Department for Education

Higher Education Mental Health Implementation Taskforce

Notes of Taskforce meeting held remotely via MS Teams on 12 March 2026 (13:00 – 14:30).

Chair

Higher Education Student Support Champion, Prof. Sir Steve West.

Members Present

- Suzy Allinson – Senior Regulation Manager, Office for Students (OfS)
- Aleata Alstad-Calkins – Deputising for Sarah Sweeney, Association of Managers of Student Services In Higher Education (AMOSSHE)
- Nic Beech – representing Universities UK (UUK)
- John Bloomfield – Executive Director, AMOSSHE
- Dr Nicola Byrom – Network Leader, SMaRteN
- Suzanne Carrie – Head of Student Equality and Welfare, Office for Students (OfS)
- 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)
- Jen Hope – Area Director (East Midlands) and Senior Policy Lead (Mental Health), Association of Colleges (AoC)
- Helen Megarry – Independent Adjudicator - The Office of the Independent Adjudicator (OIA)
- Dr Mark Shanahan – member, The LEARN Network
- Dominic Smithies – Head of Influencing and Communications, Student Minds
- Dr Dominique Thompson – Clinical Advisor, National Institute for Health and Care Excellence (NICE) and Student Minds
- Dr Kate Wicklow – Director of Policy and Strategy, GuildHE

Apologies

- Prathiba Chitsabesan – National Clinical Director for Children and Young People's Mental Health, NHS England
- Mark Ewins – Head of Mental Health, NHS England
- Peter Fonagy – National Clinical Advisor for Children and Young People's Mental Health, NHS England
- Polly Harrow – Further Education Student Support Champion

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- Matt Lee – Head of Children and Young People's Mental Health Policy, Department of Health and Social Care
- Jenny Shaw – Higher Education External Engagement Director, Unite Students
- Saranya Thambirajah – Vice President for Liberation and Equality, National Union of Students (NUS)

In Attendance

- Department for Education (DfE) officials

1. Welcome and Introduction

The Chair welcomed members.

2. Survey of HE Providers

The following updates were shared with Taskforce members:

- The Chair introduced the launch of a survey to higher education (HE) providers, with input from James Murray, HE leaders and JISC, aiming to understand current use of data analytics in student support across institutions. The survey follows a letter sent to providers, aiming to set the scene for the Taskforce's ongoing work and to prepare providers for future initiatives; this letter was shared with Taskforce members.
- The Chair highlighted that the letter includes an annex of resources from various organisations – including the Taskforce, parliamentary debates, the Office for Students (OfS), Universities UK (UUK), Association of Colleges (AOC), and Student Minds – to make it easier for vice chancellors to access relevant guidance and evidence without being overwhelmed by disparate documents.
- The Chair updated that survey results are expected within three to four weeks, with analysis to follow and findings to be discussed at the next meeting. The group agreed on the need to use the survey outcomes to inform future actions and to consider how best to utilise the information collected.

Taskforce members raised the following points:

- Several members praised the letter, survey and resource list annexed, one member emphasised the challenge of navigating the breadth of available resources, noting that while diversity is positive, it can be difficult for providers to identify which resources are most relevant. They stressed the importance of maintaining flexibility to suit different institutional contexts and the need for strategic leadership and evaluation in implementation.
- A member raised the importance of engaging university and college governors, audit committees, and academic councils in the governance of student support initiatives,

suggesting that clear structures and links to whistleblowing processes could enhance accountability and ease of implementation for non-expert committee members.

3. Office for Students Statement of Expectations on Disability

Representatives from the OfS updated members of their plans to develop a principle-based statement of expectations for supporting disabled students, including those with mental health conditions. The statement will be developed collaboratively with the sector and stakeholders; it is intended to drive improvement without requiring providers to submit returns, but with an expectation of clear leadership decisions and compliance. The OfS welcomed future input from the Taskforce as the work develops.

Taskforce members raised the following points:

- Several members asked about alignment between the statement and existing frameworks, such as the Student Minds Charter, expressing concern that providers should not have to duplicate efforts. The OfS responded that, while a definitive position cannot be guaranteed until development progresses, the intention is for the statement to serve as a baseline and to be broadly consistent with established good practice.
- A member raised the question of coordination with other UK funding regulators. The OfS confirmed that communication is ongoing with counterparts in Scotland, Wales, and Northern Ireland, but noted it's remit is for England only. The OfS representative suggested that sector bodies like Universities UK could play a role in ensuring joined-up approaches.
- A member highlighted the importance of recognising the limits of what universities can provide, especially where responsibilities intersect with the NHS and Disabled Students' Allowance. The OfS agreed, emphasising the need for clear expectations and boundaries to ensure fairness for both providers and students.
- A member recommended that the statement consider differentiating between mild-to-moderate and complex mental health conditions, noting that current systems often treat all conditions similarly. The OfS acknowledged the complexity due to legal definitions and data coding but agreed to consider this feedback in the development process.

4. Discussion: What constitutes a reasonable baseline of institutional practice that could be expected of HEPs supporting students?

The Chair led a comprehensive discussion on whether the Taskforce should continue to establish a baseline of expectations or principles for HE providers regarding student mental health support. The Chair explained that, despite extensive guidance and reports, there remains significant variability in institutional practice and outcomes. He asked members whether there is a role for the Taskforce in developing a set of high-level principles or baseline expectations to clarify what constitutes reasonable provision, focusing on strategic leadership, explicit commitments, and measurable impact.

Taskforce members raised the following points:

- A member suggested structuring the baseline around outcomes for students and families, effectiveness of support, practice in building relationships, crisis management, and tracking of serious case reviews.
- A member advocated for coordination between the Taskforce's work and OfS regulatory statements to avoid survey fatigue and duplication.
- A member from the LEARN Network shared a draft 10-point baseline standard, developed alongside their network colleagues, as a starting point for discussion. The draft focusses on leadership governance and accountability, identification and support, communication and information sharing, staff training, culture, transparency and the whole-institution approach. The chair welcomed the draft and emphasised that any statement made by the Taskforce needs to be clear and succinct to ensure adoption from the sector.
- A member highlighted the challenge of assessing institutional culture and the importance of clarifying the limits of university responsibility, especially regarding students not known to services.
- A member cautioned against creating simplified frameworks that might undermine the more ambitious Student Minds Charter, and warned of the risks of overemphasising suicide prevention at the expense of broader cultural change.
- A member argued for distilling universally agreed principles of good practice that apply to all providers, rather than relying on voluntary adoption. She stressed that the principles themselves are not complicated and that accountability should not be opt-in.
- Members discussed the need for effective collaboration with the NHS and referenced existing toolkits and guidance on partnership working. The Chair encouraged building on existing resources rather than duplicating effort.
- The Chair summarised the meeting's outcomes, indicating that the team will consolidate the discussion and chat contributions, circulate notes, and prepare for further iterations and possible working groups to develop the baseline expectations. Members were encouraged to share additional resources, and to contact the Chair or DfE with further feedback or suggestions outside of meetings to ensure continued collaboration and refinement of the group's work.

5. Close

Draft minutes for this meeting will be sent ASAP. Members will be canvassed for availability for the next meeting.

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