

## **Student Mental Health: Improving Joint Working Meeting**

**Wednesday 29 February 2012, 12.00pm – 2.00pm**  
**Meeting Room, Robert Darbishire Practice, Rusholme**

**Represented:** Robert Darbishire Practice, University of Manchester Counselling Service, Manchester Mental Health & Social Care Trust, University of Manchester Accommodation Office, Hawthorn Medical Centre, University of Manchester DSO, Bodey Medical Centre, University of Manchester Occupational Health, Manchester Student Homes.

### **Minutes**

#### **1. Introduction**

Sarah Littlejohn, Head of Counselling Service, welcomed those present to the meeting, and provided an overview of the context and purpose of the meeting. It is hoped the Student Mental Health Forum (SMHF) will provide an opportunity for colleagues across different services to develop links and encourage joint working towards supporting students with mental health difficulties.

#### **2. GP Perspective: Supporting students with mental health difficulties**

Dr Oliver Atkinson from the Bodey Medical Centre gave a presentation which provided an overview of supporting students with mental health difficulties from a GP perspective. Below is a brief summary of some of the points raised by Dr Atkinson, as a full copy of the presentation is included with these minutes.

Of the patients registered at the Bodey Medical Centre, a large proportion are students. It was also felt that of the student population registered at the Bodey, a large number had mental health difficulties.

The Bodey is currently running at capacity, offering appointments in 48 hours. For patients in distress, they can attend the emergency clinic, or receive a call back.

The Bodey use the I.C.E. concept when assessing patients, this involves considering patients Ideas, Concerns and Expectations.

The PHQ9 scoring tool is used to assess the severity of a diagnosis of depression, on presentation and again at 6 weeks. This is used to support assessment, not in its place.

Dr Atkinson highlighted that there is 'no one size that fits all', and that each patient has a tailored plan of managing mental health issues. This may include signposting, self-help material, and often a watchful waiting approach before diagnosing antidepressant medication.

Often students expect to be given antidepressant medication, possibly seen by students as more 'genuine' when asking for mitigating support evidence. Antidepressant medication can take 4 – 6 weeks to achieve a response, and possible side effects can include worsening mood, associated with increased suicide risk, especially in those 18 years and younger. Because of this, only a 7 – 14 day supply is given along with a follow up appointment.

Where there is concern, patients can be escalated, for example to the Early Intervention Team or Crisis Team at MRI. It was noted that the crisis team now make direct referrals to primary care mental health teams, and this has improved service for the patient.

Dr Atkinson noted they have recently made a number of referrals to the Zion Service, a free service based in Manchester providing psychotherapy, counselling, CBT and self-help resources. The University of Manchester occupational health service have also used the Zion centre, and received mixed reports.

The challenges faced by the Bodey, and other services, is the transient nature of the student population. It is sometimes necessary to liaise with the 'home' GP during vacation times, differences in service provision can add to this challenge. Students may already have a care plan from their 'home' GP, but some choose not to liaise with a Manchester based GP. If a care plan is put in place with the Bodey, they will offer to liaise with the 'home' GP to ensure consistent support.

### **3. Students with Eating Disorders**

The team briefly discussed access to specialist eating disorder services, in particular, that students with eating disorders will often have a care plan in place, yet referral to a specialist service is around a 3 month waiting time.

It is understood that a referral to a specialist service in Manchester requires a BMI of less than 16, this may be a different access point to specialist services at 'home', and so can be a challenge for the student population.

Sarah Littlejohn (University of Manchester Counselling Service) advised the group that she had recently met with Martin Gill from the Eating Disorder Service, and the difficulty around access had been discussed. It is hoped that Martin will attend the next SMHF meeting.

### **4. Out of hours support**

The issue of who and how to access support out of hours was discussed, as this is particularly difficult for those in pastoral care roles in Universities. The NHS do have an out of hours service available, which automatically becomes available after the surgery has closed, this includes information about nearby walk-in centres which are open until late and on weekends. Where there is concern over risk, A&E should be contacted.

### **5. Accommodation**

The group discussed care for students whilst living in halls of residence. It was agreed the pastoral care provided within halls is greatly appreciated and relied upon by students, and support services.

Cooper Healey, the Manager of Manchester Student Homes, talked to the group about support provided in private halls of residence available to Manchester students. Manchester Student Homes offer 10,000 beds across Manchester, within a two tier system (Code and Code Plus). Code plus includes pastoral care, and it is hoped more private residences will aim for this standard. However, for Code plus to be achieved on-site pastoral care is required, this reduces the number of rooms available to rent, and so there is reluctance because of the loss of income.

There has been concern raised at previous SMHF meetings, around access to students in private accommodation, for example by the Early Intervention Team. Access depends on the particular tenancy agreement in place, for example, landlords have to give 24 hours notice if access is required, except in an emergency such as fire/flood/theft. Private providers are mindful of the rights of the tenant and of the tenancy agreement.

However, Manchester Student Homes have very good links with the University accommodation offices and so can be contacted where assistance/advice is needed in order to support a student.

Cooper advised that regular information is sent out to those registered with Manchester Student Homes, and so information about supporting students with mental health difficulties can be disseminated.

There is also a training programme for private accommodation providers, through Manchester Student Homes, which could include support for students with mental health difficulties.

#### **ACTIONS**

- 1. Wendy Spruce (University of Manchester Counselling Service ) to invite Martin Gill from the Eating Disorder Team to provide a presentation at the next SMHF meeting. The date of the next meeting will be confirmed based on Martin's availability, it is hoped around late May/early June.**
- 2. Wendy Spruce (University of Manchester Counselling Service ) to locate contact details for the Zion centre and invite to future SMHF meetings.**