



Department
for Education

Higher Education Mental Health Implementation Taskforce Meeting Five

**Notes of 5th Taskforce meeting held on 2nd February 2024
(10:30 – 12:00), virtually via MS Teams**

Chair

Higher Education Student Support Champion, Professor Edward Peck

Members Present

- Professor Edward Peck, Taskforce Chair
- Professor Louis Appleby - Chair of National Suicide Prevention Strategy Advisory Group
- Mia Brady, student representative - Student Minds Student Advisory Committee
- Dr Nicola Byrom - Network Leader, SMaRteN
- Professor Prathiba Chitsabesan - National Clinical Director for Children and Young People's Mental Health, NHS England
- Emma Douthwaite – Acting Head of Equality, Diversity and Inclusion, Office for Students (OfS)
- Ben Elger - Chief Executive - The Office of the Independent Adjudicator (OIA)
- Lee Fryatt - Co-founder, The LEARN Network
- Angela Halston – Senior Policy and Engagement Officer, Independent HE (IHE)
- Jane Harris - Chair, Mental Wellbeing in Higher Education Expert Group (MWBHE)
- Jen Hope – Senior Policy Lead (Mental Health), Association of Colleges (AoC)
- Gordon McKenzie – CEO, GuildHE
- Dominic Smithies – Head of Influencing and Communications – Student Minds

- Jill Stevenson – Chair, Association of Managers Of Student Services In Higher Education (AMOSSHE)
- Dr Dominique Thompson - Clinical Advisor, National Institute for Health and Care Excellence (NICE) and Student Minds

Apologies

- Kathryn Cribbin - student representative, QAA student panel
- Polly Harrow – FE Student Support Champion
- Matt Lee - Head of Children and Young People’s Mental Health Policy, Department of Health and Social Care
- Mark Shanahan - Co-founder, The LEARN Network
- Professor Steve West - Board member, UUK

In Attendance

- John Bloomfield – Executive Director, Association of Managers Of Student Services In Higher Education (AMOSSHE)
- DfE officials
- Student Support Champion’s team

Item 1: Welcome and Introduction

The Chair welcomed members to the fifth meeting of the Taskforce and thanked them for their continuing engagement and contributions.

Item 2: Review of minutes from Taskforce meeting four

There were no comments on previous minutes.

Item 3: Review of first stage report and potential new priority areas

Minister Halfon is very happy with the work to date. He has suggested new priorities, set out in the foreword to the first stage report. Minor changes have been made to the report since members last saw it. There were no further comments from members on the report.

Additional priorities:

Prevention - prevention is already embedded fully within the work of the Taskforce and HE Student Support Champion, including identifying students at risk early and student commitment on compassionate communications and procedures. The emphasis on prevention has been brought out more in the report. A group has been established independent of the Taskforce, albeit with a shared Chair, that will be producing guidance on restricting access to means of suicide in HE settings; this should be available in the early summer 2024.

Resilience - there may be more work for the Taskforce to do here. TASO has done some work into psychoeducation and resilience interventions and there is the opportunity to promote these further. The transition work of the HE Student Support Champion will partially address this in a forthcoming report but, again, there may be benefit in further exploration during 2024.

Concerns about the implications of the term 'resilience' were acknowledged. Members cautioned that it should not be used to suggest students are at fault for poor mental health. It was suggested that resilience should mean a resilient institution, creating a culture that allows individuals to be resilient. It was clarified that this term was not intended to suggest that students should take full responsibility, as shown by all of the work to improve practices of providers.

Information sharing - work with UCAS on extending the applicant questionnaire and reference process was continuing under the auspices of the Taskforce. The Student Support Champion will also explore current barriers and potential methods to information sharing directly from schools and colleges to HE with a range of agencies. Clearly, any innovation in this broader approach - and any system that would deliver it – would have benefits beyond HE applicants who had experienced mental health problems.

Concern about social media and online harms – The group on restricting access to means will also pick this up. Members raised that the student voice should be a substantial part of this conversation, arguing it can be easy to focus on the negatives of social media and ignore the benefits.

The minister wanted to respond to concerns about training / professionalism in student support - DfE research suggests 97% of HEIs have psychological support in place. However, there may be a limit to capacity of these services in some HEPs given levels of demand.

Decision: Members are content with these priorities and where they will sit.

Item 4a: Identification of risk – Training for non-specialist staff

The work will aim to set a baseline for HEPs. Most providers are providing training for non-specialists already, but there is not a common approach across the sector.

The project team is talking to a number of stakeholders, including CUBO, UKAT, and AdvanceHE.

Members shared the concerns that the good work going on already is fragmented. Furthermore, we do not know the level of confidence among academic staff in this area. There is also concern that much training is not mandatory for many staff groups and that too many staff may be opting out. The Chair set out that HEP's postgraduate certificates in teaching and AdvanceHE accreditation form part of this work.

Members expressed caution around the timeframe, arguing achieving systemic change in three months is challenging. It was clarified that this work is ultimately aiming to aggregate what is already happening, rather than creating something new.

The Chair agreed that it is important that the work gets done well rather than by a specific date and suggested some of this work may continue beyond the second stage report in July.

Item 4b: Identification of risk – Analytics and UCAS

This strand will develop or promote guidance to help HEPs with their use of analytics.

The key concern from many providers is that they are too far away from implementing data analytics. There would be an update presented to next taskforce meeting, which may encompass an outline project plan.

UCAS plan to encourage more disclosures through the application process. The broad objective is to streamline the service and make it easier for students to disclose. However, it is important also to be clear what further information would HEPs want to receive and what format would make it most useable. Meetings are being arranged to address these questions.

Item 5: Student commitment

The next step is articulating and sharing a set of principles, which will be shared with Taskforce members soon. The team is looking to separate principles from the commitment itself. The Taskforce project team is meeting with OIA next week to talk about appropriate wording.

A request is going out for additional examples of good practice in compassionate communications and processes.

We would welcome student input at the next stage.

Item 6: National Review of HE Suicides

Minister Halfon sent a letter to all providers last week alongside the NCISH (National Confidential Inquiry into Suicide and Safety in Mental Health) information sheet.

NCISH is meeting with UUK members Wed 7th February to answer questions from providers. NCISH is keen to arrange similar events with other mission groups.

An update was provided on the operation of the National Review:

- The project is on track. The critical issue will be universities sending serious incident reviews to NCISH so getting the system in place is top priority. The immediate response from providers has been positive, many having already provided NCISH with a key contact.
- Meeting soon with ForThe100. There is optimism that the National Review can address members' concerns.
- The Advisory Group is being put together now.

Members shared that coroners are now publishing Prevention of Future Deaths (PFDs) reports online. This could be something to look at as a next step in this strand of work. Members also discussed the relationship between the National Review and coroners, including whether there is an opportunity to feed something back to the national coroners' network. NCISH wants to use PFDs in the review in some way, but the level of detail and timing of coroner reports are variable.

Item 7: Adoption of Good Practice

Most of the work to develop this strand is complete. It is now for Student Minds and mission groups to implement the commitments they are signed up to; there are some strong commitments that will make a big difference to student outcomes.

One of main next steps is for Student Minds to complete a light touch review of the University Mental Health Charter/Award and for pursuit of the minister's target for all universities to join by September 2024, working through barriers to achieving this.

Members discussed concerns around the language and aspiration in this area; that this charter is a good framework, but signing up to it is not necessarily a signifier of change. Members agreed that signing up is the first step and that we should push providers to continue to improve their practice, assured by both the initial award process but also by participating in subsequent reaccreditations. In this context, Student Minds are looking at timescales of the award process.

The Taskforce was informed that AoC is about to launch its renewed mental health charter which was more aligned to that developed by Student Minds and partners. AoC was anticipating extensive sign-up. It would be shared with members once available.

Mental Health Strategies:

- This contained project will explore ways providers are embedding strategies into their governance structures. There is not an established way of developing and monitoring strategies, although many are using existing frameworks as a basis.
- This is not about prescribing a specific approach, but finding and sharing what guidance already exists to support providers to embed strategies.
- Project team is looking to convene a group. The Taskforce Chair noted that the Committee of University Chairs is crucial here and, as noted, should be invited to join the group.
- Members raised concerns about trying to draw together existing good practice into one document. It was argued there is good guidance already, so signposting to this, rather than rewriting, is the way to go.
- Members said this project should not look to encourage a deficit model and focus just on risks. Some institutions have mental health embedded across their policy frameworks rather than having one mental health specific framework.

Item 8a: Areas for further improvement – NHS secondary care

The intention is to aggregate much of the existing good guidance and present it specifically for consideration and action by leaders in HE and NHS.

Taskforce members agreed that the way solutions are presented is important. The success of the Manchester model is partly due to its evidence of reducing burden on NHS. It is important to look at cost-effectiveness and levers within the NHS.

MWBHE (Mental Wellbeing in Higher Education Expert Group) is working with a national group following the Nous work, looking to an Easter deadline with clarification of boundaries between HEPs and NHS.

Item 8b: Areas for further improvement – Case management

This project will explore the ways providers are designing and implementing case management, including information sharing between teams in each institution.

There is an emerging pattern of providers adopting these systems, but not consistent sharing of good practice. The paper sets out how this work might be taken forward. This will involve a request for evidence from providers who have gone through the process to inform a subsequent roundtable. We will then come back to a future taskforce meeting with a clearer picture of next steps. The Chair said it would be helpful to have someone from NHS mental health background at the roundtable.

A member raised that an element of case management is fitting together university provision and asked if DSA can be looked at as part of this, highlighting challenges getting support. This will be picked up at the Roundtable.

Item 8c: Areas for further improvement – Primary Care

A project plan was being prepared for the next meeting of the Taskforce.

Item 9: Next Steps, AOB and close

The revised AoC MH Charter framework will be shared in the next couple of weeks. Aiming for 100% sign up by September.

Next meeting

The next Taskforce meeting will be 7th March, 12:30 – 14:00 2024

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