

**POLICY FOR THE MANAGEMENT OF  
RISK ON CAMPUS DUE TO  
CHALLENGING BEHAVIOURS**

1.0	INTRODUCTION AND RATIONALE.....	4
2.0	REVIEW AND DISSEMINATION .....	4
3.0	PRINCIPLES AND RESPONSIBILITIES.....	5
3.1	Confidentiality .....	5
3.2	Duty of care .....	5
3.3	Roles and responsibilities of staff.....	5
3.4	Roles and responsibilities of students.....	6
3.5	The role of UWI Campus Security Services.....	6
3.6	The role and composition of the CARE Team.....	7
4.0	ZERO-TOLERANCE POLICY .....	7
5.0	PROCEDURES AND GUIDELINES .....	8
5.1	Levels of risk .....	8
5.2	Management of the threatening or potentially violent student.....	8
5.3	Management of the suicidal student .....	8
5.4	Management of the student unable to meet academic requirements .....	8
5.5	Management of the student who refuses help.....	8
6.0	DISCIPLINARY PROCEDURES .....	9
6.1	Disciplinary procedures where mental illness may be a factor.....	9
6.2	Disciplinary procedures where alcohol and/or other drug use may be a factor .....	10
7.0	RECOMMENDATIONS FOR THE IMPLEMENTATION OF THE POLICY .....	10
7.1	Emergency contact details during the ADMISSIONS process.....	10
7.2	A requirement to withdraw on medical grounds.....	10
Appendix 1:	Limits of Confidentiality.....	12
Appendix 2	Helping the Distressed Student: A guideline for faculty and staff.....	13
Appendix 3:	Responsibilities of the CARE Team .....	33

## **LIST OF ABBREVIATIONS**

CAPS	Counselling and Psychological Service
CARE	Campus Assessment, Response and Evaluation
DSSD	Division of Student Services and Development
HSU	Health Services Unit
SLDD	Student Life and Development Department

## **1.0 INTRODUCTION AND RATIONALE**

This policy has been developed to exercise The University of the West Indies, St Augustine Campus' duty of care under Human Rights and Equal Opportunities Acts. Several student matters have emerged that presented administrative dilemmas for which no clear guidelines exist. This policy focuses on the University's responsibility to provide reasonable protection for individuals and the Campus as a whole in situations where challenging behaviors pose considerable risk of danger to the individual and/or to others.

A proposal is made for the establishment of a Campus Assessment, Response and Evaluation (CARE) Team to review student matters, and to monitor and execute policy actions, in moderate to high risk cases where students pose a threat to themselves, staff, and other students on campus and where mental health needs may be a factor. Where mental health needs are identified, an overarching mental health policy will provide guidelines for the assistance and care of students and staff.

This policy will address and reflect the university's position on how such incidents are treated on campus, and clearly outline the procedures to be followed in a progressive manner. The policy is informed by existing University regulations and guidelines including, "*The Code of Principles and Responsibilities for Students*" and, "*Helping the distressed student: A guideline for faculty and staff*" (Appendix 2), as well as relevant procedures in use at other universities internationally.

## **2.0 REVIEW AND DISSEMINATION**

The policy will be formally reviewed biennially through the Office of the Deputy Principal, under whose purview this working group was convened. This review will include the evaluation of policy actions taken and training provided, as well as determining the extent of awareness of the policy among stakeholders and the resources allocated for policy implementation. The review may recommend that the policy be further monitored and updated as necessary.

The policy will be publicised using various media and methods, including workshops and seminars, to all academic and administrative staff, as well as Resident Assistants at the UWI Halls of Residence, Student Guild representatives and other peer support systems on campus.

## **3.0 PRINCIPLES AND RESPONSIBILITIES**

### **3.1 Confidentiality**

The University of the West Indies has a responsibility to protect each student's right to privacy. When it comes to mental health needs, it is essential that students feel that their details will be treated with discretion and will not harm their academic status. (See [Appendix 1: Limits of Confidentiality](#)). Any student or staff member involved in an evaluation of a student matter where mental health needs may be relevant will sign a confidentiality statement and may face disciplinary processes in line with the relevant guidelines and codes of conduct for any breaches of confidentiality.

### **3.2 Duty of care**

The University maintains its responsibility to maintain a safe environment for the campus community while balancing its concern for individual students. It acknowledges its duty to provide all students with the means of attaining academic achievement which may include providing support for students' mental health, within reason. Whilst every effort is made to support students in need, the duty of care owed by the University to the wider campus community takes priority where the behaviour of a student, with or without mental health difficulties, poses a significant threat to others.

Where a student's behaviour, due to a suspected or diagnosed mental illness, poses a threat to his/her own safety or that of others, or adversely impacts his/her academic performance, a temporary leave of absence on the grounds of ill health may be most appropriate. In such a case, the student must submit a report from a treating mental health professional confirming his/her fitness to return before resuming a programme of study. In cases where the student is reluctant to request a leave of absence, either due to a lack of insight or a refusal to seek appropriate support, or where support has been provided but where the threat to self or others continues, temporary or permanent exclusion may be considered.

### **3.3 Roles and responsibilities of staff**

Effective management of risk depends on the recognition of mental health needs and timely referral to support. While the majority of staff need not provide direct interventions for individual students, all staff need to be familiar with the professional supports available. This knowledge allows staff to recommend the appropriate support to students or to share their concerns with the relevant professionals. Faculty may find it helpful to speak with a colleague at the Counselling and Psychological Services (CAPS) for advice or refer to guidelines available (see Appendix 3: Helping the Distressed Student). Members of staff with more specialist roles will receive training.

Staff members are mandated to ensure that students' personal details are kept confidential when it comes to any verbal or written correspondence, including emails. Staff members are also obligated to follow the strict guidelines of confidentiality before disclosing any student's personal information to anyone within, or outside of, the University, including family members. The only exception to maintaining strict confidentiality is if there is a risk of imminent harm to the student or to others. In such circumstances staff members are then obligated to seek professional assistance and inform the student that he or she needs to consult with a third party (see Appendix 1: Limits of Confidentiality). It must be noted that knowledge of the commission of an offence

against the criminal laws of the country in which the campus is situated does not fall under the confidentiality guidelines and should be reported to the UWI Campus Security Services.

Risk of harm to self and others will play an essential role in determining how to respond. When concerns have been brought to the attention of the staff member, he/she can refer to the categories of low, moderate and high risk detailed in this document in determining the need for action (see Appendix 2: Helping the Distressed Student, Determining levels of risk, page 8). Reference is made to the action flow chart to aid decision-making in the light of reports or observations (see Appendix 2: Helping the Distressed Student, *Responding to Urgent Situations*, page 13).

When there is significant concern for a student's wellbeing or a considerable level of disturbance to others, staff members are responsible for documenting their observations and any actions taken. This must be shared with key personnel, such as the Deputy Dean for Student Affairs and/or the Counselling and Psychological Services (CAPS) who are in positions to follow up in a timely manner on the student's wellbeing (see Appendix 2: Helping the Distressed Student, *Documenting and reporting an incident*, page 19).

In cases of severe mental illness, physical violence, direct threats, risk of harm to self and/or to others, and gross misconduct, immediate action is required using the UWI Campus Security Services, the CAPS, the HSU, national health and psychiatric services, and the local police, where necessary. The incident and outcome must be documented by a Deputy Dean for Student Affairs and shared with the CARE Team for prompt support and management.

### **3.4 Roles and responsibilities of students**

All students registered with The University of the West Indies are subject to *The Code of Principles and Responsibilities for Students* which outlines the rights, obligations and responsibilities of students while they are members of The University of the West Indies community. This includes responsibility for taking reasonable steps towards appropriate self-care. Students are reminded that as part of the registration process with the University, they were required to provide relevant emergency contact information in the event of a personal or medical emergency. Students are encouraged to update such information on a periodic basis.

The student body are advised of the approved protocol for referring peers who are believed to be at risk and for reporting incidents and behaviours of concern. The Student Guild Council is encouraged to institute non-stigmatising and anti-discriminatory norms to support and protect students who may be experiencing mental health difficulties. This can be achieved through orientation programmes and support networks. While students are discouraged from intervening in situations that they are not equipped to handle (e.g. suicide ideation, self-injury, and violence), they ought not ignore or minimise incidents or actions of others, but report anything unusual or worrisome.

### **3.5 The role of UWI Campus Security Services**

Campus Security Services are available 24-hours a day, 7 days per week. In situations of moderate to high risk, when safety concerns are highest, or after regular working hours, their assistance may be warranted. If protective or emergency services are called directly for any reason, inform

Campus Security at the earliest opportunity. Reports of violent, threatening, or other disturbing behaviour should also be made to Campus Security Services for their intervention.

### **3.6 The role and composition of the Campus Assessment, Response, and Evaluation Team**

The primary purpose of the CARE Team is to assist in the management of students who may pose a significant risk to themselves or to others among the campus community (see [Appendix 3: Responsibilities of the CARE Team](#)). Each faculty's Deputy Dean for Student Matters will act as the primary liaison between the faculty and the CARE Team. The Campus Assessment, Response, and Evaluation Team consists of the following persons/representatives:

- The Deputy Principal
- The Registrar
- Two Faculty Deans
- an appointed member of the Student Guild or a specific alternate
- The Counselling and Psychological Service (CAPS)
- The Psychiatric Services
- The Health Services Unit (HSU)
- Student Life and Development Department (SLDD)
- Campus Security Service

The Deputy Principal, or his/her delegate, may be the committee chair. Provision must be made for a secretariat and confidential storage of all committee documentation.

All committee members must sign a confidentiality agreement and will face disciplinary procedures for any unauthorised breaches of confidentiality.

### **4.0 ZERO-TOLERANCE POLICY**

The Campus shall adopt a 'zero-tolerance' policy around certain behaviours that threaten the safety and security of the campus community, (whether in person, written correspondence, via telephone or any electronic means) including:

- hazing, ragging, grubbing, or any form of initiation
- bullying
- sexual harassment, stalking, or other intimidating behaviours
- verbal and/or physical abuse
- violence or threats of violence
- obscenity and public lewdness
- sexual assault
- aggravated assault
- drug possession
- weapon possession

Such reports shall be treated with grave importance and dealt with in accordance with the *Code of Principles and Responsibilities for Students* and the University's regulations.

## 5.0 PROCEDURES AND GUIDELINES

### 5.1 Levels of risk

In providing guidelines for the management of risk at the SAUWI, student behaviours are categorised into three levels of risk – low, moderate, and high risk. While each situation will be dealt with on a case-by-case basis, assessing the level of risk involved will help to determine the appropriate intervention. (See Appendix 2: Helping the Distressed Student, *Levels of Risk*, page 8 and *Responding to Urgent Situations*, page 13).

### 5.2 Management of the threatening or potentially violent student

Encounters with students that leave you uneasy or frightened should be taken very seriously. Such behaviours can indicate the presence of underlying issues in some cases. The threatening or potentially violent student will be considered to be of moderate or high risk. Thus, the relevant protocols should be followed. It is not recommended that you meet with a threatening or potentially violent student. However, if the situation arises, consult with Campus Security Services and/or a counsellor at the CAPS beforehand.

### 5.3 Management of the suicidal student

Any student indicating suicidal thoughts or behaviours should be referred to the Counselling and Psychological Service (CAPS) for an immediate assessment. Staff may accompany the student to the CAPS or make the call to the CAPS together with the student, indicating the urgency of the situation. In cases where the student is reluctant or refuses to speak with anyone, staff should inform the student of the obligation to consult support services on his/her behalf. Please note that ***if a student is at risk of suicide, staff members are obliged to break confidentiality and report their concerns immediately.*** When the UWI support services are closed, Campus Security Services may provide transport to the emergency facilities (e.g. Eric Williams Medical Sciences Complex or St Ann's Hospital). The incident should then be documented and shared with your Deputy Dean for Student Matters and/or the CAPS the next day to enable appropriate follow up.

### 5.4 Management of the student unable to meet academic requirements

Where mental health needs are preventing a student from engaging with and achieving his/her academic goals, a temporary leave of absence on medical grounds may be most appropriate. If the student is reluctant to request a leave of absence, or may lack insight into his/her situation, and it is felt that the student is unlikely to progress despite available support, a temporary suspension on the grounds of ill health might be considered. The student will be required to submit documentation from a treating mental health professional confirming his/her ability to return to study before being allowed to re-register.

### 5.5 Management of the student who refuses help

In low risk situations, where recommendations have may be made to seek support services and a student has declined, this decision should be respected. However, in moderate to high risk cases, if the student denies any difficulty or refuses assistance, the member of staff should inform the student that, based on the level of concern, he/she has an obligation to seek assistance for the student's well-being. The staff member should consult with a counsellor at the CAPS for guidance and offer to contact someone on the student's behalf (e.g. a friend, relative, GP, or Residence Manager/Hall Supervisor).



The safety of everyone involved is paramount and the Campus Security Services should be called if there is a risk of imminent harm, either to the student or to someone else. If the situation warrants immediate, crisis intervention and the student has refused any help, contact your Deputy Dean for Student Matters, the CAPS and/or Campus Security Services for urgent assistance. Staff members are required to document their concerns, recommendations or actions taken (see [Appendix 3: Helping the Distressed Student: Incident Report Form, page 19](#)) and to share this with your Deputy Dean for Student Matters, and/or the Counselling and Psychological Service (CAPS) for timely follow-up.

## **6.0 DISCIPLINARY PROCEDURES**

### **6.1 Disciplinary procedures where mental illness may be a factor**

In the context of the UWI's community model in which all students have agreed to take responsibility for their conduct, it is appropriate for a student exhibiting unacceptable behaviour, irrespective of that student's health, to be subject to the student code of conduct. As such, cases of alleged or suspected misconduct will be dealt with according to the disciplinary procedures outlined in *The Code of Principles and Responsibilities for Students*.

Where mental health needs are known or suspected, disciplinary proceedings should be adjourned while the CARE Team refers the student to a mental health professional for assessment and guidance. This approach ensures that, as far as possible, the student is given an opportunity to access support and may facilitate a resolution without a full disciplinary procedure. Situations will be considered on a case-by-case basis, but even if there is evidence that the student has mental health needs, it may still be appropriate to invoke disciplinary procedures. The CARE Team may also review a confidential report of the student's mental health needs and may make recommendations to the disciplinary panel regarding appropriate measures focusing on the management of the student's behavior.

In instances where the authorised disciplinary panel proceeds, having taken an informed account of the relevance of the student's mental health needs to his/her behaviours, it is critical that, in reaching decisions regarding appropriate sanctions, care must be taken not to exaggerate the potential for risk, given a widespread culture which can stereotype mentally ill persons as *essentially* disruptive or violent.

Students have a right to refuse a referral for a mental health assessment. However, the relevant offices of the UWI reserve the right to proceed with disciplinary procedures *on the basis of the unacceptable behaviour* with or without the benefits of information regarding the possible impact of psychological factors on a student's behaviour. Whether or not a student has mental health needs, he/she remains subject to the Code of Conduct. In other words, the presence of a mental illness or other diagnosable condition does not lessen the University's duty of care to the campus community as a whole. When all reasonable adjustments have been made and significant risk to safety and well-being remains, the University reserves the right to consider temporary or permanent exclusion of the student posing that risk. This must be made clear to the student and the recommendation for a mental health assessment by a qualified professional is clearly documented.

## **6.2 Disciplinary procedures where alcohol and/or other drug use may be a factor**

The use of alcohol and other drugs is commonly associated with other problematic behaviours on campus. Verbally and physically abusive behaviours, vandalism, declining academic performance, sexual assault, suicidal and self-harm behaviours are all more likely to occur when there is a history of excessive alcohol/drug use. Most students who drink are not problem drinkers.

If alcohol or drug involvement is suspected to factor prominently in a student's behaviour of concern, similar procedures may be applied as above. Appropriate sanctions will be assessed in which students will be subject to disciplinary procedures as outlined in the Campus Alcohol Policy.

## **7.0 RECOMMENDATIONS FOR THE IMPLEMENTATION OF THE POLICY**

### **7.1 Emergency contact details during the ADMISSIONS process**

Note: currently the admissions form asks for (but does not require) an emergency contact; sometimes this is left blank. Recommended actions:

#### **7.1.1 To include a statement on the Admissions form:**

- *"Please provide the contact information for at least one person who should be contacted in the event of a personal or medical emergency. If your emergency contact resides abroad, please also provide a local emergency contact."*
- *"Please be mindful that failure to provide or update your emergency contact information may prevent the UWI from providing adequate support in the event that you experience a personal or medical emergency."*

#### **7.1.2 To broaden access and foreign call privileges to key members of the CARE team:**

- Deans & Deputy Deans for Student Matters
- Deputy Principal
- Director, DSSD
- Coordinator, CAPS
- Manager, SLDD
- Head, HSU

#### **7.1.3 CITS/IT REGISTRY to generate an email to all registered students each semester:**

- *"Please review your emergency contact information and update it, if necessary. Please be mindful that failure to provide or update your emergency contact information may prevent the UWI from providing adequate support in the event that you experience a personal or medical emergency."*

### **7.2 A requirement to withdraw on medical grounds**

Currently, there is no provision for the UWI to mandate a LOA for a student who may pose a moderate to high risk of harm to himself/herself or to others, and who may refuse a recommended LOA or offer of treatment and support. Recommended actions:

#### **7.2.1 To introduce the authority to mandate a Leave of Absence for a specified time period on medical grounds if moderate to high risk of harm to self or others persists.**

- This may occur for the following reasons:

- If the student has agreed to a mental health assessment and has subsequently been unable or unwilling to follow treatment recommendations; or
  - Treatment has failed to resolve the risk posed; or
  - The student has refused to engage in any mental health assessment or treatment options available.
- This is for the safety of a student, or of others, where a student refuses recommendations of a LOA and/or of support and treatment This is for exceptional circumstances where all therapeutic engagement options have been exhausted.

If the student has refused a mental health assessment by a qualified professional, the CARE team can review the incident report and make an informed decision.

### **7.2.2 To introduce a Hold**

- This is to facilitate Re-registration, which requires the student to submit documentation from an appropriate mental health professional confirming his/her fitness to return to a study programme.

## **APPENDIX 1: LIMITS OF CONFIDENTIALITY**

The University of the West Indies agrees to protect each student's right to privacy. Essentially, students have a reasonable expectation that their personal details will be held in strictest confidence with regard to any verbal or written communication with a third party. This includes telephone conversations as well as any written correspondence, including emails. In the event that a staff member decides to provide direct support or intervene on a student's behalf, that staff member should seek a student's permission before sharing any information about the student's situation to anyone within The University of the West Indies or to individuals outside of the campus community, including family members.

In cases where a staff member is concerned about a student's welfare it is advisable to share your concerns with a colleague in the Counselling and Psychological Service (CAPS) in confidence.

If a staff member feels that there is a risk of imminent harm, either to the student or to someone else, he/she has an obligation to seek help for that student, with or without the student's consent. Specifically, if a student is felt to be at risk of suicide, staff members have an institutional obligation to break confidentiality and intervene on the student's behalf by contacting a colleague at the CAPS or the HSU who can assess his/her risk immediately.

Firstly, if time allows, staff members are advised to consult with a CAPS counsellor about the appropriateness of breaking confidentiality. Secondly, let the student know that there is a need to involve others for his/her well-being. Ask the student who he/she thinks should be contacted (e.g. a relative, counsellor, family doctor). An element of choice communicates respect and consideration and is critical when family members may be contributing to the distress.

It is recommended that staff members wishing to assist a student in distress explain the limits of confidentiality, to build confidence and encourage open communication.

## **APPENDIX 2 HELPING THE DISTRESSED STUDENT: A GUIDELINE FOR FACULTY AND STAFF**

Supporting students in distress	1
Counselling & Psychological Services at the UWI	2
Your role and responsibilities	3
Offering support to a student	4
Assessing whether there is a problem	6
Deciding what sort of support is needed	7
Determining levels of risk	8
Helpful contacts	11
Responding to situations that are not urgent	12
Responding to URGENT situations	13
Responding to a student in crisis	14
Responding to potentially suicidal students	15
Responding to challenging behaviours	16
Incident Report Form	19

## **1.0 SUPPORTING STUDENTS IN DISTRESS**

### **Introduction**

From time to time, you will encounter students in distress. Perhaps their difficulties may manifest in poor academic performance, they may approach you to speak about non-academic concerns, or you may hear reports from colleagues or other students who have observed behaviours that are worrying.

Our students' health and wellbeing is everyone's concern. Supporting a student in distress requires some simple skills and knowledge of services available to which you may refer him/her for more support.

**Early identification increases the chance that the student will access the appropriate support and ultimately, achieve his/her academic goals.**

Staff at the Division of Student Services and Development (DSSD) and the Counselling and Psychological Services (CAPS) are always available to discuss any concerns you may have about a student. In addition, each faculty appoints a Deputy Dean responsible for student matters and for liaising with the appropriate support services.

### **These Guidelines will:**

- Help you to recognise a problem
- Raise your awareness of issues regarding mental health
- Guide you on how to respond to various situations
- Outline support services available
- Assist you in documenting concerns and incidents for follow up
- Explain your responsibilities for maintaining confidentiality

### **What you can do:**

- Listen
- Allow the student time to talk
- Consider the situation from the student's point of view
- Be empathic and nonjudgmental
- Avoid minimising or dismissing the student's concerns
- Guide the student towards appropriate support available
- Consult with support staff whenever you are unsure of what to do

### **What you cannot do:**

- Solve or fix the student's problems
- Take responsibility for the student or his/her behaviours

## **2.0 COUNSELLING & PSYCHOLOGICAL SERVICES AT THE UWI**

The Counselling & Psychological Services (CAPS) offer free and confidential counselling to all registered UWI students. Counsellors are available for therapy for individuals, couples, and families, as well as crisis intervention and assessment.

Counsellors work by appointment; students can email, call, or walk in to book a session with a counsellor. The CAPS is a strictly voluntary service so while friends, family, or staff members may encourage a student seek support, the student must book his/her own appointment directly with the CAPS staff.

Students are prioritised according to clinical need and those that may be experiencing suicidal feelings are assessed immediately. During busy times, there may be a wait time to speak with a counsellor, so if a student's situation is urgent, it is important that the CAPS staff are made aware so that he/she may be accommodated as soon as possible.

While the counselling services are offered exclusively to UWI students, the CAPS offer consultation to UWI staff on any student matter. If you are worried about a student, you may call or email to discuss the situation with a counsellor in confidence.

In terms of materials that may assist you in supporting your students, CAPS provide posters, call cards, and a number of self-help information leaflets covering a range of topics including:

- Anxiety: don't let it limit you
- Depression
- Understanding grief and how to cope with it
- Controlling anger, before it controls you
- A guide to managing stress
- Posttraumatic stress disorder
- Deliberate self-harm
- Understanding bipolar disorder
- Sexual assault
- Eating disorders: when food becomes the enemy

### 3.0 YOUR ROLE AND RESPONSIBILITIES

#### Identifying Appropriate Support

Many students will experience typical developmental challenges during their time at university and the majority of students will not require professional intervention. However, there is a significant prevalence of psychological difficulty among our student population and it may be useful to consider:

- 1 in 3 students report significant symptoms of depression and almost 50% acknowledge having had suicidal feelings<sup>1</sup>;
- approximately 5% of students accessing the counselling services do so as a result of experiencing a trauma during their time at university<sup>2</sup>;
- others cope with ongoing abusive situations in their private lives
- major mental illnesses often manifest for the first time among individuals 18-25 years old;
- the stigma associated with mental illness leaves many reluctant to engage in support services.

It is not always easy to decide what sort of support the student needs; sometimes the student is not entirely forthcoming or there may be multiple needs and it is unclear which takes priority. The most important thing to do it to convey the usefulness of accessing support and find out which type of support or service the student feels most comfortable engaging with in the first instance. Additional services may get involved later, as needed.

#### Maintaining confidentiality

Students experiencing personal difficulties are less likely to seek professional help unless they trust that their information will be treated confidentially and will not harm their academic status. This is particularly the case with psychological difficulties, given the stigma attached to mental illness.

**Staff members are responsible for maintaining confidentiality at all times** by keeping the student's identity and the details of his/her situation private, unless the student has given you explicit permission to share certain information. This pertains to telephone conversations and written correspondence, including emails, to colleagues or anyone outside of the University, including the student's family members.

When you are worried about a student, it can be helpful to discuss your concerns with colleagues who may have observed similar behaviours in other contexts or who may help you to decide how best to assist. In this case, information should be limited to specific, observable behaviours and always shared with discretion, avoiding conjecture about possible mental illness. As a general rule of thumb, you should:

- **only share student's personal information with those individuals who are directly involved and responsible for following up on the student's welfare**

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<sup>1</sup> The Healthy Minds survey (Wall, Hutchinson, & Ramsaran, 2014) assessed the prevalence of depression among undergraduates at the St Augustine campus of the UWI

<sup>2</sup> The Counselling & Psychological Services audit of first-time service users, 2012/13



- ask the student's permission before disclosing his/her information with others who may be able to help, once the situation is not urgent.

However, if you have reason to believe that the student poses an imminent risk to himself/herself or to someone else, you must share your concerns with key support staff who can follow up immediately (e.g. your Deputy Dean for student matters, staff at the CAPS or the HSU). For example, the student may express suicidal wishes or make specific threats against someone else, he/she may seem incoherent or disconnected from reality, or there may be a recent history of physical violence.

Remember that knowledge of a criminal act, or the potential for such, must be reported to police.

**When there is significant concern for the student's safety or that of others, staff members are obliged to seek urgent help, with or without the student's permission.**

Firstly, let the student know that your priority is his/her safety and wellbeing and that you need to share information with others who can help. Secondly, if time allows, you might consult with a CAPS counsellor about the appropriateness of breaking confidentiality. Finally, you might ask if there is someone the student would like you to contact on his/her behalf (e.g. a friend, a family member, counsellor, or GP).

**Staff members responsible for unauthorised disclosure of students' information may face disciplinary action and other penalties.** So, if you are at all uncertain, colleagues at the Counselling and Psychological Service (CAPS) are always available for confidential consultation and guidance.

### **Some helpful DOs and DON'Ts**

When relating a concern or a recent incident:

- ensure your conversation is not easily overheard
- keep the details anonymous avoiding personally identifying information unless it is necessary (e.g. *"I am worried about a final year male student in my tutorial group who seems unusually quiet and despondent"*)
- NEVER include the student's personal information in an email's subject; include *"confidential student matter"* instead and only identify the student in the body of the email if necessary for others to follow up
- limit an email's recipient list to those individuals with *direct responsibility* for the matter
- include a confidentiality statement at the end of any emails regarding student matters

If you receive any documentation regarding a student matter:

- ensure these are securely stored in locked filing cabinets or drawers and not easily accessible by individuals with access to your office space
- when viewing documents on your computer, do not leave confidential documents open on your computer screen when you are not at your desk; ensure your computer is password protected

Involvement of family members:

- In some cases, relatives may be contributing to the student's distress and should not be automatically consulted without a student's permission; instead, ask the student who he/she prefers to be contacted in the case of an emergency

## 4.0 OFFERING SUPPORT TO A STUDENT

### 4.1 General advice

Each individual has his/her own style of interacting with others and different capacities for dealing with persons in distress. **It is important to know your own strengths and limitations as a helper.** Should you decide to help a student yourself:

- **Request to see the student in private**  
Try to provide a private space where you will not be interrupted by passers-by or phone calls and can offer your full attention.
- **Communicate empathy & positive regard**  
Be open and let the student know that you are worried and genuinely interested in hearing what's going on with him/her. Speak about what you have noticed in behavioural terms (e.g., *"I notice that you are much less engaged in tutorials than before"*, *"I've noticed a change in your writing"*). Just communicating your interest in the student is often much appreciated.
- **Avoid judgment or criticism**  
Speak directly and openly about your concerns without being critical (e.g. *"I noticed that you have missed some classes recently and I'm concerned about you"* rather than, *"how do you expect to understand when you don't even attend class?"*) Avoid criticising how he/she is handling things (e.g. *"your degree should be your first priority"*). It may be more helpful to ask open questions about how he/she is coping (e.g. *"what makes it easier/more difficult to focus on your studies at home?"*)
- **Use active listening & observation**  
Careful listening and observation will help you assess the nature and severity of the problem. Communicate your understanding by reflecting back the essence of what the student has said, to check you have got it right (e.g. *"It sounds like you've been dealing with some personal problems that have started to feel overwhelming"*). Pay attention to non-verbal cues (e.g. tone of voice, body language) and not just to what is being said.
- **Assess current support**  
Ask if the student is talking with anyone (friends, family, classmates) about the problem. Be aware that those in distress tend to socially isolate themselves but that this is rarely a useful strategy. This may be an opening to suggest the advantages of talking with someone who is neither a friend nor family member (e.g. *"sounds like you are reluctant to burden friends - think you might find it helpful to speak with a counsellor?"*; *"a counsellor can be more objective and able to put your concerns first"*).

## 4.2 Deciding when to refer the student

Guidelines are provided to help you to assess the seriousness of the students' situation (see Determining levels of risk, page 8). When the situation becomes more serious than you feel comfortable handling, you might consider encouraging the student to speak with a professional. Some situations may include:

- you are extremely busy or stressed yourself
- you have helped as much as you can but the student remains in distress
- you are worried that your personal feelings may interfere with your objectivity
- the student is asking for help that you cannot provide or requires practical assistance available from services on- or off-campus
- the student admits there is a problem but is reluctant to discuss it further
- the student has expressed thoughts of suicide

If a student expresses feelings of suicide, you must let him/her know that, based on your concerns for his/her safety, you are obliged to contact a counsellor. You might phone the CAPS together with the student, or walk him/her to the CAPS offices where a counsellor will conduct a risk assessment and discuss support options.

## 4.3 Helping the helper

When assisting students in distress there are a few points to remember:

- maintain healthy limits and avoid extending yourself beyond your comfort level in terms of involvement, skills, and time commitment
- ensure clear and consistent boundaries with students
- be explicit about what help you can and cannot provide

Dealing with difficult or traumatic situations and challenging behaviours may impact on you personally. It is not unusual to experience a range of different emotions after dealing with a distressed student. For example, you may feel sad, helpless, frustrated, shocked, or angry. It is very important that you look after yourself to avoid feeling burnt out. The Employee Assistance Programme<sup>3</sup> provides free and confidential support for staff via the Human Resources department.

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<sup>3</sup> for more information see <https://sta.uwi.edu/hr/EmployeeAssistanceProgram.asp>

## 5.0 ASSESSING WHETHER THERE IS A PROBLEM

### Is the student's behaviour causing concern?

- Has the student told you there is a problem?
- Have you noticed any odd or unusual behaviours that have left you feeling uneasy?

### Have you noticed the student:

- Tense, irritable, fidgety, or agitated
- Anxious, panicky
- Sad, tearful or "flat" and unresponsive
- Chronically sleepy or tired; withdrawn or unusually quiet
- Smelling of alcohol or cannabis
- Struggling to concentrate or follow a discussion
- Talking incoherently or seeming "not very present"
- Overly loud, argumentative or disinhibited
- Behaving erratically or behaving in an intimidating or threatening way

### What other information have you received?

- The student has acknowledged a personal issue or a psychological illness
- He/she is underperforming or may be placed on academic warning
- Classmates or colleagues have shared their concerns

### Do your observations represent a difference compared to your previous experiences with the student?

For instance, academic performance has declined; noticeable weight changes; significant changes in behaviour or engagement in class

### Do you need to get more information from the student?

How is he/she is feeling? Has something happened recently to cause any distress? What, if anything, might he/she find helpful?

### Would you find it helpful to consult with colleagues, your Head of Department or colleagues at the Student Support Services?

- Have your colleagues noticed similar behaviours?
- Colleagues at the Counselling and Psychological Service (CAPS) can discuss your concerns and consider some helpful options

## 6.0 DECIDING WHAT SORT OF SUPPORT IS NEEDED

Difficulty	Helpful contacts
<p><b>Student is worried about academic problems</b>, is feeling overwhelmed and not doing well. What might be helpful:</p> <ul style="list-style-type: none"> <li>• focusing and setting goals; time management; peer tutoring, study skills assessment</li> </ul>	SLDD
<p>The problem may be related to difficulty concentrating; low mood or energy; sleep problems; lack of confidence; persistent sad or “flat” mood or irritability</p>	CAPS HSU
<p><b>Is the difficulty linked to a particular learning challenge or disability, including mental health needs?</b> What might be helpful:</p> <ul style="list-style-type: none"> <li>• an assessment for accommodation and support</li> </ul>	SLDD
<p><b>Student is feeling demotivated or worried about career possibilities.</b> What might be helpful:</p> <ul style="list-style-type: none"> <li>• guidance on further study or career options; help with CV/interview skills</li> </ul>	CCC
<p>Student is struggling with spiritual issues, loneliness, bullying, or cannot settle into life at university</p>	Chaplaincy CAPS
<p><b>The student is from overseas</b> and is struggling to settle on campus. Or the <b>student is a mature student</b> who is finding it hard to manage.</p>	SLDD
<p>Student has shared issues regarding relationship problems, stalking or domestic abuse; bereavement; recent trauma or assault; depression, panic attacks or other mental health diagnosis; worries about addictive behaviours such as gaming</p>	CAPS HSU
<p><b>Is there a practical problem such as accommodation issues or lack of finances?</b> What might be helpful:</p> <ul style="list-style-type: none"> <li>• accommodations options on- and off-campus</li> <li>• financial advice or loans; scholarships and bursaries; part-time employment</li> </ul>	SAO FAS
<p><b>Is there a health problem?</b> Is the student worried about his/her use of drugs and/or alcohol, or a sexual concern?</p>	HSU
<p><b>Student is considering a leave of absence</b></p>	CAPS Deputy Dean

## 7.0 DETERMINING LEVELS OF RISK

In providing guidelines for the management of risk on the St. Augustine Campus, student behaviours are categorized into low, moderate, and high levels of risk that will determine the appropriate intervention:

LOW RISK
<p><b>An occurrence, or the potential for an occurrence, that could be considered routine.</b></p> <p>In these cases:</p> <ul style="list-style-type: none"><li>• the potential for harm to self or others is negligible</li><li>• the impact on social and/or academic functioning is minimal and short-lived</li><li>• the individual has appropriate insight into the stressor and his/her response.</li></ul> <p>Examples of LOW risk:</p> <ul style="list-style-type: none"><li>➤ Distress, minor (e.g. temporary anxiety or depression)</li><li>➤ Culture shock , minor</li><li>➤ Homesickness, minor</li><li>➤ Appropriate responses to critical incidents (e.g. bereavement, family disturbance, medical emergency, accident, fire, crime)</li></ul>

MODERATE RISK
<p><b>An occurrence, or the potential for an occurrence, that requires a response beyond a routine capacity.</b> In these cases:</p> <ul style="list-style-type: none"><li>• there is potential for harm to self, or to others</li><li>• behaviours suggesting instability are present</li><li>• social and/or academic functioning is significantly impaired</li><li>• the individual may or may not recognize the risk posed by his/her behaviour</li></ul> <p>Examples of MODERATE risk:</p> <ul style="list-style-type: none"><li>➤ Evidence, or persistent complaints from others, of non-violent outbursts or acts of intolerance, discrimination, harassment<sup>4</sup>, bullying, hazing</li><li>➤ Persistent, unwarranted complaints from the student about abuse, harassment, discrimination etc</li><li>➤ Verbal abuse</li><li>➤ Excessive boisterousness</li><li>➤ Persistent or excessive demands on staff or others; inappropriate or excessive responses to constructive criticism; lack of appropriate personal or professional boundaries.</li></ul>

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<sup>4</sup> harassment includes, but is not limited to, persistent and/or threatening emails, text messages, voicemails etc.

## MODERATE RISK

- Vandalism, or threats to damage property
- Disruptive behavior (e.g. frequent confrontations with authority)
- Eating disordered behaviour (e.g. persistent over-eating, extreme diets or exercise regimes, sudden significant changes in weight)
- Evidence of alcohol/drug misuse (e.g. slurred speech, disorientation, reduced consciousness, unsteady gait, smells of alcohol or marijuana) or student's admission of moderate to heavy use of alcohol and/or drugs
- Self-mutilation (e.g. cutting, burning, head banging)
- Evidence of poor self-care
- Where there is a treatment programme in place, student's admission that he/she is no longer taking medication as prescribed
- Marked change in normal behaviour (e.g. lethargy, inattentiveness, social withdrawal, irritability, hyperactivity, marked distress, impulsivity, altered physical appearance, non-participation in, or domination of, class discussions)
- Marked change in academic functioning (e.g. tardiness, absenteeism, dishonesty, marked decline in academic performance, absence from examinations, frequent contact with lecturers for academic or non-academic assistance)
- Responses to critical incidents (e.g. bereavement, family disturbance, medical emergency, accident, fire, crime) that are considered excessive
- Thoughts about suicide, without current intent or any previous attempt

## HIGH RISK

**An extraordinary event, or the potential for an extraordinary event, that requires an urgent response beyond a routine capacity.** In these cases:

- either there is evidence of harm to self or to others, or the potential for harm to self or others is significant
- behaviours are present that suggest acute psychiatric illness and warrant urgent assessment
- there is evidence of markedly impaired social and/or academic functioning
- behaviours are illegal
- the individual may or may not recognize the risk posed by his/her behavior.

Examples of HIGH risk:

- Bizarre behaviours (e.g. talking to oneself, laughing for no apparent reason)
- Severe agitation; hysteria
- Student's speech is pressured and/or conversation or ideas are hard to follow; student may express some seemingly bizarre ideas (e.g. of persecution by others, extraordinary powers or skills)

## HIGH RISK

- Physical violence, or threats of
- Sexual assault, or attempt
- Suicide threat, or attempt
- Homicide threat, or attempt
- Evidence of psychiatric illness (e.g. severe depression, paranoia, delusions, psychosis)
- Any behaviours that warrant arrest
- Incapacitation or inability to care for self



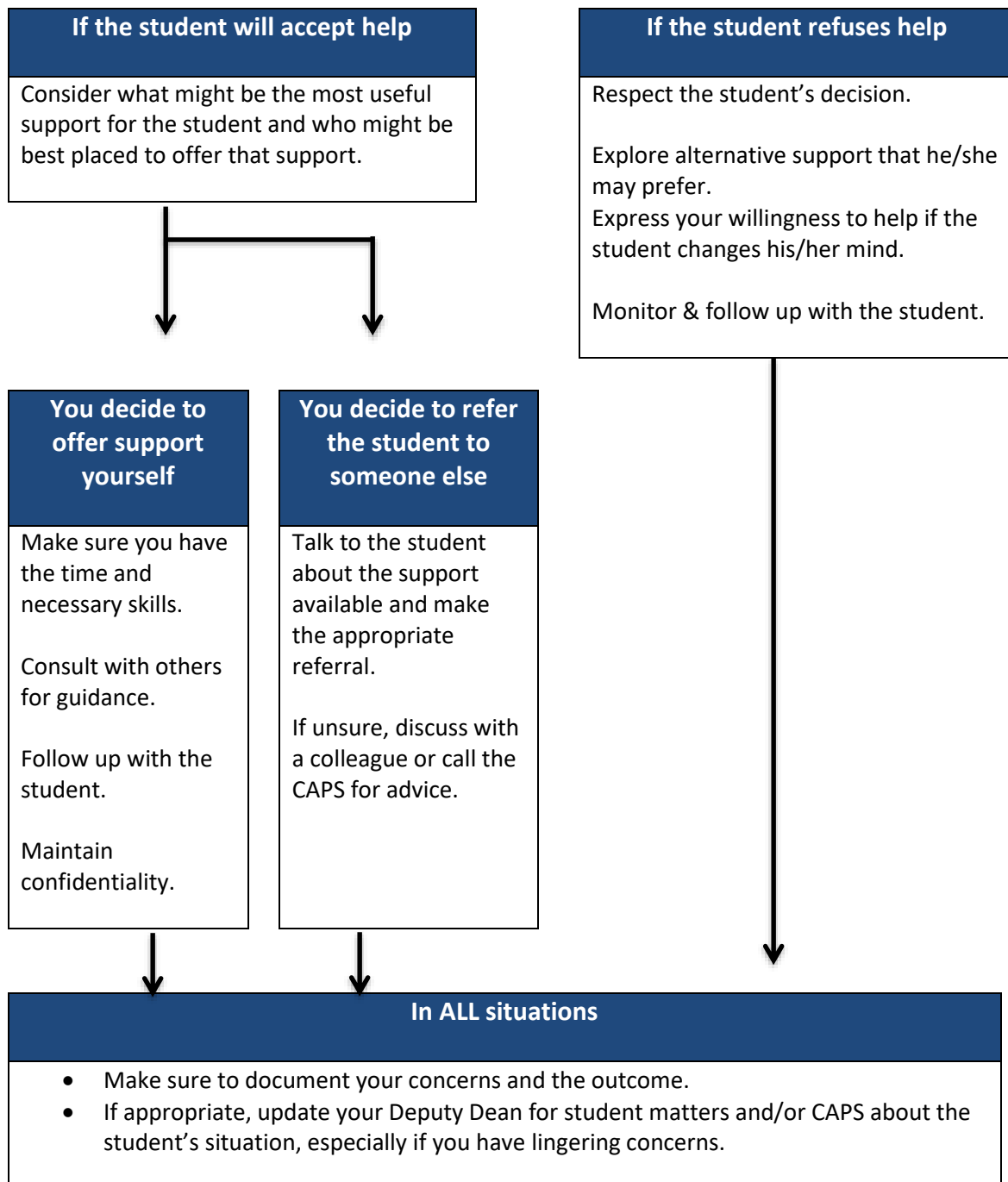
## 8.0 IMPORTANT CONTACT INFORMATION

Support services	Contact information
<p><b>AMBULANCE</b></p> <p><b>CAMPUS SECURITY SERVICES</b></p> <p><b>DIVISION OF STUDENT SUPPORT &amp; DEVELOPMENT (DSSD):</b></p> <ul style="list-style-type: none"> <li>• <b>Careers, Co-curricular &amp; Community Engagement (CCC)</b> <ul style="list-style-type: none"> <li>○ advice on career development</li> <li>○ support for cv, interviews</li> <li>○ co-curricular programmes on campus</li> <li>○ community engagement opportunities</li> </ul> </li> <li>• <b>Counselling &amp; Psychological Service (CAPS)</b> <ul style="list-style-type: none"> <li>○ counselling for emotional, psychological concerns</li> <li>○ referral for psychiatric assessments</li> <li>○ crisis management</li> </ul> </li> <li>• <b>Financial Advisory Services (FAS)</b> <ul style="list-style-type: none"> <li>○ scholarships, bursaries</li> <li>○ hardship loans, financial assistance, part-time jobs</li> </ul> </li> <li>• <b>Student Accommodations Office (SAO)</b> <ul style="list-style-type: none"> <li>○ accommodations at the UWI Halls of Residence both on- &amp; off-campus</li> </ul> </li> <li>• <b>Student Life &amp; Development Department (SLDD)</b> <ul style="list-style-type: none"> <li>○ academic advice; time management; peer tutoring</li> <li>○ disability accommodation</li> <li>○ support for regional, international, mature &amp; postgraduate students</li> </ul> </li> <li>• <b>Health Services Unit (HSU)</b> <ul style="list-style-type: none"> <li>○ walk-in consultations; sexual health clinic; free HIV testing; dietetic service</li> <li>○ ambulance service</li> </ul> </li> <li>• <b>UWI Chaplaincy</b> <ul style="list-style-type: none"> <li>○ available for consultation on spiritual and personal concerns. All religions welcome.</li> </ul> </li> </ul>	<p><b>811</b></p> <p><b>Hotline: 662-4123</b> ext 82120 or 83510</p> <p>ext 82322 or 82098</p> <p>ext <b>82491</b> or 83584 counsellor@sta.uwi.edu</p> <p>ext 84185 or 82100</p> <p>ext 82387 or 82368 UWIHalls@sta.uwi.edu</p> <p>ext 83921 or 83923 sldd.office@sta.uwi.edu</p> <p>ext <b>82149 or 82152</b></p> <p>medical transport <b>728 2408</b></p> <p>662-7663</p>

## 9.0 RESPONDING TO SITUATIONS THAT ARE NOT URGENT

Once the student poses no threat to himself or to others, the situation is not urgent. However, the student may be:

- feeling depressed, homesick, lonely, or isolated
- having financial troubles or relationship problems
- struggling to keep up with studies or unhappy with the degree programme



## 10.0 RESPONDING TO URGENT SITUATIONS

**If a student poses a risk of harm to himself or to someone else, the situation requires urgent action.**

You may be concerned because the student:

- expresses suicidal thoughts or acknowledges serious attempts to end his/her life in the recent past
- is violent or is threatening violence towards someone else
- seems completely unable to function
- seems disorientated or out of touch with reality

**If the student will accept help**

**During office hours:**

- facilitate an urgent appointment at the CAPS or the HSU, accompany student if possible
- document the situation and share with your Deputy Dean for student matters and CAPS

**Out of office hours:**

- call his/her emergency contact; alert Hall Manager, if appropriate
- utilise A&E at Mt Hope; Campus Security Services can provide transport or use local ambulance
- document the situation and the outcome and share with your Deputy Dean for student matters and CAPS the next working day

**If the student refuses help**

**During office hours:**

- call the CAPS or HSU for guidance
- document the situation and share with your Deputy Dean for student matters and CAPS immediately

**Out of office hours:**

- offer to call the student's emergency contact
- call Campus Security Services
- document your concerns and the outcome and share with your Deputy Dean for student matters and CAPS the next working day

**In ALL situations**

- Stay calm; express concern & your willingness to help if you can
- Engage the student as much as possible & get basic information (name, phone number, faculty, an emergency contact)
- Prioritise your own safety and that of others around you; do not try to confront or restrain the student
- Complete an Incident Report; share with your Deputy Dean responsible for student matters and CAPS for timely follow up.
- Make time to debrief; talk through the situation with a colleague at CAPS

## 11.0 RESPONDING TO A STUDENT IN CRISIS

### General advice

Occasionally, a student presents in a state of crisis. The student may display highly agitated behaviour; be verbally and/or physically threatening; or indicate serious intentions to self harm or commit suicide. There may be signs of a departure from reality, paranoia, or drug/alcohol intoxication.

- Try to find out basic information, if possible (e.g. name, address, faculty)
- Approach the student with caution
- Keep a calm, reassuring manner & tone of voice
- Express empathy, concern, and your willingness to help (e.g. “you seem really upset, I would like to help if I can”)
- Ask questions to understand what has triggered his/her distress, what might be most helpful (e.g. is there anyone he/she would like you to call)
- Contact the CAPS or Campus Security Services for assistance
- Take precautions for your own safety (e.g. ensure someone is within easy earshot, leave the door open) and be alert for increasing agitation or aggression
  
- Do NOT confront or threaten the student
- Do NOT try to minimise the student’s distress
- Do NOT take unnecessary risks (e.g. stopping the student from leaving)
- Do NOT handle the situation on your own

Students may require immediate help because of life threatening situations or severe psychological difficulties.

- the student may pose an immediate danger to self or to others
- the student may be unwilling to seek help on his/her own
- you may feel you are in danger yourself

## 12.0 RESPONDING TO POTENTIALLY SUICIDAL STUDENTS

### General advice

If a student talks about suicidal feelings, or tells you that he/she made a recent suicidal attempt, you must **always** take this seriously.

Even if the student denies strong intentions to act on these thoughts or feelings, he/she may be experiencing hopelessness and/or overwhelming distress, or there may be an underlying problem that needs addressing.

An assessment by a mental health professional is necessary; you should contact the Counselling and Psychological Service (CAPS) and let the staff know the situation so they can arrange for a counsellor to speak with the student immediately.

It is understandable if suicide triggers some tricky feelings; you may have strong opinions about the act of taking one's life. However, to be most helpful to the student, it is very important that you are careful not to communicate disappointment or disapproval.

### What you can do

- Listen without judgment
- Try to understand the student's feelings about his/her situation
- Avoid minimising his/her feelings
- Ask if anyone else knows the student's suicidal feelings  
e.g. a family member, a therapist, or family doctor
- Acknowledge that, based on your concern, you must consult with a colleague
- Suggest that it may be helpful to talk things through with a counsellor

***If the student agrees***, it may be difficult to follow up if he/she is anxious, depressed or ambivalent:

- offer to call the CAPS in the student's presence, to help arrange an urgent appointment
- ensure the CAPS staff is aware of the urgency of the situation

***If the student appears to be in imminent crisis, or refuses to speak further to you or to anyone else:***

- You must let the student know that you are obliged to contact support services on his/her behalf
- Call a colleague at the CAPS for guidance

### Remember:

- Do not promise confidentiality to any student who may be at risk of suicide
- Document the situation and share with your Deputy Dean for student matters and with the CAPS for urgent follow up.

## **13.0 RESPONDING TO CHALLENGING BEHAVIOURS**

### **General advice**

Sometimes you may encounter a student who does not pose an imminent crisis but causes considerable disruption in class or within the department or Faculty. The student may display odd or unusual behaviour; may be challenging, intimidating towards others, or disruptive in class; may be threatening in subtle ways that leave others feeling uncomfortable. There may be an underlying psychological difficulty or personality disorder.

Some indicators may include:

- inability to receive constructive feedback
- a dominant or almost aggressive manner in discussions
- persistent or demanding emails; excessive demand for attention
- threatening or abusive behaviour towards staff or peers
- recurring complaints about discrimination or harassment without evidence
- little understanding of personal/professional boundaries

You may have witnessed these behaviours directly or they may have come to your attention from a colleague or a student. If you witnessed them yourself, it would be helpful to make some discreet enquiries to discover whether any of your colleagues have also had similar experiences. Remember to use your discretion when discussing a student's challenging behaviours and maintain confidentiality as appropriate.

### **What you can do**

Consider who may be the most appropriate person to have a one-to-one discussion with the student. You might first ask the student how he/she is coping generally. It may be helpful to highlight some specific behaviours you have noticed and their effect on others, focusing on how this impacts the student (e.g. aggressive behaviours may alienate classmates which makes it difficult for the student to complete group work). If you notice feelings of anxiety, irritation, or intimidation, try to remain positive and maintain a solution-focused attitude. Negotiate some shared goals for behavior changes and you may decide to monitor the situation.

If the disruptive or disturbing behaviours continue or worsen, it is recommended that you seek guidance from your Deputy Dean for student matters and/or the CAPS; a psychological assessment may be needed.

Remember to carefully document your concerns and any actions taken for support and follow up, as necessary.

**14.0 APPENDIX A: INCIDENT REPORT FORM**

*Please complete the form to the best of your knowledge and send under confidential cover to your Deputy Dean responsible for student matters and/or the Counselling & Psychological Service.*

**Date of Report:** DD / MM / YYYY

**This report was completed by** (please print) .....

**Department:** ..... **Contact number(s):** .....

*If you did not witness this incident yourself:*

**This incident was reported to me by** (please print) .....

**Department:** ..... **Contact number(s):** .....

**Student's information:**

Name IN BLOCK LETTERS: .....

Contact number(s): ..... Email: .....

Student ID: ..... Faculty:.....

Residential Hall:.....

Private address:.....

**Student's Emergency contact:**

Name IN BLOCK LETTERS: .....

Contact number(s): .....

Relationship to student:.....

**Date and time of Incident:** .....

**Location of incident:** .....

**Please give a brief description of the incident:**

Please include any precipitating events, background details, other persons present, and describe specific behaviours observed, as well as any actions taken.

- **did the student pose a threat to him/herself?** Yes  No   
(e.g. did he talk about hurting or killing himself?)

Please explain:

- **did the student pose a threat to someone else?** Yes  No   
(e.g. did he/she verbally threaten to harm someone? or to damage property?  
or was he/she physically intimidating, violent, or aggressive?)

Please explain:

- **did the student display any bizarre or unusual behavior?**  
(e.g. talking to himself, speaking incoherently, seeming disoriented?)

Please explain:

- **was there evidence of any illegal behavior?**  
(e.g. possession of illicit drugs, weapons?)

Please explain:

- **was the student advised to seek mental health support at the UWI Counselling and Psychological Service (CAPS), Mt Hope, or any private facility?** Yes  No
- **if the student was willing to accept support**, specify arrangements made:
- **If the student refused support**, specify what, if any, alternative arrangements were made (e.g. calling student's nominated emergency contact):
- **was UWI Campus Security Service involved?** Yes  No

Name of Officer(s) providing assistance: .....

- **was a report filed with UWI Campus Security?** Yes  No
- **was a report made to the National Police?** Yes  No

**To your knowledge, was there a previous report of a similar nature involving this student?** Yes  No

If yes, please give brief details:



### **APPENDIX 3: RESPONSIBILITIES OF THE CAMPUS ASSESSMENT, RESPONSE, & EVALUATION (CARE) TEAM**

The primary purpose of the CARE team is to assist in the prompt support and management of students who may pose a significant risk to themselves or to others among the campus community.

In instances when a student's behaviour poses a moderate to high level of risk, the CARE team may be called upon to assist in the management of the situation. It should be noted that when a student poses a low level of risk to himself or to others, routine procedures of voluntary referral to appropriate support agencies either on- or off-campus should be followed. In the first instance, any member of the university community can share his/her concerns about a student and/or seek guidance from a colleague at the Counselling and Psychological Services (CAPS) or from the Faculty's Deputy Dean responsible for student matters.

A student's situation may come to the CARE team's attention because a complaint has been lodged against him/her, or disciplinary proceedings have been initiated, during which knowledge or suspicion of mental health needs has arisen. The CARE team may recommend, but not mandate, a mental health assessment with an appropriate mental health professional either on- or off-campus.

If the student agrees to an assessment, the CARE team may then make recommendations about appropriate management and sanctions, having reviewed the relevant evidence. In such a case, the final decisions regarding sanctions rest with the authorised disciplinary body (Principal, Disciplinary Committee, Academic Board etc).

Responsibilities include:

- To observe strict protocols of confidentiality as appropriate:
  - To obtain permission for the disclosure of a student's information where appropriate; exceptions will apply when there is an imminent threat to the student or to others.
  - to ensure that all CARE team members and any staff or students involved in any investigation of another student's mental health needs sign confidentiality statements
- To review documentation regarding observed behaviours of concern exhibited by a student and to conduct further investigations as needed.
- To recommend, where deemed appropriate, a mental health needs assessment or substance use assessment in light of certain reports and in the interests of students' continued education at the University.
- To make informed recommendations that are in the best interest of the student and the entire campus community.
- To liaise with key members of staff such as Deputy Deans for student matters and Heads of Departments regarding the need for appropriate action and supportive interventions.

- To make recommendations, in consultation with mental health professionals, to the Deputy Principal and the Disciplinary Committee regarding disciplinary procedures in respect of challenging behaviours when mental health needs may play a role.
- To consult with key persons (i.e. Campus Principal, Heads, Deans, security, psychologists, physicians, relatives and victims as appropriate) when criminal acts have been committed. In accordance with University regulations, a decision about police involvement will need to be taken.

**Triple – A Alignment**  
**(Please tick all that Apply)**

**ACCESS**

- To be a university for all**
- To be the university of first choice for alumni and non- student customers seeking products and services for all things Caribbean
- Improving the quality of teaching, learning and student development**
- Improving the quality, quantity and impact of research, innovation and Publication

**ALIGNMENT**

- Promote greater activism and public advocacy**
- Increase and improve academic/industry research partnerships
- Promote a cohesive single UWI brand consciousness

**AGILITY**

- Establish a physical presence of The UWI on all continents
- Restore financial health to The UWI
- Generate economies of scale and scope for The UWI
- Foster a creative, caring, accountable, motivated professional (CAMP) team
- Foster the digital transformation of The UWI

**PROPOSAL DISCUSSED AT / WITH:**

- Faculty Board**
- AQAC**
- Academic Board**
- Campus F&GPC**
- Principal**
- Deputy Principal**

**Other (please specify):**

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Authorized By