

## Higher Education Mental Health Implementation Taskforce

Notes of Taskforce meeting held on 10th October 2025 (14:00 – 15:30).

### Chair

Higher Education Student Support Champion, Sir Steve West.

### Members Present

- Suzy Allinson– Safeguarding and Welfare Manager, Office for Students (OfS)
- John Bloomfield – Executive Director, AMOSSHE
- Suzanne Carrie - Head of Student Equality and Welfare, Office for Students (OfS)
- Peter Fonagy – National Clinical Advisor for Children and Young People's Mental Health, NHS England
- Lee Fryatt - Co-founder, The LEARN Network
- Angela Halston – Policy and Engagement Manager, Independent HE (IHE)
- Jane Harris - Chair, Mental Wellbeing in Higher Education Expert Group (MWBHE)
- Peter Mayhew Smith - representing Association of Colleges (AoC)
- Helen Megarry - Independent Adjudicator - The Office of the Independent Adjudicator (OIA)
- Dr Mark Shanahan – member, The LEARN Network
- Jenny Shaw - Higher Education External Engagement Director, Unite Students
- Dominic Smithies – Head of Influencing and Communications, Student Minds
- Sarah Sweeney – 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
- Ellen Graves, deputising for Dr Kate Wicklow – Director of Policy and Strategy, GuildHE

## Apologies

- Dr Nicola Byrom - Network Leader, SMarTeN
- Prathiba Chitsabesan - National Clinical Director for Children and Young People's Mental Health, NHS England
- Mark Ewins – Head of Mental Health, NHS England
- Polly Harrow – Further Education Student Support Champion
- Matt Lee - Head of Children and Young People's Mental Health Policy, Department of Health and Social Care

## In Attendance

- Department for Education (DfE) Officials

## Welcome and Introduction

The Chair welcomed members and thanked them for their enthusiasm in reconvening the Taskforce. He has recently met with the Minister for Skills, The Rt Hon Baroness Jacqui Smith of Malvern, who is keen to see the Taskforce continue and reiterated her support for its important work. The Chair acknowledged that this meeting is taking place on World Mental Health Day and made clear that the Taskforce should not lose sight of its primary purpose: to champion, support and challenge the sector to improve student mental health and wellbeing and prevent tragic instances of student suicide.

Taskforce members introduced themselves and congratulated the new Chair on his appointment as HE Student Support Champion and Taskforce Chair.

Actions:

- Taskforce membership to be finalised, with a representative from Universities UK to be added.
- The Taskforce secretariat will shortly canvas members' availability to identify dates for upcoming meetings.

## Taskforce Priorities

The following updates were shared with Taskforce members:

- A draft revised Terms of Reference for the Taskforce had been shared with all members for comment and consideration.

- The previous iteration of the Taskforce included three student representatives. Moving forward, the Taskforce will invite the National Union of Students (NUS) to join the Taskforce. The individual student representatives have been thanked for their time, and made aware of this change, and one has written back fully supporting this decision.

Taskforce members raised the following points:

- Many members welcomed the changes to the model of student engagement, and to inviting the NUS to join the Taskforce.
- A member asked that references to bereaved parents in the ToR be changed from 'bereaved families' to explicitly mention the term 'lived experience', which includes both family and other loved-ones bereaved by and impacted by suicide or mental health issues.
- Several members welcomed the addition of institutional accountability as a key area of focus.
- A member welcomed the focus on implementation and questioned whether The National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH) would be represented on the Taskforce, and if there would be further national reviews. The Chair confirmed that he discussed this with the Minister for Skills. We will be inviting NCISH to join the Taskforce. The Chair stated that the review was funded as a one-year project, which was incredibly valuable in learning lessons from previous tragedies and identify areas for improvement. However, the focus over the next year needs to be on embedding the recommendations. The Chair advised that, while an annual review may not be the way forward, he is keen for the Taskforce to consider how we build on this work and improve the data and evidence base in this space.
- A member asked for updates on the publication of the HE-NHS partnerships report, raising caution that in the rapidly changing landscape of the sector there is a risk that further delays could cause the paper to be outdated by the time it lands. DfE officials explained that they are looking to get the Taskforce's last two reports published as soon as possible.
- A member raised the need for the Taskforce to consider neurodiversity as part of its work, as there is currently no specific mention of neurodiversity in the terms of reference. The Chair agreed that this it is crucial that we understand the impact of neurodiversity on general and mental health, and how the sector can best support these learners. Another member also raised the need to recognise the intersectionality between mental health and disability.
- A member asked that the Taskforce also learn lessons from devolved administrations. The Chair agreed that it is important to learn from successes across other nations and other sectors.
- Many members raised detailed questions about accountability, data and evidence in the Terms of Reference, which were covered under the next agenda item.

Actions:

- References to bereaved families in Terms of Reference to explicitly mention 'lived experience'.
- Chair to consider whether neurodiversity is specifically referenced in terms of reference.
- DfE officials to confirm NUS representative membership on Taskforce.

## Accountability and Data & Evidence

A member informed the Taskforce on the role the OfS plays in regulating the sector, and how this could apply to accountability work.

- The member stated the need for clarity, within the taskforce, on expectations in setting standards and understanding progress towards these standards. They stated that the OfS is a risk and principles-based regulator – they do not set out a specific approach, focussing instead on expectations and outcomes they wish to see as part of their regulatory conditions. Often the need for institutions to publish their own reports and data is a strong tool to encourage compliance. The OfS also have a suite of monitoring and enforcement powers when they consider a provider has fallen short on expectations. The OfS regulatory system should be seen in the context of a wider set of regulation including but not limited to self-regulation and legal compliance.
- They stressed the need for the Taskforce to be clear on the purpose of accountability – who it is targeting, what they are being asked to do, and to consider practicality and unintended consequences. Institutional autonomy must always be considered when setting expectations.
- They also updated members that the OfS is currently consulting the sector on their approach to quality and they welcome input from members.
- The member confirmed that they are happy to set out more detail on the OfS's role and where this may interact with the Taskforce's accountability work in a future Taskforce meeting.

Taskforce members raised the following points:

- A member questioned what the Taskforce proposes that providers will be accountable to. The Chair suggested that the first stage of this work is to understand and collate where all Taskforce, and sector outputs regarding mental health are hosted, ensuring that signposting and engagement expectation of all providers is clear across the sector. There is also a need to make clear the reporting frameworks and regulation that would complement this work. The Chair made clear that this group of members are expected to support on embedding the work of the Taskforce and ensuring it sticks in the sector.
- A member pointed out that HESA and UCAS still use very wide-ranging category terms related to mental health data, and they would like to pick up how this impacts data and evidence as part of this work.
- A member stressed the need to define how the Taskforce will measure improvements in mental health, and what the benchmarks could be. The Chair agreed that before the next meeting, he will produce a paper which details the information currently being collected in the sector to allow for measurement of improvements.
- Several queried the role of charters in the accountability work, with one member raising the need for the Taskforce to make clear to providers which charters they are expected to engage with, and that efficiency and effectiveness are balanced as part of this. The Chair agreed that the Taskforce plays a big role in this, it is crucial the sector go further than simply signing up to charters, this is part of the work, but not a solution in its own. We must ensure that the principles of a charter are embedded across institutions.
- A member highlighted the need to look at the role of institutional governance in driving practice and carrying responsibility for mental health support, which has been

effective in the FE sector.

- A member praised the call for clarity on accountability, recognising the wider demand for understanding the expectations of institutions from students and families, including the levers to hold institutions accountable in instances of perceived failure. They raised concern about providers who have not engaged much with the current improvement approach, and whether the levers to drive improvement such as award assessments or ministerial pressure are as impactful with these institutions. However, they noted the need to balance wilful engagement with accountability.
- A member stressed the importance of engagement with families with lived experience to understand the reality of holding providers accountable where things go wrong. Having experienced trying to hold a university to account in an instance of failure, they were critical at the idea of providers taking ownership for this work without an external accountability mechanism. They noted that they have not seen much change in the way providers respond to instances of suicide in several years and that a complete cultural shift is needed – away from acting defensively and towards accepting accountability.
- The Chair drew comparison to the cultural changes in the NHS in recent years – where learning from poor outcomes and transparency are now critical. They now work with families, friends and staff to fully understand what happened, and what could have been done differently. These behaviours in the NHS are embedded in the training, and part of an established duty of candour, as well as the professional requirements of staff. He stressed that this is where HE needs to get to, universities are learning environments and must learn from their own failings.
- The Chair concluded that we must accept that institutions are autonomous and it is vital they take ownership and are responsible for implementation. However, it is our role to understand the governance structures of these providers to ensure our work lands and has impact. He stressed the need to find levers at institutions that are not covered by a charter, rather than waiting for these institutions to join a charter.

#### Actions:

- The Chair agreed to create a think piece on data and evidence before the next meeting, making clear what evidence and data currently exists in this space, and where the gaps are. This may lead to smaller roundtables to take this work forwards and bring back to Taskforce members.
- To create a discussion paper on policy options for accountability that also draws on learnings from the cultural shift in the NHS towards candour and learning.

## Social Ostracism

Taskforce members were provided with the following updates:

- The Chair updated members that a roundtable on social ostracism, hosted by DfE, and Chaired by Dr Dominique Thompson was held in June.
- Social Ostracism, the exclusion of someone from their peers, has become a more significant and impactful issue in HE student populations in recent years. Quicker and more extended means of communications has contributed to this. It is often being used as a method of self-policing among students, due to a lack of trust in formal procedures.
- The roundtable, attended by parents with lived experience and sector experts, was

the first stage in the DfE's work on addressing this issue following a Prevention of Future Deaths report to the Department following the suicide of a HE student where social ostracism was found to be a contributing factor. The ambitious aims of the roundtable were to address the prevalence of social ostracism, the root causes and to identify ways to address the issue.

- There is a lack of research in the area, so it is difficult to understand the prevalence, however factors leading to a student to be socially ostracised include sexual assault allegations, misogynistic views, political views and racism.
- The roundtable also covered cancel culture, which is a separate, but highly related issue. Many students have noted that they are scared to go against the views of their wider groups, in fear of being cancelled.
- Attendees decided that there is a need for further research, education and support in this area.
- Following the roundtable, the Minister for Skills has endorsed further work to better understand the issue of social ostracism and how we can support the sector to address this. We are currently scoping the next phase of this work and will keep the Taskforce updated on progress.

Taskforce members raised the following points:

- Several members raised the link to sexual harm, noting that the remit needs to include providers' procedural responses to allegations of sexual harm. Members noted that it is not solely peers that are ostracising students - actions by the provider, such as suspending accused students from their course or moving them from their accommodation, also inadvertently contribute. They noted the need to balance this with supporting and safeguarding supposed victims is a challenge.
- A member noted that sexual harm is ultimately a police matter, and providers must be clear on their responsibilities as part of that – it is their role to encourage students to follow official justice channels through the police, rather than the institution taking on investigational responsibility – they are not a criminal court.
- A member noted that there is already much cross-sector work on social ostracism and cancel culture in the form of a task and finish group. They wanted to stress the complexity of the landscape in this area in trying to navigate a spectrum that goes from disagreement on opinion, all the way up to hate speech and sexual harm. They have found that where an instance has a high potential for shame it can make accessing support or following official channels difficult and this needs to be carefully considered.
- A member highlighted that some providers have models on how to disagree in a healthy manner. There is a wider systemic issue with disagreement taking toxic forms. The Chair agreed that debate and disagreement is central to the purpose of a university, and that no one has a right to not be offended or disagreed with.
- Members agreed that the Taskforce should oversee this piece of work.

Actions:

- DfE official to arrange a meeting with the Chair and Dr Thompson to scope the next phase of this work.

## Next Steps and Close

The Chair concluded that an immediate focus needs to be collating the work of the Taskforce and the sector regarding Taskforce priorities, ensuring that providers are clear on expectations and can easily access these outputs. He stressed the role of Taskforce members in communicating with the sector by using personal and professional networks to ensure work is meeting the right audience and being engaged with.

He thanked members for their support, confirming that the Taskforce will meet quarterly, complemented by working groups in specific areas, members can contact the Chair directly via email in the meantime.

The Taskforce secretariat team will canvas members for availability for a virtual meeting in December.

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