UKMC Mental Health and Wellbeing Referral Policy

Date	Author	Summary of Changes	Version	Authorised
25/06/2025	Dr Razia	New policy for undergraduate student mental health and wellbeing referral	1 (25-26)	Academic Board
03/11/2026	Head of Wellbeing	• First-contact timescale after referral, with escalation for high-risk referrals (7.1.6) • Wellbeing Department records all referrals (9.1) • Review cycle aligned to two years • PATs and crisis contacts added • Legislation updated	2.0	Pending Academic Board Approval

Policy/Procedure Management and Responsibilities	
Policy/Procedure Owner	The policy is owned by the Student Experience Committee. Day-to-day implementation is delegated to the Wellbeing Department, and communication to the Registrar.
Equality Analysis	Equality Analysis to be refreshed for Version 2.0. Also to be reviewed by the EDI Committee. (TBC).
Effective From	November 2026
Next Review	December 2028
Internal/External	Internal – staff guidance (crisis contacts in Section 12 are also for students)
Document Location	UKMC | Policies and Legislation
Linked Documents	• Student Support and Wellbeing Policy • Vulnerable Student Support Policy • Support to Study Policy and Procedure • Disability Disclosure and Learning Support Policy • Safeguarding and Prevent Policy Code of Conduct • IT Data Protection and Data Security Policy • UKMC Inclusive Curriculum Framework • Equality Act 2010 • Data Protection Act 2018 and UK GDPR • Mental Health Act 1983 (as amended)
Dissemination Plan	• Published on the UKMC Policies and Legislation page. • Announced through communication bulletins, academic briefings, Course Directors, course coordination committees and faculty meetings. • Wellbeing Department staff briefed on the first-contact timescale and the escalation of high-risk referrals.
Accessibility	**Alternative formats available on request** quality@ukmc.ac.uk

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1. Policy Statement

1.1 UKMC is committed to supporting the mental health and wellbeing of its students. Good mental health supports academic success and personal development.

1.2 This policy guides staff on noticing concerns, responding to them and referring students to support.

2. Scope

2.1 This policy applies to all staff who work with students, including academic, administrative and support staff.

3. Purpose

3.1 This policy helps staff recognise when a student may be struggling and what to do so the student gets the right support.

3.2 It operates alongside the Inclusive Curriculum Framework. It covers noticing and referral only. Academic adjustments and learning support are handled under the Support to Study Policy and Procedure and the Disability Disclosure and Learning Support Policy.

4. Definitions

4.1 **Mental health difficulties** are emotional, psychological or behavioural difficulties that affect how a person functions, such as anxiety, depression, panic attacks, eating disorders or mood difficulties. They may be short- or long-term, and diagnosed or undiagnosed.

4.2 **A wellbeing concern** is a difficulty that affects wellbeing without a diagnosed condition, such as bereavement, relationship problems, money or housing worries, academic pressure or isolation.

4.3 **A crisis** is a situation with an immediate risk of harm to the student or others, or a severe emergency. Staff must not manage a crisis alone. They call the emergency services or contact the Safeguarding Team (7.2). During an emergency evacuation, staff follow any Personal Emergency Evacuation Plan (PEEP) the student has.

4.4 **Indicators.** Staff are not expected to diagnose. Signs that a student may need support include:

- **emotional or behavioural:** withdrawal, mood changes, hopelessness, irritability;
- **academic and attendance:** frequent absence, missed deadlines, reduced engagement, falling performance;
- **what the student says or writes:** feeling overwhelmed, indirect signs of distress, references to self-harm or suicide;
- **physical:** neglected self-care, tiredness, changes in sleep or appetite, signs of self-injury or substance use.

4.5 **High-risk indicators** must be reported urgently: suicidal thoughts or plans, self-harm, severe confusion or signs of psychosis, threats or harm to others, and a history of crisis or hospital admission.

4.6 **Notice and refer.** Staff stay calm, listen and show empathy; avoid assumptions and diagnosis; refer the student to the Wellbeing Department; and ask the Wellbeing Department or the Designated Safeguarding Lead for advice if they are unsure about risk.

5. Roles and Responsibilities

5.1 **All staff** watch for signs, listen with care and refer. They do not assess need, diagnose or decide academic support.

5.2 **Personal Academic Tutors (PATs)** are often the first to notice a concern. They follow the same notice-and-refer approach and stay in contact with the student after a referral.

5.3 **The Wellbeing Department** takes each referral forward, contacts the student (7.1.6), arranges internal or external support, and coordinates ongoing help.

5.4 **External services** such as GPs, NHS crisis teams and counsellors provide specialist, medical, emergency or long-term care beyond what UKMC provides.

5.5 This policy does not create, change or approve academic adjustments, Temporary Learning Agreements (TLAs) or Learning Support Plans (LSPs).

6. Identifying Concerns

6.1 Noticing early matters, but staff do not diagnose or manage conditions.

6.2 Signs may show in behaviour, engagement, what a student says, physical signs, or content in emails, work or online discussions.

6.3 **Deciding what to do.**

Level	Typical signs	Action
Monitor	Mild or occasional stress; still attending; feeling overwhelmed but open to support	Informal check-in, offer support, suggest the Wellbeing Department, keep a gentle eye on the student
Act	Not coping; often absent or unreachable; safety concerns; serious disclosures such as suicidal thoughts, harm or trauma; disruptive or crisis behaviour	Refer to the Wellbeing Department (Section 7), or contact the Safeguarding Team if there is a safeguarding concern
Immediate risk	Any high-risk indicator (4.5) with immediate danger	Call 999 and follow 7.2

6.4 Staff should raise a concern early. A check-in or referral is better than waiting.

6.5 Some difficulties, such as severe anxiety or panic attacks, may affect how a student responds in an emergency. Staff refer the student to the Wellbeing Department to consider whether a PEEP is needed.

7. Referral Process

7.1 Staff follow four steps: **Observe, Record, Discuss, Refer.**

7.1.1 **Observe.** Notice signs that a student is struggling and use professional judgement.

7.1.2 **Record.** Make brief, factual notes of what was said, done or noticed, with the date, time and context. Avoid assumptions.

7.1.3 **Discuss (if appropriate).** Where it feels safe and comfortable, check in gently and without judgement, tell the student about available services and offer help to access them.

7.1.4 **Refer.** Refer the student to the Wellbeing Department, using the facts in your notes, without assumptions or diagnosis.

7.1.5 **Documentation.** The Wellbeing Department records each referral, the steps taken, their timing and the agreed next steps. Records are stored securely under data protection law.

7.1.6 **First contact.** The Wellbeing Department will make a first attempt to contact the student within 5 working days of receiving a referral. If there is no response, it will try again 7 days and 14 days after the referral. If the student has not responded by day 14 and has given no prior notice, the referral is closed and the referring member of staff is told. Where the referral includes any high-

risk indicator in 4.5, the referral is not closed for non-response: the Wellbeing Department escalates it under 7.2.

7.2 **Immediate danger.** Call 999 or follow the Safeguarding procedures at once, and inform the Designated Safeguarding Lead or the person on duty.

8. Consent and Confidentiality

8.1 Staff explain the limits of confidentiality at the earliest appropriate point.

8.2 Confidentiality may be broken without consent where there is a clear and immediate risk to the student or others, or a serious safeguarding concern.

8.3 Information is shared only with the people or agencies who need it, such as the Designated Safeguarding Lead, mental health professionals, the emergency services, or the student's trusted contact under the Student Support and Wellbeing Policy, 10.5.

8.4 Every decision to share information, with the reasons and who received it, is recorded.

8.5 Staff must comply with the Data Protection Act 2018, UK GDPR and UKMC data protection policies.

9. Follow-up and Record Keeping

9.1 The Wellbeing Department records all referrals accurately and promptly. Where a referral is passed to the Safeguarding Team, the Safeguarding Team keeps its own record.

9.2 Records include the nature of the concern, the actions taken (including who was informed and when), any referrals made, consent details, and follow-up plans or check-in dates.

9.3 Records are stored securely under the Data Protection Act 2018 and UK GDPR.

9.4 Follow-up may include checking on the student's wellbeing, checking that services were accessed, and reviewing ongoing needs.

9.5 The Wellbeing Department coordinates with internal teams, including the student's PAT, and external professionals for continuity of care.

9.6 All follow-up actions are recorded to inform later decisions and reviews.

10. Training and Awareness

10.1 Staff who support student mental health and wellbeing complete training relevant to their role.

10.2 Mandatory training may include Mental Health First Aid, safeguarding children and adults, recognising signs of mental ill health, and responding to disclosures and making referrals.

10.3 Refresher training is kept up to date at intervals set by UKMC.

10.4 UKMC makes sure staff know the referral procedure, internal and external support, and their responsibilities for confidentiality, consent and safeguarding.

10.5 Managers and designated leads monitor training needs and completion.

11. Review and Monitoring

11.1 The Wellbeing Department oversees this policy.

11.2 It is reviewed every two years, or sooner if legislation, guidance or UKMC's structure changes significantly.

11.3 Reviews consider how well the policy works, feedback from staff and students, and alignment with good practice and legal duties.

11.4 Changes are communicated to all staff, with training or guidance where needed.

12. UKMC Points of Contact and Support

Wellbeing Department: Student.wellbeing@ukmc.ac.uk, or visit the Wellbeing Office at any campus during opening hours.

Out of hours or in a crisis:

- Emergency: call 999
- Urgent mental health support: call NHS 111 and choose option 2
- Samaritans: call 116 123 (free, 24 hours)
- Shout: text SHOUT to 85258

13. Related UKMC Policies

All are on the UKMC Policies and Legislation page.

- Student Support and Wellbeing Policy
- Vulnerable Student Support Policy
- Support to Study Policy and Procedure
- Disability Disclosure and Learning Support Policy
- Safeguarding and Prevent Policy Code of Conduct
- IT Data Protection and Data Security Policy

14. External Reference Points

- Equality Act 2010
- Data Protection Act 2018 and UK GDPR
- Mental Health Act 1983 (as amended)