



Mental Health Guidelines for Students

1. Purpose and Scope

Dundalk Institute of Technology (DkIT) is committed to being an inclusive student centred environment. It aims to provide a supportive environment that will help all students, including those with mental health difficulties to realise their academic potential. These Guidelines are primarily intended for the benefit of students attending DkIT and provide assistance to staff in supporting the mental well-being of all current and prospective students.

2. Aims

- To promote positive mental wellbeing among both students and staff at DkIT.
- To highlight DkIT's aim that all students function in a caring and supportive college environment.
- To acknowledge the fact that college life has the potential to both foster and challenge students' mental well-being.
- To highlight the fact that many people can experience a period of mental health difficulty or mental distress at some stage in their lives, and in doing so may go some way to reduce stigma.
- To inform student and staff's view of mental health in order to influence their approach to emotional distress and mental health problems.
- To ensure that students have confidence in accessing supports within DkIT should they experience mental health difficulties.
- To ensure that DkIT puts in place appropriate support services for students during periods of mental health difficulty or distress.
- To support staff who are involved in the support of emotionally distressed students.
- To create a transparent referral pathway for staff members who are supporting students experiencing emotional distress.

3. Legislation

These pieces of legislation set out the statutory requirements and duty of care in relation to persons with mental health issues including:

Mental Health Acts 2001, 2008:

These Acts provide for the involuntary admission of persons suffering from mental disorders and the independent review of such admissions.

Equal Status Acts 2000, 2008

A report by the Royal College of Psychiatrists, *The Mental Health of Students in Higher Education* (2003), found that third level students report more mental health problems than their peers:

‘Higher education is associated with significant stressors, including the emotional demands of transition from home and school to the less structured environment of college, independent study and examinations, and financial pressures’.

In 2012, ‘The My World Survey’, Ireland’s first comprehensive National Study of Youth Mental Health up to the age of 25, was released by Headstrong – the National Centre for Youth Mental Health in conjunction with University College Dublin School of Psychology. It showed that one third of young people have experienced mental health distress in their lives.

The following section provides some guidance in recognising mental health problems amongst this particularly vulnerable group.

5. Recognising Mental Health Problems

Although it is impossible for staff to make a diagnosis regarding a student’s mental health it can be useful to keep the following questions in mind in considering whether a student may be experiencing mental health difficulties and in deciding whether action is required:

- Have they told you they are experiencing mental health difficulties?
- Has anyone else indicated their concern for the student?
- Does the student regularly smell strongly of alcohol, cannabis or other strong chemicals?
- Are there marked changes in their behaviour? e.g. being quiet and withdrawn, being outspoken and aggressive, doing noticeably more or less work than usual?
- Has their mood substantially changed e.g. very up or down, lethargic, tearful?
- How long has the student been feeling/behaving like this (anyone can have a bad day but if this is persistent over time it may indicate difficulties)?

These kinds of concerns would indicate that it is appropriate to approach the student and voice your concerns in a sensitive and sympathetic way, and make them aware of the appropriate supports in the college.

The following provides some suggestions as to how to manage such situations:

Situation	Management
Panic	

<ul style="list-style-type: none"> • Incapacity to act • Intense apprehension/fear • Breathing, gasping • Feeling spaced out, dizzy • Fainting 	<p>Firm reassurance Re-breathe from cupped hands or paper bag. Breathe in to count of 4 and out to count of 8. Refer to Support Services.</p>
<p>Confusion</p> <ul style="list-style-type: none"> • Muddled, restless, irritable • May not co-operate • May be disorientated and fearful 	<p>Speak simply and clearly. Constantly reassure in friendly manner. Refer to Support Services.</p>
<p>Drowsiness</p> <ul style="list-style-type: none"> • Complete slowing down of mental/physical function • No spontaneity • Not able to interact 	<p>Student may hear what is being said, so reassure. Call ambulance and Security. Consult Medical Centre while waiting.</p>
<p>Memory Loss</p> <ul style="list-style-type: none"> • May be due to illness • If sudden, likely to be shock 	<p>Speak simply and clearly. Reassure student. Call medical services or take to Medical Centre.</p>
<p>Self Harm (e.g. cutting)</p> <ul style="list-style-type: none"> • Acute distress • Cry for help • Possibly suicidal 	<p>Do not criticise or judge. Ask if student wants to talk. Call for medical help if necessary. Refer to support services.</p>
<p>Suicide Attempt (e.g. Overdose)</p> <ul style="list-style-type: none"> • May have a previous history 	<p>Ring Medical Centre 042 9370777 and ask for ambulance. Follow procedures outlined in Critical Incident Response. Appendix 3.</p>

6. Responding to students with Mental Health Difficulties

If having talked things through with the student and it seems likely that they may need more immediate support then you could suggest that they get in contact with the support services. It may be appropriate that they call and make an appointment while they are with you or you could offer to accompany them to the relevant service.

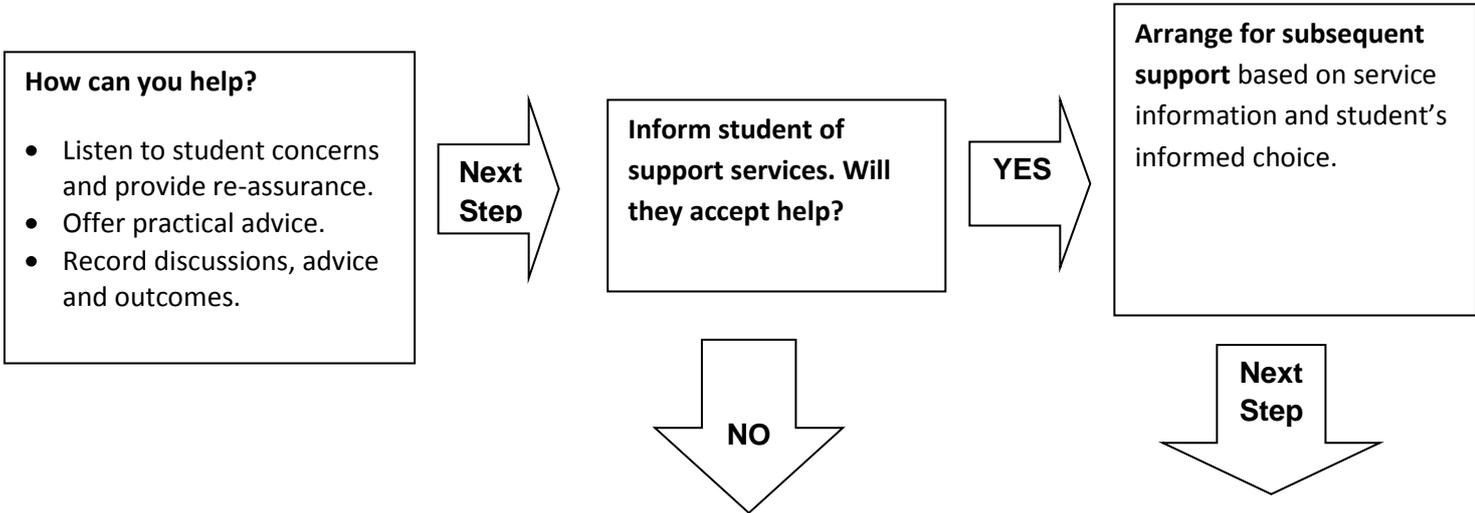
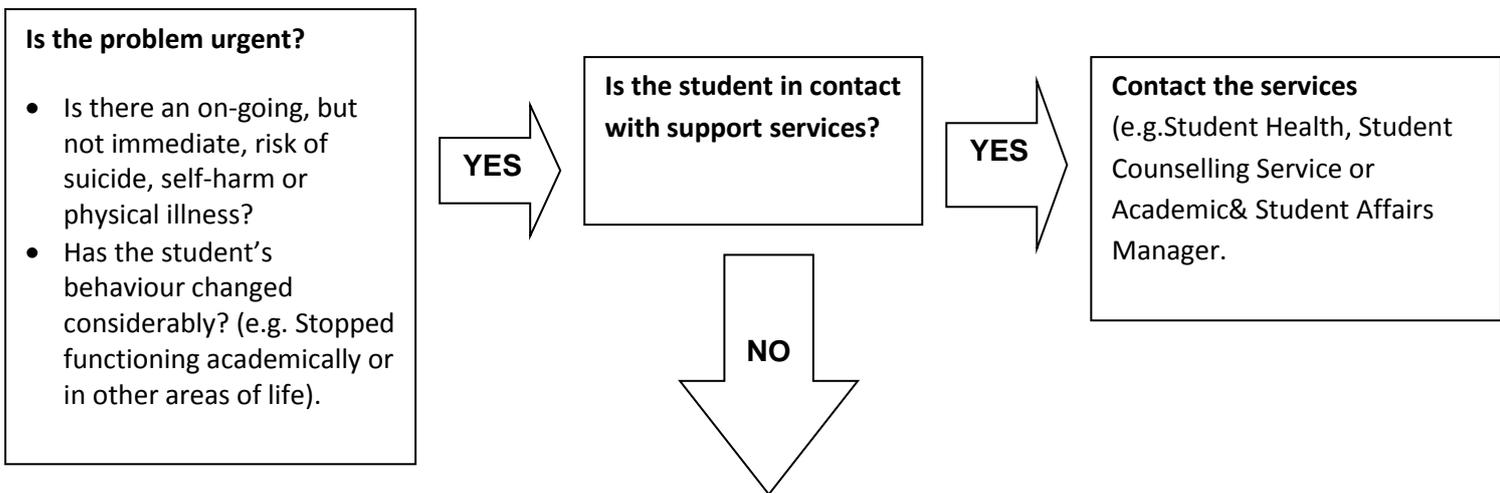
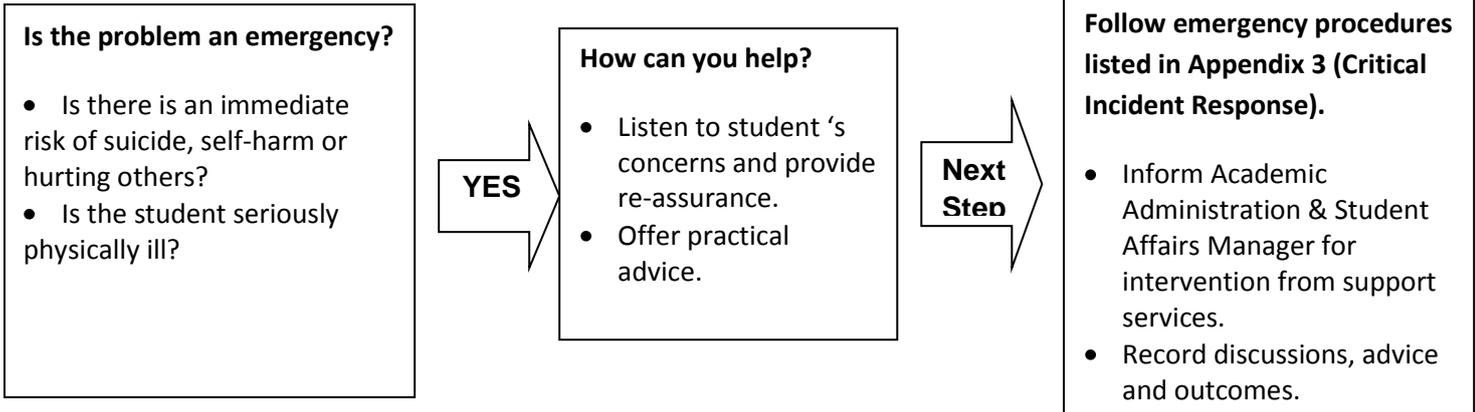
If the student declines any of these options you need to explain gently that you are concerned for them and that you are going to have to consult with the Student Health Unit or Student Counselling Service.

Allow the student in the first instance to choose who to contact. However it is a matter for the student whether to accept a referral and to avail of the supports offered.

If your concerns remain you can get support by discussing the situation, initially without mentioning any names, with the first person in Appendix 2. If not available go to the next person and so on.

If the incident is critical, where there is immediate risk to the student or to others, then the procedures outlined in Critical Incident Response ('Hostage taking or dealing with person(s) harming or threatening to harm staff member, student or members of the public within buildings or on campus' OR 'Dealing with a suicide attempt or threat of suicide) should be followed as outlined in Appendix 3.

The following chart provides suggestions as to the routes to follow when dealing with a student in distress:



Do you need further advice? Contact appropriate person on as outlined in Appendix 2

7. Respecting Confidentiality

Students with mental health difficulties will not seek help unless they know that the information they provide will be treated as confidential and that it will not harm their academic standing.

Due to the sensitive nature of information relating to the mental well being of any student it is imperative that where disclosures are made staff maintain appropriate levels of confidentiality. Information can only be made available to others if the student has specifically consented to this disclosure.

In exceptional circumstances confidentiality may need to be broken. These include:

- **Where it is felt that the student is a danger to themselves.**
- **Where it is felt that another person is at risk of harm.**

8. Taking time out

All students are bound by the Institutes Code of Conduct. If it is clear that a student's mental health is a cause for concern the support needs of the student should be ascertained before invoking the disciplinary code. If there is a health and safety concern for students or staff the disciplinary code may be invoked at any stage.

Procedures for students with mental health issues

- 8.1 If a student with mental health issues causes disturbance or distress to others the member of staff aware of the concern should liaise with the student and highlight the negative effect their behaviour is having on others. Information should be provided about sources of professional support and advice available within the Institute and externally.
- 8.2 If there are continuing concerns for the student which have not been resolved with pastoral supports a case conference should be called to discuss the most appropriate course of action. This initial case conference should include representation from the academic department, Medical Physician, Counselling Staff, Disability Office, and Students Union. The case conference could then adjourn, if required, and reconvene to allow representation from the student or their representative. The case conference should then provide recommendations to the Head of School and should consider options including continuation of studies with or without additional supports, timeout, withdrawal or temporary suspension. See section 8.4.
- 8.3 **Time Out/Withdrawal**
Students who are unable to continue their studies on health grounds may apply to their Head of Department to take time out, to defer or to withdraw from their programme. The application for a deferral on medical grounds should be accompanied by a medical certificate.
- 8.4 **Deferral/Suspension**
Where it is decided during the case conference, having considered representation, if any, as a student or a person on their behalf has made, that the student's behaviour

constitutes a health and safety danger to themselves and/or others the Academic Administration Student Affairs Manager (AASAM), on behalf of the case conference, should recommend to the Head of School to defer or suspend the student on health grounds.

8.5 Re-admission

Students wishing to return to College after obtaining a deferral on medical grounds or a suspension on medical grounds will be required to submit a medical certificate of fitness, for consideration, confirming that they are well enough to return to studies before being permitted to re-register with the Institute.

9. Promoting Positive Mental Health

Information about the support to students with mental health difficulties shall be provided in the Student Handbook and as part of the induction process both electronically and in hard copy format. The emphasis shall be in on the importance of seeking help at the earliest possible opportunity and of the confidentiality of personal information. A Mental Wellness Working Group shall be established to consist of representatives from across the student and staff community. This group shall develop a strategy to raise knowledge and awareness of the importance of mental health and well being.

Appendix 1: Definitions

Well-being implies the capacity to live for the most part in a fulfilling and engaged manner whereby the person is generally well resourced, optimistic about the future and has the resilience to work through the challenges and stressors that life presents.

Psychological/Emotional Difficulties can manifest as a reaction to a stressful life event or external pressure(s). The individual may be overwhelmed and struggling to cope, or *perceive* that they do not have the requisite resources to meet the demands of the stressor. Feelings, thoughts, behaviours, and physical well-being can be adversely impacted and can affect the person's ability to function. A number of variables can play a part in determining how persistent these difficulties are.

Psychological/Emotional Distress describes the experience of *severe* mental health difficulties. Feelings, thoughts, behaviours, and physical-well-being are adversely impacted to such an extent that the individual's capacity to function on a daily basis is substantially impaired. The individual's behaviour may cause grave concern to others around him/her and the individual may or may not recognise their behaviour as problematic.

Appendix 2: Relevant Contact Persons

If you wish to discuss a student's mental wellbeing, please refer to the below diagram and contact the first on the list and if they are not available, the next person down and so on:

Student Health Unit
042 937077
Ext 2777



Student Counselling Services
042 9370247
Ext 2247



Academic Administration & Student Affairs Manager
042 9370207
Ext 2783



Out of Hours Doctor
042 9320038



Emergency Services
999

Appendix 3: Critical Incident Response

Reference: DkIT Crisis Management Plan

https://ww2.dkit.ie/about_dkit/health_safety/crisis_management_plan

1 <i>Hostage taking or dealing with person(s) harming or threatening to harm staff member, student or members of the public within buildings or on campus.</i>

- (a) **CMT is contacted by President's Office and members to assemble in the Room** designated as the Incident Room (IR) for the duration of the Emergency.
- (b) **The President (or agreed reserve(s)) will chair the CMT** and make decisions on specific actions as per checklist at (c) below.
- (c) **Implementation Check List**
 - (1) Check and record CMT attendance and identify any designated area/person not represented that needs to be involved and make necessary contact to alert, substitute or replacement.
 - (2) Establish and record the facts available about the incident and steps taken to date.
 - (3) The CMT will nominate one of its members to attend the accident/incident location (if appropriate) and report back to it. A landline or mobile phone number will be agreed for all contact with the IR.
 - (4) If appropriate the CMT will arrange to have a recorded information message placed on the automatic telephone answering system and a similar message placed on the main DkIT website – front page.
 - (5) If appropriate the CMT should assign caretakers to each of the three campus entrances to liaise with Gardai and/or other emergency services arriving on campus.
 - (6) If not already done contact the Gardai and act upon their advice.
 - (7) If appropriate check all Lifts to ensure persons are not trapped in lifts, particularly in those areas or buildings that may be affected by the incident.
 - (8) Assist Gardai with any building or area isolation or evacuation necessary and advised.
 - (9) It will be important to cordon off the area affected and to avoid students, staff or others from exiting the area when the incident is occurring. The Gardai's advice should be sought on how best to block access.
 - (10) Make a room available for use by the Emergency Services and organise first aid and other Institute medical and counselling support staff to be available to assist. Suitable rooms in each building are listed at Appendix 3.
 - (11) On no condition should the person causing the incident be approached or challenged. All interactions are the responsibility of the Gardai and every support requested should be provided.

- (12) In liaison with the Gardai the protocol for dealing with contacting any of the families of staff, students or members of the public directly affected by the incident should be agreed.
- (13) Similarly the protocol for issuing Media statements on the incident (and the content of these) should be agreed with the Gardai.
- (14) Monitor national and/or international on-line media (eg RTE News, Sky News, CNN, etc.) for updates if appropriate to provide information to the CMT.
- (15) The CMT should ascertain the effect of the incident on the restoration of normal operations and contingency plans should be discussed and agreed including any necessary for examinations (*Appendix 5*).
- (16) The effect on external events should also be considered and organisations affected contacted if necessary.
- (17) Staff and students should be contacted regarding the incident and the resumption of operations. Depending on the nature and outcome of the incident and the impact of it on staff and students specific post-trauma counselling and support services should be organised by the CMT with the input of appropriate external experts.
- (18) The Institute's Insurers should be informed of the incident.
- (19) Relevant H&S incident reports should be completed and processed.
- (20) Once the incident is addressed the CMT should have a final wind up meeting at which agreed future discrete actions are agreed. It may also be necessary to reconvene the CMT within days to discuss follow up actions. This is to be agreed before CMT is stood down

2. *Suicide or Suicide threat.*

- (a) Crisis Management Team (CMT) is contacted by President's Office and members to assemble in the Room designated as the Incident Room (IR) for the duration of the Emergency.
- (b) The President (or agreed reserve(s)) will chair the CMT and make decisions on specific actions as per checklist at (c) below.
- (c) **Implementation Check List**

(A) If a Suicide has already occurred:

- (1) Check and record CMT attendance and identify any designated area/person not represented that needs to be involved and make necessary contact to alert substitute or replacement.
- (2) Establish and record the facts available about the incident and the steps taken to date.
- (3) The Chair of the CMT will assign responsibilities to members so as to efficiently and effectively carry out agreed actions.
- (4) The CMT will nominate one of its members to attend the incident location (if appropriate) and report back to it. A landline or mobile phone number will be agreed for all contact with the IR.

- (5) If appropriate the CMT will arrange to have a recorded information message placed on the automatic telephone answering system and a similar message placed on the main DkIT website – front page.
- (6) Establish if the Gardai and relevant emergency services have been contacted and if they are on site. If not contacted, or additional emergency services need to be informed, this should be done.
- (7) If appropriate the CMT should assign caretakers/security or other staff to each of the building/campus entrances to liaise with the Gardai and/or other emergency services arriving on campus.
- (8) If requested by the Gardai and/or Emergency Services ensure that the room or area where the incident has occurred is cleared of all but emergency personnel and relevant Institute personnel and the area is cordoned off if necessary.
- (9) Ensure that access to the area of the incident is possible for all emergency services.
- (10) Establish if any service provider or contractor is required to attend and if so activate call out through the Estates Management representative on CMT.
- (11) Contact next of kin and involve counselling support staff as appropriate.
- (12) Inform the Health and Safety Authority (HSA).
- (13) Issue e-mail to staff and students on the incident and actions being taken once agreed with the Gardai.
- (14) Arrange counselling or specialist trauma support services for those who were present or witnessed the incident. A designated area/room(s) should be agreed for this. Emergency Room locations may be suitable and are identified at Appendix 3. Provide catering/beverage and any medical services deemed necessary.
- (15) Issue pro-forma initial statement and follow up statement(s) on the incident to the Media with the agreement of the Gardai (*Appendix 4 and 6*).
- (16) Monitor national and/or international on-line media (eg RTE News, Sky News, CNN, etc.) for updates if appropriate to provide information to the CMT.
- (17) Inform the Institute's Insurers of the incident.
- (18) Log the incident through the DkIT H&S Incident/Accident Report format.
- (19) Once the incident is addressed the CMT should have a final wind up meeting at which future actions are agreed. It may also be necessary to reconvene the CMT to discuss follow up actions. This is to be agreed before CMT is stood down.

(B) If there is a person on campus threatening suicide:

- (1) Check and record CMT attendance and identify any designated area/person not represented that needs to be involved and make necessary contact to alert substitute or replacement.
- (2) Establish and record the facts available about the incident.
- (3) The Chair of the CMT will assign responsibilities to members so as to efficiently and effectively carry out agreed actions.
- (4) The CMT will nominate one of its members to attend the incident location (if appropriate) and report back to it. A landline or mobile phone number will be agreed for all contact with the IR.

- (5) If appropriate the CMT will arrange to have a recorded information message placed on the automatic telephone answering system and a similar message placed on the main DkIT website – front page.
- (6) Establish if the Gardai and relevant emergency services have been contacted and if they are on site. If not contacted, or additional emergency services need to be informed, this should be done as soon as possible.
- (7) If appropriate the CMT should assign caretakers/security or other staff to each of the building and/or campus entrances to liaise with Gardai and/or other emergency services arriving on campus.
- (8) Ensure that the room or area where the incident is occurring is cleared of all but Gardai and relevant personnel as agreed with the Gardai and the area cordoned off if required.
- (9) Ensure that access to the area of the incident is possible for the Gardai and emergency services.
- (10) Agree with the Gardai/Emergency services if it is necessary to evacuate the area, building, etc and arrange to do this in an appropriate manner (ie it may not be appropriate to sound evacuation alarms and caretakers/security or other staff acting as wardens may be necessary).
- (11) Establish if any service provider or contractor is required to attend and if so activate call out through the Estates Management representative on CMT.
- (12) Liaise with emergency services and act upon their advice. The Gardai/Emergency services will engage whatever negotiation expertise as necessary and conduct dialogue with the person threatening suicide.
- (13) As appropriate contact next of kin and involve counselling staff if required but only on the advice of the Police and their negotiators.
- (14) Arrange counselling services for those who were present or have been traumatised by the incident through the relevant counselling services. A designated area/room should be agreed for this. Suitable rooms are designated at Appendix 3. Provide catering/beverage and any medical services or first aid deemed necessary.
- (15) Establish if the incident will impact on the course schedule/classes or external events and agree what contingency arrangements are necessary and what communications should be issued to staff, students and others affected (*Appendix 4*).
- (16) Prepare Media Statements (See Appendix 6) if required.
- (17) Monitor national and/or international on-line media (eg RTE News, Sky News, CNN, etc.) for updates if appropriate to provide information to the CMT.
- (18) Once the incident has been resolved relevant H&S Incident Report should be completed.
- (19) If appropriate insurers should also be informed once the incident is resolved.
- (20) CMT should have a final wind up meeting at which future actions are agreed. It may also be necessary to reconvene the CMT to discuss follow up actions. This is to be agreed before CMT is stood down.