- Learning, teaching and assessment
- Progression

MENTAL HEALTH IS NOT EXTRA CURRICULAR



Learn: Progression

- Universities support students to prepare for the multiple, ongoing transitions they encounter during their university career, e.g. between years\ levels of study.
- Universities provide targeted support for students on placement and on professional programmes, who may require more indepth preparation and specific interventions.
- Universities provide adequate support for students taking breaks in study and proactively support their transition back into education.
- Universities support students to prepare for life, career and further study beyond graduation.
- Universities ensure that support for these transitions is structurally embedded into curriculum and university practice.



Domain 1 Learn

- Transition into university
- Learning, teaching and assessment

Support: Support Services

- Universities ensure that support services are appropriately resourced.
- Universities ensure that support services are safe.
- Universities ensure that support services are effective.
- Universities ensure that support services are responsive to current and future need and to local context.
- Universities ensure that support services are equally accessible to all students.
- Universities ensure that support services are well governed.



Domain 2: Support

- Support services
- Risk
- External partnerships and pathways
- Information sharing

Support: Risk

- Universities have in place effective practice, processes and training for alerting and assessing risk to staff and students, and appropriately referring those at risk to internal or external services.
- Universities ensure staff have access to timely, expert advice and guidance.
- Universities provide interventions for all affected by risk and suicide and provide support for those at risk, when waiting for external interventions.
- Universities plan for prevention, intervention and post-vention activities, including planning for suicide clusters and reporting to the media.
- Universities reduce risk by ensuring they provide a safe physical environment and university culture.
- Universities support students to be able to report concerns.



Domain 2: Support

- Support services
- Risk
- External partnerships and pathways
- Information sharing

Support: External partnerships and pathways

- Universities take proactive steps to build relationships with local NHS, Social Care and third sector agencies, creating a shared understanding of each other's roles and responsibilities and demonstrating a commitment to principles of effective collaboration.
- Universities are able and willing to work collaboratively with NHS/Social Care to support individual students.
- Universities support NHS/Social Care and other relevant agencies to understand the context of student life and the implications of treatment options and other decisions.
- Universities have arrangements in place to assess risk and effectively communicate this to NHS/Social Care.
- Universities work with NHS/Social Care to support students to return to study when appropriate.
- Universities work collaboratively with DSA funded private providers, ensuring they are aware of providers who provide support to their students and that those providers understand the mechanisms for reporting concerns.



Domain 2: Support

- Support services
- External partnerships and pathways
- Information sharing

Support: Information sharing

- University services work with students to mobilise all of their available resources to support their mental health– especially in instances of crisis.
- The university acknowledges and demonstrates understanding that working with families, statutory services and others can provide effective support for students with poor mental health.
- Student autonomy is central to decision making in relation to sharing information and is enabled as far as possible, unless the individual is appropriately assessed to lack mental capacity.
- Universities ensure that any decision to override student wishes or to pass on information without consent is done as a result of an appropriate, well governed, clinical assessment, is consistent with relevant national guidance, is clearly justifiable and is in the best interests of the student.
- Universities ensure that information is passed to the most appropriate people, who can reduce risk.
- Confidentiality arrangements are clear, accessible and highly visible and relevant Data Sharing Agreements are in place.



Domain 2: Support

- Support services
- Risk
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Work: Staff Wellbeing

- Universities develop a culture and environment that supports good staff wellbeing and good workplace conditions.
- Universities ensure staff feel able to discuss their own mental health and wellbeing and have access to effective, accessible support and proactive interventions to help them improve their own mental health and wellbeing.
- Universities ensure staff feel psychologically safe to enable them to innovate, identify improvements and raise concerns about culture and practice that may impact on mental health.
- Universities equip managers with the knowledge, skills and confidence to support good wellbeing within their teams and respond appropriately when staff experience poor mental health.
- Universities enable staff to adopt and maintain healthy lifestyle and workplace behaviours.
- Universities support staff to spend a significant proportion of their time on work that is meaningful to them and appropriate to their role.



Domain 3: Work

- Staff wellbeing
- Staff development

Work: Staff development

- Universities support staff to develop, individually and collectively, the confidence and ability to promote positive mental health and respond appropriately to poor mental health.
- Universities support staff to recognise and respond appropriately to poor mental health and signs of risk, signpost effectively and maintain the safe boundaries of their role.
- Staff receive mental health training that is context and role specific.
- Universities promote a workplace environment and management practices that support formal and informal reflection, consultation and development for staff who may encounter student mental illness.
- Universities provide formal development for managers that enables them to promote good wellbeing within teams, understand the challenges staff may face, provide appropriate support for their teams and have knowledge of resources that can help.
- Universities ensure staff in mental health roles engage in regular, ongoing clinical development.



Domain 3: Work

- Staff wellbeing
- Staff developmen

Live: Proactive interventions and a mentally healthy environment

- Universities promote the mental health of all members of the community through education, actively encouraging healthy behaviours and community building and providing proactive interventions to improve wellbeing.
- Universities take steps to create an environment and culture that supports positive mental health and wellbeing.
- Universities take steps to create an environment that facilitates and makes it easy for individuals and groups to adopt healthy behaviours, offering multiple and varied options and interventions.
- Universities take steps to create a culture that prioritises mental health as important and are open and highly visible in doing so.
- Universities take steps to create a culture in which individuals feel safe and supported to disclose when they are experiencing poor mental health.



Live

- Social integration and belonging

Live: Residential accommodation

- Student accommodation provides safe, environments that are positive for mental health and wellbeing.
- Student accommodation supports every student students to meet their physical and psychological needs and manage their wellbeing.
- Student accommodation is inclusive and supports all students to find their friendship group and build a sense of belonging.
- Arrangements are in place to recognise poor mental health and to refer students to appropriate support. This includes supporting accommodation providers and support services to collaborate and develop a shared understanding of provision, data sharing and signposting arrangements.
- Accommodation staff are trained and supported in responding to student mental illness.
- Universities provide support for students living with a peer who is experiencing significant mental illness and staff in accommodation who may be responding to student mental illness.



Domain 4:

Live

- Proactive interventions and a mentally healthy environment
- Residential accommodation
- Social integration and belonging
- Physical environment

Live: Social integration and belonging

- Universities take considered action to ensure a diverse, safe community.
- Universities actively and systematically support the social integration of all students.
- Universities take action to tackle the causes and effects of social isolation.
- Universities provide support for those experiencing loneliness.
- Universities work to prevent and address marginalisation, discrimination or harassment of individual students and groups.
- Universities ensure social cohesion and individual differences exist alongside each other, taking account of power dynamics and imbalances.



Domain 4:

Live

- Proactive interventions and a mentally healthy environment
- Residential accommodation
- Social integration and belonging
- Physical environment

Live: Physical environment

- Universities engage with evidence and their communities to embed wellbeing and accessibility within the design of new buildings and developments.
- Universities engage with evidence and their communities to embed wellbeing and accessibility into the redevelopment and maintenance of current estate.
- Universities ensure that the design and allocation of working and learning spaces effectively supports the learning/work undertaken within that space.
- Universities facilitate and actively encourage staff and students to engage with nature.
- Universities ensure staff and students have access to appropriate social space.
- Universities ensure that wayfinding is clear and makes navigating campus easy for all.



Domain 4: Live

- Proactive interventions and a mentally
- Social integration and belonging

Enabling Themes: Leadership, strategy and policy

- Universities have a strategic whole university approach to mental health that is embedded in day to day practice and culture.
- Universities have an approach to mental health and wellbeing that is robustly evidence informed.
- Universities have an approach to mental health and wellbeing that is co-produced with staff and students, seeks to mobilise the whole community and considers mental health across the whole-university.
- Universities approach to mental health and wellbeing is evident in other strategies, policies, procedures and practice.
- There is visible leadership and commitment to mental health across the entire organisation.
- Universities approach to mental health is clearly linked to and part of core institutional missions.



Enabling Themes

- · Leadership, strategy and policy
- Student voice and participation
- Cohesiveness of support across the provider
- Inclusivity and intersectional mental health
- Research, innovation and dissemination

Enabling Themes: Student voice and participation

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Enabling Themes: Student voice and participation

Co-production

This is collaboration between institution and students, involving joint decisionmaking on both process and outcomes

Participation

Decisions are taken by students to take part or have a more active role in a defined activity (such as strategy development)

Involvement

Opportunities are provided to students as individuals to take active roles

Consulation

Opportunities are provided for students to provide individual opinions, perspectives, experiences, ideas, and concerns.

Coproduction [Fig 5] Increasing the role of student voice Adapted from Healy et. al. (2014, Higher Education Academy)



Increaing role of Student Voice

Enabling Themes

- · Leadership, strategy and policy
- Student voice and participation
 Cohesiveness of support across the provider
- · Inclusivity and intersectional mental health
- Research, innovation and dissemination

Enabling Themes: Cohesiveness of Support across the Provider

- Universities ensure cohesion and appropriate collaboration between different support services.
- Universities ensure cohesion and appropriate collaboration between support services and academic teams.
- Universities facilitate appropriate sharing of information across the institution to support individual students.
- Universities ensure effective signposting and triage across the institution.
- Universities work to develop a shared vision and understanding between different parts of the university community, towards mental health.



Enabling Themes

- Leadership, strategy and policy
- Student voice and participation
- Cohesiveness of support across the provider
- Inclusivity and intersectional mental health
- Research, innovation and dissemination

Enabling Themes: Inclusivity and Intersectional mental health

- Universities take action to understand their populations and staff and students' differing needs and experiences.
- Universities ensure that the culture and environment is inclusive, welcoming and safe for all members of the university community.
- Universities develop specific interventions that address the barriers to mental health and wellbeing faced by particular groups due to structural, personal or cultural inequalities.
- Universities develop specific interventions that address the barriers to mental health and wellbeing faced by particular groups due to higher education specific inequalities, such as mode of study or access.
- Universities ensure support services work to improve their cultural competence and are able to respond to different student backgrounds, characteristics and experiences.



Enabling Themes

- Leadership, strategy and policy
- Student voice and participation
- Cohesiveness of support across the provider
- Inclusivity and intersectional mental health
- Research, innovation and dissemination

Enabling Themes: Research, innovation and dissemination

- Universities support research into university mental health and wellbeing and the development of innovative good practice.
- Universities encourage collaboration and dissemination of learning between research and practice, between disciplines and between universities and relevant organisations.
- Universities undertake rigorous and systematic evaluation of services and interventions that informs decision making and continuous improvement.
- Universities enable support services staff to participate in, lead and disseminate research.



Enabling Themes

- Leadership, strategy and policy
- Student voice and participation
- siveness of support across the provider
- Inclusivity and intersectional mental health
- Research, innovation and dissemination

And finally...

- Focus on "prevention" or "treatment" or "strategy"?
- Totemic symbols v messy strategies (ie wait times)
- Investment and resourcing
- Effectiveness, proof and metrics
- Education, or welfare or everyone?
- What does an SU strategy on M/H look like?





Everything you need to know about mental health in HE





Everything you need to know about mental health in HE



