

Friday 30 September 2022, 09.30 - 12.30

# Welcome to Oxford Patient Safety Collaborative Student Mental Health webinar

- This webinar is being recorded and the recording will be made available following the event
- Please use the Chat function in Teams to raise any questions
- We will be using Slido as part of the webinar. If possible, please use a different device to answer the poll (e.g., a mobile phone) via [www.sli.do](https://www.sli.do)
- Our session will start promptly at 09.30 and is scheduled to finish at 12.30

# Agenda

Presentation	Presenter	Time
Welcome and context setting	<b>Matt Williams</b>	9.30
AHSN scoping report presentation	<b>Hayley Trueman</b>	9.45
Why is talking about self-harm so scary?	<b>Kezia Lange and Fiona Brand</b>	10.00
Pre-registration student experience within Berkshire Healthcare Foundation Trust, impacts on emotional wellbeing	<b>Esther Rowland</b>	10.20
Life Tools Programme at Reading University	<b>Alicia Peña Bizama</b>	10.40
What does the research tell us about the impact of COVID on student mental health and the Kent, Surrey and Sussex approach?	<b>Becca Randall</b>	11.00
Oxfordshire MIND	<b>Andrew Grillo</b>	11.20
Supporting paramedic student mental health and wellbeing – WRAP	<b>Katie Pavoni and Emma Geis</b>	11.40
Improving Student Mental Health through Partnerships- University of Liverpool	<b>Julia Purvis</b>	12.00-12.15
Wrap up and next steps	<b>Hayley Trueman</b>	12.15-12.30

# Emerging Student Mental Health themes across Berkshire, Buckinghamshire, and Oxfordshire

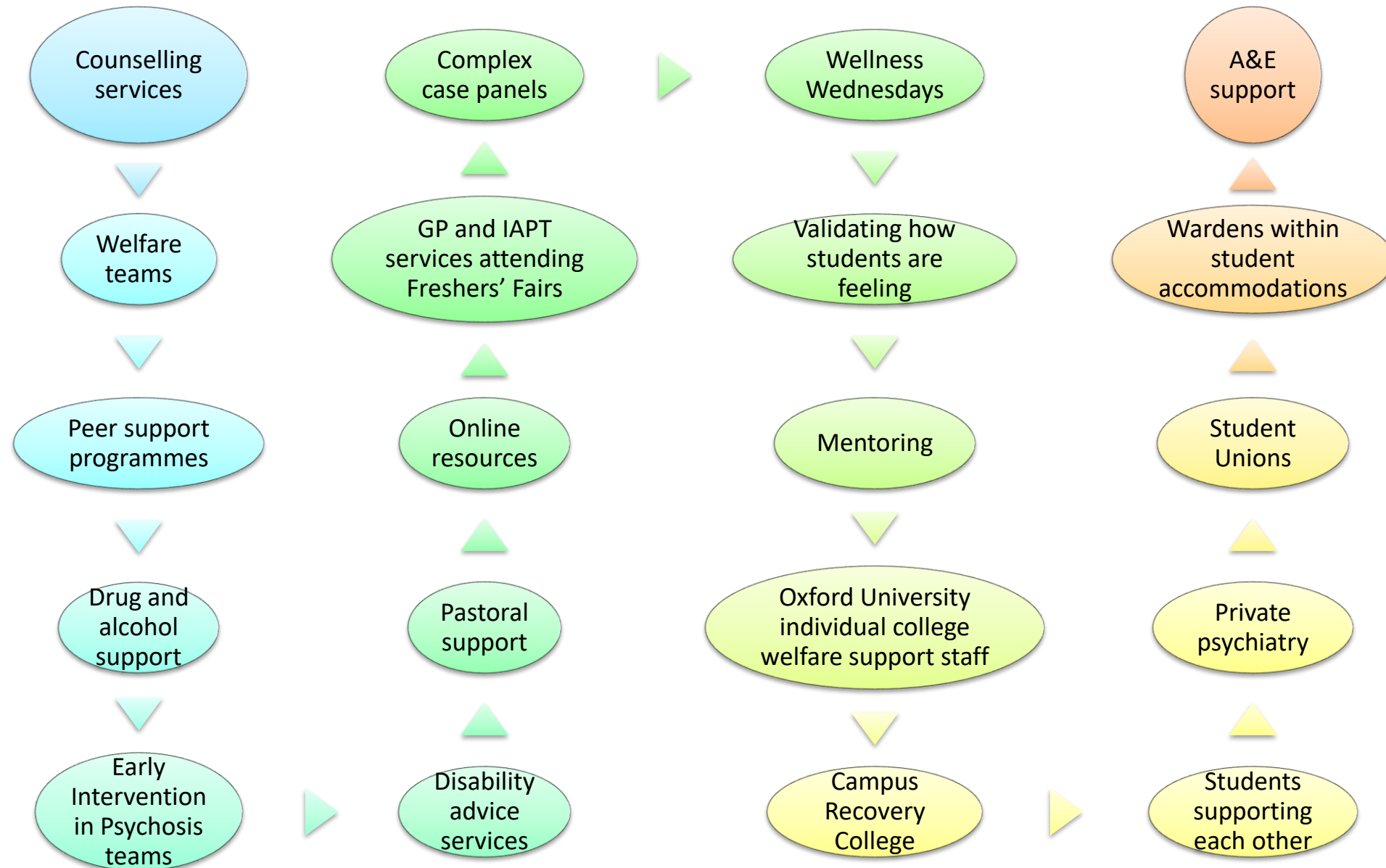
Hayley Trueman  
Mental Health Improvement Manager  
Oxford AHSN

# What we did...

- 24 semi-structured interviews with 32 individuals from primary and secondary care, third sector organisations, university counselling and welfare teams, and students.
- Notes from these interviews were then written up and themed.
- The main limitation of our work was the limited number of students interviewed.



# Identified support and resources



# Challenges

## Recently Emerging Challenges

**Reduced opportunities to socialise and reduced access to face-to-face support**

**Increase in student mental health presentations**

**Changes in demography within the student body**

**Digital as both a blessing and a curse**

## Long Standing Organisational Challenges

**Access to secondary care mental health teams, particularly for:**  
**Eating Disorders**  
**ADHD and Autism**  
**Complex Needs**

**Differing expectations of services**

**Communication and consent to share information**

**Transitions of care**



## Suggested Actions



A directory of potentially "verified/safe" digital interventions.



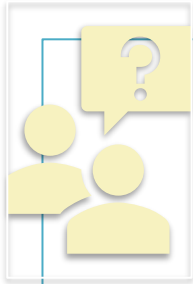
Preparation of young people and parents to manage the transition into university and develop self-management skills.



Utilising the window of notice from UCAS notifications to university starting to engage young people (and their carers) as soon as a place is accepted at a university.



Shared clarity and communication across services around what universities can and cannot offer their students in terms of support



Easy access and visible mental health and wellbeing services situated on/near university campuses.



Proactive and preventative approaches.



# Any questions?





# Why is talking about self harm so scary?

**Fiona Brand and Kezia Lange**

Emergency Department Psychiatric Service

Oxford Health NHS Foundation Trust

What helps?

Being calm, confident,  
containing and capable



Using self-harm as the start  
of a curious conversation

# Ideas

- Don't shy away from the conversation
  - It's similar to other student distress – what would you do if someone came to you very upset: “I can't finish my essays on time”?
  - Help to unpick what is going on
  - Help them to generate ideas re support/next steps
  - Validate distress – empathy
  - Don't add 'heat' to the situation
  - Don't rescue, don't blame
- 
- It sounds like you are going through a very difficult time.
  - What's been happening?
  - What is the worst thing for you at the moment?
  - What are you worried about?
  - How can I help? What could you do differently?



Q&A



# Pre-registration student experience project within Berkshire Healthcare Foundation Trust and the impacts on student wellbeing



SRO: Pearly Thomas  
Project lead: Esther Rowland

# Learning Environment Leads

Learning environment leads are responsible for **supporting all our health and social care students**. We also support the **development of all staff supervising and assessing students** in clinical practice.

- Working collaboratively with teams and **partner universities** to provide a safe and effective learning environment
- Providing professional support and facilitation to enhance the **roles of practice assessors, practice educators and practice supervisors**.
- Providing **pastoral support and signposting** for learners
- Deliver relevant and up to date **training sessions** relating to **student learners' proficiencies**.



# Student Support

## Pastoral support and signposting

LEL team available to offer support to students and to signpost to Berkshire Healthcare and/or university wellbeing services

## Student Forum Sessions

Fortnight reflective sessions and pastoral support

## Blended Learning Toolkits

Toolkit available to support reflective learning, medication proformas

## Teaching Sessions

Delivered by a variety of clinical professionals

- These sessions contribute to knowledge and understanding relating to proficiencies



# Overview of the need for the student experience project

- Berkshire Healthcare NHS Foundation Trust is a **community and mental health trust** providing **98 different services** to people of all ages living in Berkshire.
- Despite employing over **4,500** staff there still remains issues with **recruiting and retaining** healthcare professionals into the Trust.
- The Trust provide **clinical placements** for **pre-registration student nurses and Allied Health professionals** from 18 Universities from the surrounding areas.
- In addition to the low recruitment of students post registration, a number of students raised their dissatisfaction with their relevant learning environment.



# Student experience survey Objectives & Outcomes

## Objectives

- To understand the **barriers and facilitators** of placement learning
- To identify **areas of strength** and **areas of improvement** in the placement provision
- To establish baseline data and a robust system to collect regular **feedback** from our non-medical trainees
- To make **recommendation for improvement**

## Outcomes : At the end of the survey ...

- We will understand the main barriers to learning
- We will identify our strengths and areas of improvement
- Survey will be used to gain regular feedback from future cohorts of students
- We will develop an action plan to optimise placement experience of the student

# Methodology and literature review

**6 Themes** from the systematic literature review all of which have a big impact on the students mental health and well-being.



- **Data collected** using **mixed method questionnaire** (Survey design)
- **Liaison** with **stakeholders across the Trust** including; well-being services, recruitment and retention, research and development, Clinical Education, placement leads, students.

# Questionnaire Respondent Demographics

What is your age group?

[More Details](#)

20-30	22
30-40	9
40-50	25
Above 50	11
Prefer not to say	0



How would you best describe your gender?

[More Details](#)

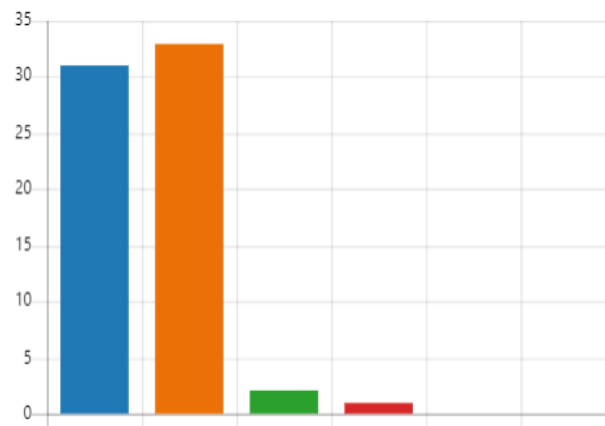
Woman	52
Man	15
Non-binary	0
Prefer not to say	0



How would you best describe your ethnic origin?

[More Details](#)

White	31
Black or African-American	33
Asian	2
From multiple races	1
Prefer not to say	0
Other	0



## Oxford Brooks / Allied Health

- 86% 20-30 years old
- 88% single
- 94% white
- 88% female
- 75% non paid

## Mental Health

- 74% Black or African-American
- Only 7% 30-40 years old

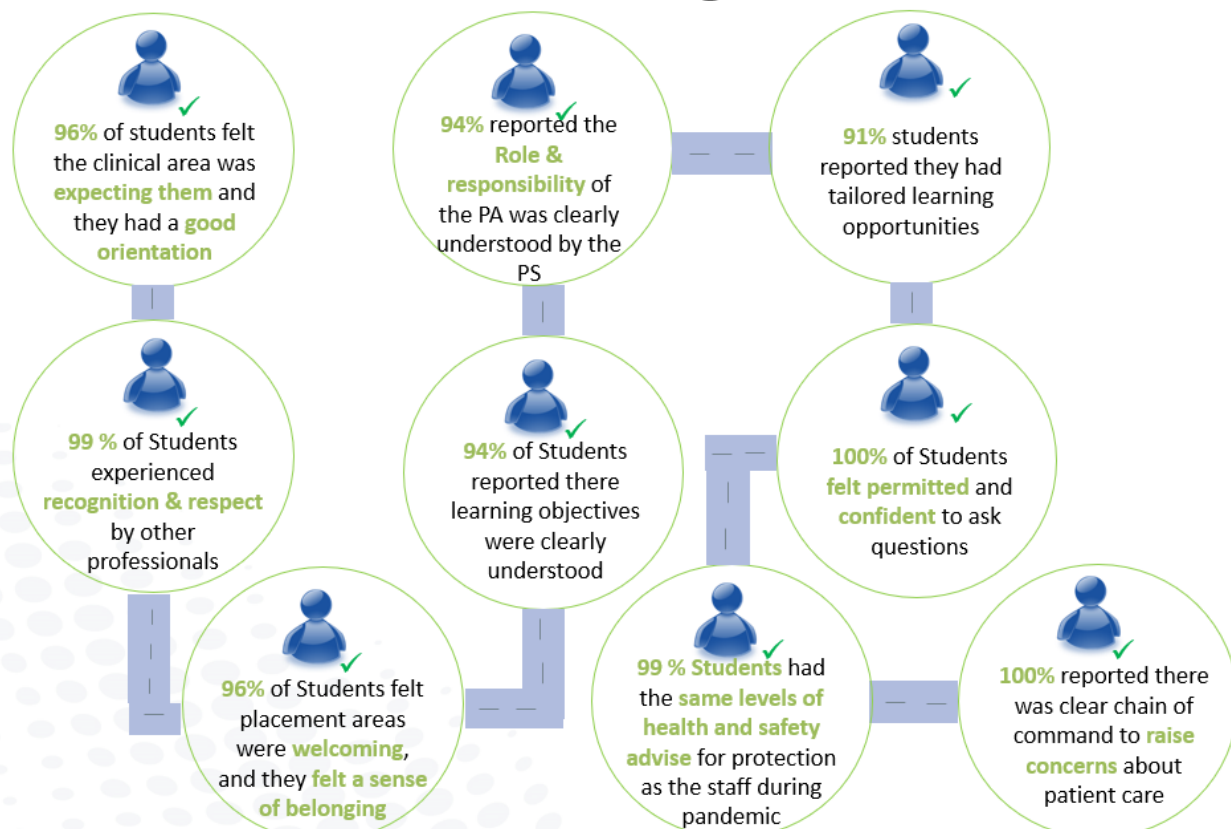
## Learning Disability

- Only 4 students overall

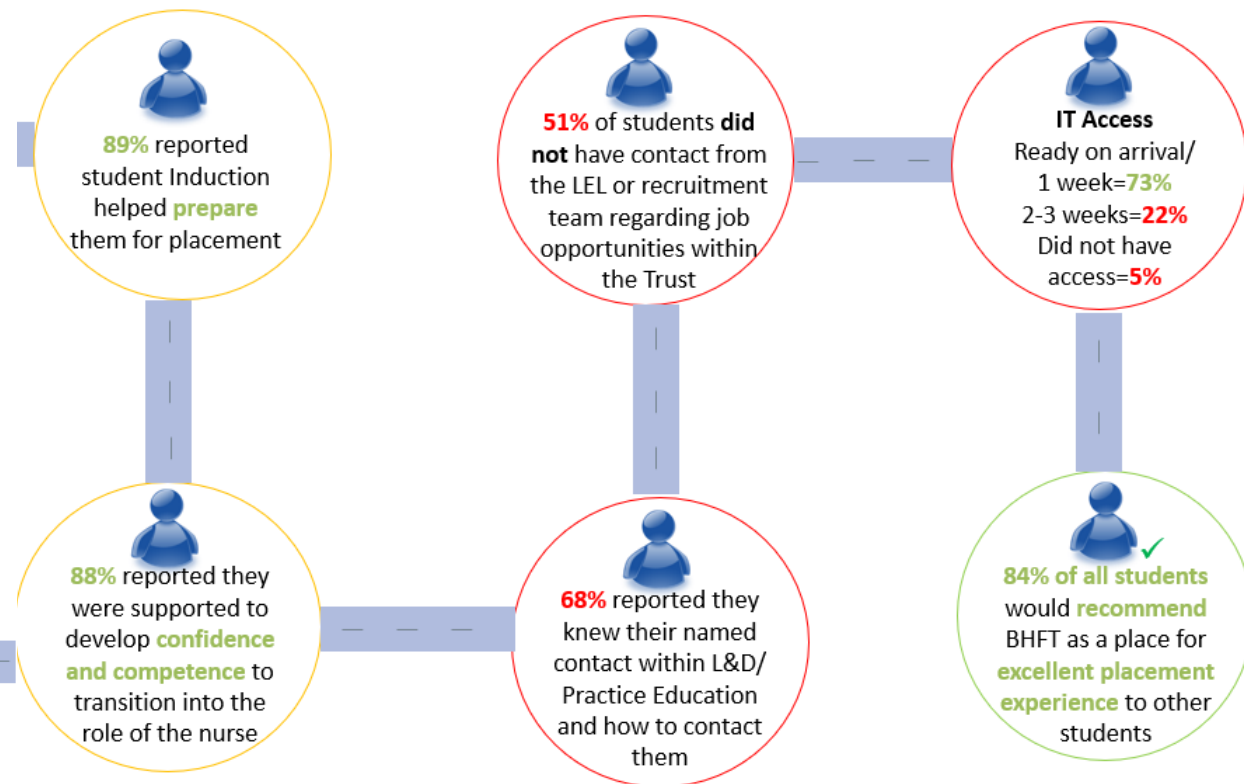
## Adult Nursing

- 90% female
- 73% UWL

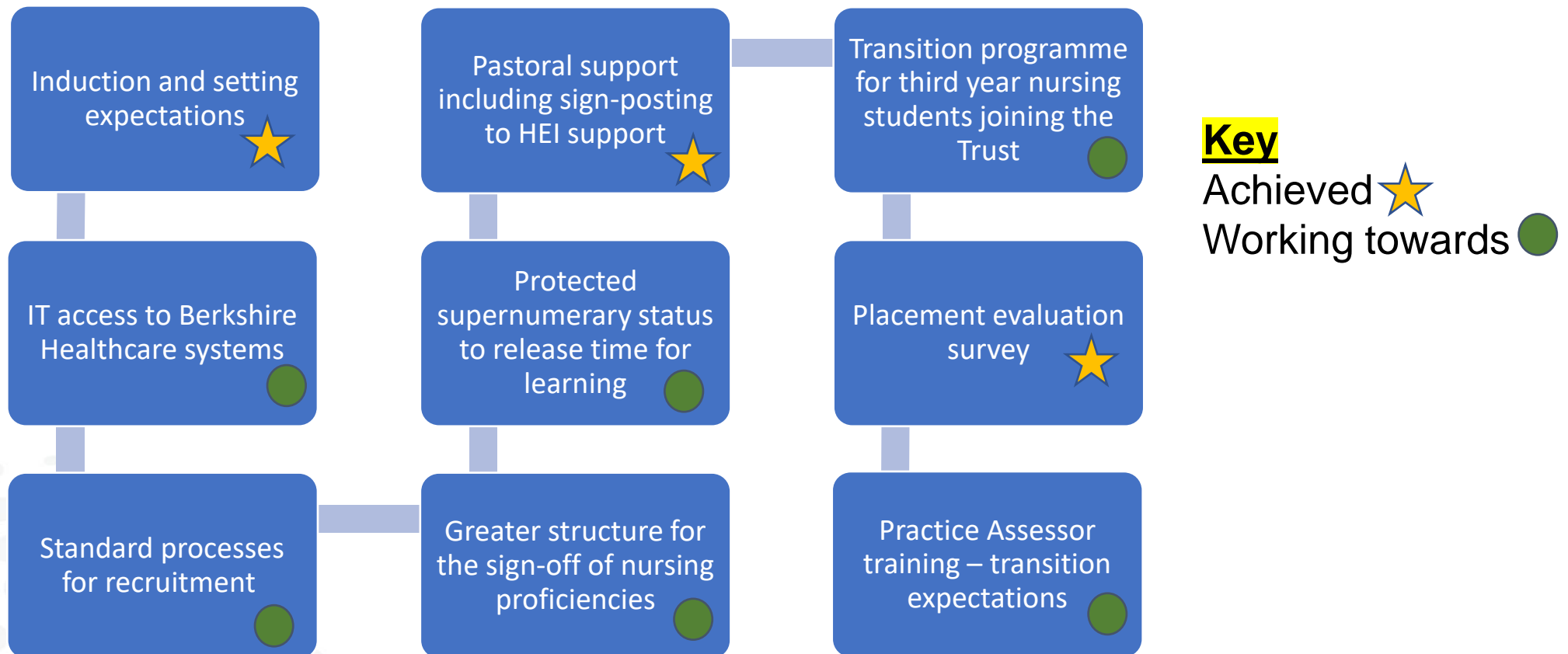
## Areas of strength



## Areas for Improvement



# STUDENT EXPERIENCE RECOMMENDATIONS



# RESPONSE RATE AND PROCESS UPDATE:

## PROCESS:

- The initial (personalised) email is sent to each learner in the first week of their placement, with an automated reminder email sent 4 weeks later (settings within outlook to be confirmed re: automating reminder emails towards the end of longer placements).

## ACTIONS TO IMPROVE RESPONSE RATE:

- QR Code has been sent to all placement areas to encourage engagement at the end of placement
- QR code sent to placement areas to be displayed within the placement environment
- Student experience survey is discussed in each LEL teaching session and the opportunity is given within the session to complete the form.
- Library has welcomed the LEL to put it up within PPH
- Discussed with the Research Team

## PDF Newsletter after each quarter to each placement area:

- Thank placement areas for all their hard work and commitment in making the student experience within Berkshire Healthcare Trust positive.
  - Update on current process and changes
  - Feedback from students
  - Recommendations and actions for next steps
-




# AREAS OF STRENGTH

★ Key: Improvements from last Survey

**NHS**  
Berkshire Healthcare  
NHS Foundation Trust



96% of students felt the clinical area was **expecting them** and they had a **good orientation**



97% reported the **Role & responsibility** of the PA was clearly understood by the PS




94% students reported they had tailored learning opportunities



100% reported they understood **what to expect from placement**



94% of Students experienced **recognition & respect** by other professionals




100% of Students reported there learning objectives were clearly understood




100% of Students **felt permitted** and **confident** to ask questions



97% reported they were supported to develop **confidence and competence** to transition into the role of the nurse




95% of Students felt placement areas were **welcoming**, and they **felt a sense of belonging**



100% Students had the **same levels of health and safety advise** for protection as the staff during pandemic



100% reported there was clear chain of command to **raise concerns** about patient care



96% reported local student Induction helped **prepare** them for placement

# AREAS OF SUCCESS AND ROOM FOR IMPROVEMENT

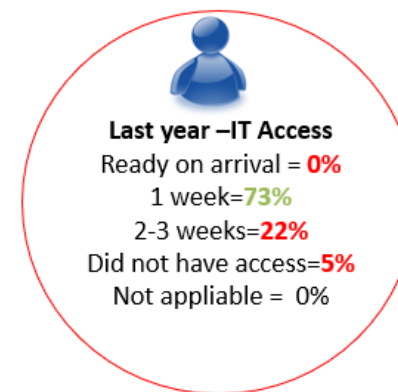
**Last year: 68%**



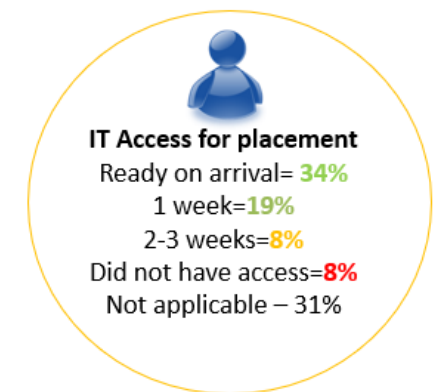
**Jan – March 22: 80%**



**Last year**



**Jan – March 22**



*\*\* The question was changed from the original project as students found the abbreviations confusing. \*\**

Previous question: “ I knew how to contact my named contact within L&D / Practice Education”

New question: “I knew how to contact the Learning Environment Lead team if I needed advice and support”

IT accounts are sent directly from the Learning Environment Team to the placement lead or practice assessor a minimum of two week before the placement.

Students are not able to be sent their IT account directly due to GDPR. This can cause delay in the accessibility.



# ROOM FOR MORE IMPROVEMENT

Last year: 51%



**51%** of students **did not** have contact from the LEL or recruitment team regarding job opportunities within the Trust

Jan – March 22



98% of students **did not** have contact from the recruitment team regarding job opportunities within the Trust

Jan – March 22



83% of students **did not** have contact from the Learning Environment Team regarding job opportunities within the Trust

This question was divided to report on recruitment and Learning Environment lead contact

Recruitment conversations are only applicable to third year students.

Year of study:

Year one – 11 students

Year two – 22 students

**Year three – 2 students**

# Student experience- Impacts on well-being

## Discussion with the Clinical Education Team

- ❖ Isolation
- ❖ High Anxiety of catching covid and still having to go into placement if they were safe to do so
- ❖ High Anxiety- Covid, vulnerable family members, isolation
- ❖ Student were worried about student support within the placement due to Covid and high workload demand during this period of time
- ❖ Childcare issues

# **Student experience- Impacts on well-being**

## **Action that the Clinical Education team put in place:**

- ❖ Reasonable adjustments
- ❖ On ward- 1:1 teaching, guiding, coaching
- ❖ Off ward 1:1/ Group bite-size education- Teams/ training rooms
- ❖ Off ward 1-1/ Group reflection supervision- Teams/ training rooms for wellbeing
- ❖ Teaching sessions ramped up to meet the demand and need such as “ how do we become resilient practitioners”
- ❖ On ward 1:1 practice assessment documentation support
- ❖ On ward- practice assessor/ supervision. Redeployment staff.
- ❖ Close work with university for covid- risk assessments daily
- ❖ Blended learning Toolkit was produced (Isolated students)

# Lived example of student experience



# ANY QUESTIONS



# Life Tools

Programme



**Learn > Develop > Succeed**

Creating the pathway to academic and personal success.





# LIFE TOOLS PROGRAMME



Dr Alicia Peña Bizama, C.Psychol., AFBPsS  
Life Tools Service Manager  
Student Wellbeing Services  
[m.a.penabizama@reading.ac.uk](mailto:m.a.penabizama@reading.ac.uk)

# LIFE TOOLS PROGRAMME

- Series of talks/webinars to increase knowledge and develop skills for personal, academic and professional development
- Research-based, range of topics covered to build academic confidence and resilience to do well and keep well. Positive psychology, mind-body connection, holistic/systemic.
- The aim is to increase understanding of what are the factors that contribute to effective learning and self-management, and provide strategies to add to students' toolkit to do well and keep well.
- Preventative/proactive approach.



# LIFE TOOLS PROGRAMME

- Talks/webinars, about 45 minutes and time for questions.
- No assessments, students can try them out and see what they find of interest
- Provide strategies to:
  - Facilitate transition to university
  - Manage academic demands effectively
  - Boost motivation and derive a sense of achievement
  - Strengthen resilience to manage life challenges
  - Prepare for life as a professional/workplace

# LIFE TOOLS BLACKBOARD ORGANISATION

- It is available to all current students.
- Self-enrol.
- Online resources and access the Life Tools webinars.
- Students receive a weekly email to inform about webinars/talks taking place during the following week.

# LIFE TOOLS CERTIFICATE

The aim is to:

- Provide a structure so that you can develop habits that support your progress towards your academic and personal goals.
- Develop self-awareness and strengths, to do well and keep well.
- Build your repertoire of skills so that you can fulfil your potential and have a meaningful and rewarding life.
- RED AWARD: 5 talks/webinars count towards it.

# STUDENT FEEDBACK

**“I highly recommended as it helped me to develop my skills and be more productive in my studies”**

**(Second year student)**

**“Good life skill – especially as sleep is so important in student life due to deadlines and work, and to manage social events.”**



**FOR INFORMATION ON THE LIFE TOOLS PROGRAMME GO TO:**  
[reading.ac.uk/life-tools](http://reading.ac.uk/life-tools)  
[blogs.reading.ac.uk/life-tools-programme](http://blogs.reading.ac.uk/life-tools-programme)

# Q&A





Andrew Grillo  
Head of Wellbeing Services

# Wellbeing Services

- We work alongside people to help them to improve their wellbeing, realise their potential and overcome challenges
- Services are free to access and have minimal waiting times
- Support is person centred and proudly non-clinical, but often closely linked to NHS services
- Focused on social and practical issues, developing tools, and sustainable sources of support
- Delivered in person, via phone and online across Oxfordshire and Berkshire West





# A non-clinical approach

- Non-clinical services are **services that are concerned with understanding and improving someone's sense of confidence, wellbeing and management of their own lives.**
- People providing these services do not arrive at a medical diagnosis and do not prescribe medication or other medical services, but do provide services that require training, often formal qualification, supervision and access to skilled and experienced practitioners for advice, guidance, training and support.



# OXM support: themes

- We support many students who access support while at Uni but also out of term time (who may have struggled with their mental health and moved home)
- Often a disconnect between support at home and at uni – ends up feeling like distinct instances of care and support rather than being continuous care or joined up
- Alternatively, separation from Uni and peers when accessing support can feel preferable – greater anonymity and perceived confidentiality.
- Offer is different for every institution and information is often hard to find or hidden on intranet

# Accessing Uni support

- Support from Uni accessed during post-graduate study was helpful and quickly accessible
- Was also given reading or activities to work on between sessions – didn't feel on their own between sessions
- While support available was good, they were not made aware of wider options or ongoing support
- Support for mental health not spoken about by academic staff, and they were not aware of Uni support during undergraduate study
- Supported to change GP:

“They helped me realise the kind of relationship it was possible to have with a GP, rather than just being unhappy and accepting it”



# Our Services

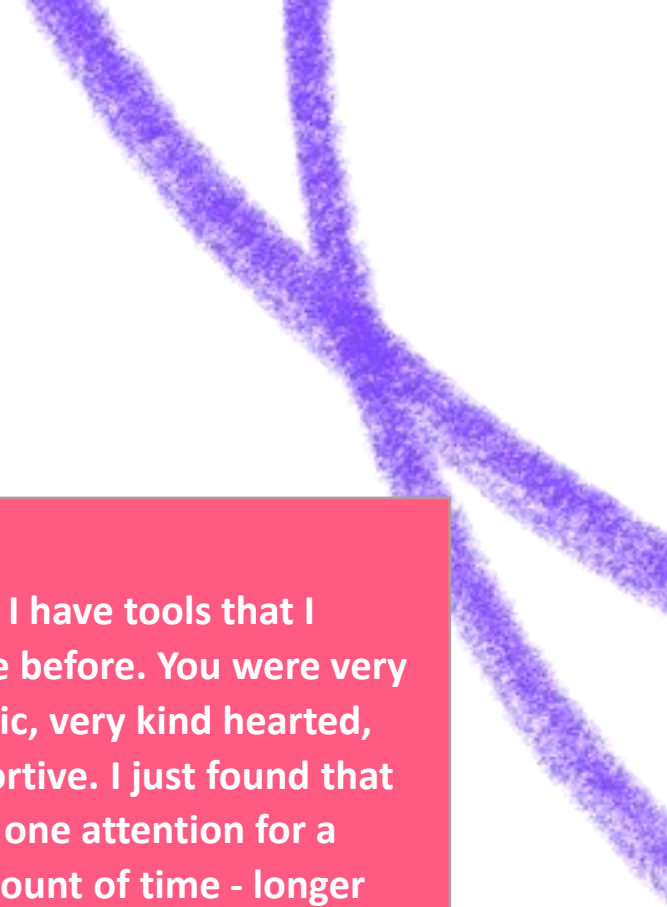
# Information Service: 01865 247788

- Open Monday to Thursday 9:30-16:30 and Friday 9:30 – 16:00.
- It is available for **anyone – people who need support, carers, family members, professionals**
- You can email us on **info@oxfordshiremind.org.uk**
- You can text us on **07451 277973**
- **Referrals are usually responded to within 48 hours**



# Primary Care Wellbeing Service

- Service based within GP practices/Primary Care Networks across Oxfordshire and Wokingham
- Offers up to 6 person-centred wellbeing sessions to individuals experiencing issues around their mental health
- The sessions are a chance to talk about what's going on, identify coping strategies and tools, and to share other services/signposts that might be useful.
- Referrals via GP practice or self referral:  
[primarycarewellbeing@oxfordshiremind.org.uk](mailto:primarycarewellbeing@oxfordshiremind.org.uk)



“I feel as if I have tools that I didn't have before. You were very sympathetic, very kind hearted, very supportive. I just found that the one to one attention for a certain amount of time - longer than a GP can manage - I did find it very comforting and supportive”



# Safe Haven

- Offers same day, out of hours support both in person and by telephone, to adults experiencing mental health crisis in **Oxfordshire 7 days a week.**
- Mental health crisis is defined by the person experiencing it!
- We listen, signpost, explore coping strategies, and safety plan in collaboration with the individual. We also provide distraction activities in a group setting
- We accept professional referrals and self-referrals and ask that anyone wanting to attend calls us first to book a slot



**In a Mental Health Crisis?**

**Do you need...**

- Same day mental health support
- Someone to listen without judgement
- Somewhere safe to be when you feel at your lowest

**Get support from Safe Haven**

<b>Banbury Safe Haven</b> Open Friday – Monday (6:00pm–10:00pm) <b>01295 270 004</b> (referral line open 5:00pm–9:30pm)	<b>Oxford Safe Haven</b> Open 7 evenings a Week (6:00pm–10:00pm) <b>01865 903 037</b> (referral line open 5:00pm–9:30pm)
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**WE ARE BETTER TOGETHER**  
The Oxfordshire Mental Health Partnership

Oxfordshire  **Mind**

 **Elmore**

  
Oxford Health  
NHS Foundation Trust



# And many more

Including:

- Welfare benefits support
- Workers embedded in Adult Mental Health Teams
- Support within the Perinatal Mental Health Team
- Online and in person peer support groups and coping skills courses
- Support for children and young people
- Physical activity and wellbeing sessions

See [www.oxfordshiremind.org.uk](http://www.oxfordshiremind.org.uk) or call our Information line



**Any questions?**



# ***“The Future’s Bright”: Future Workforce Mental Health Project***

***Emma Geis:*** Co-Academic Lead, Lecturer Keele University

***Katie Pavoni:*** Co-Academic Lead, Associate Professor, Course  
Director/ Pastoral Lead, St George’s, University of London

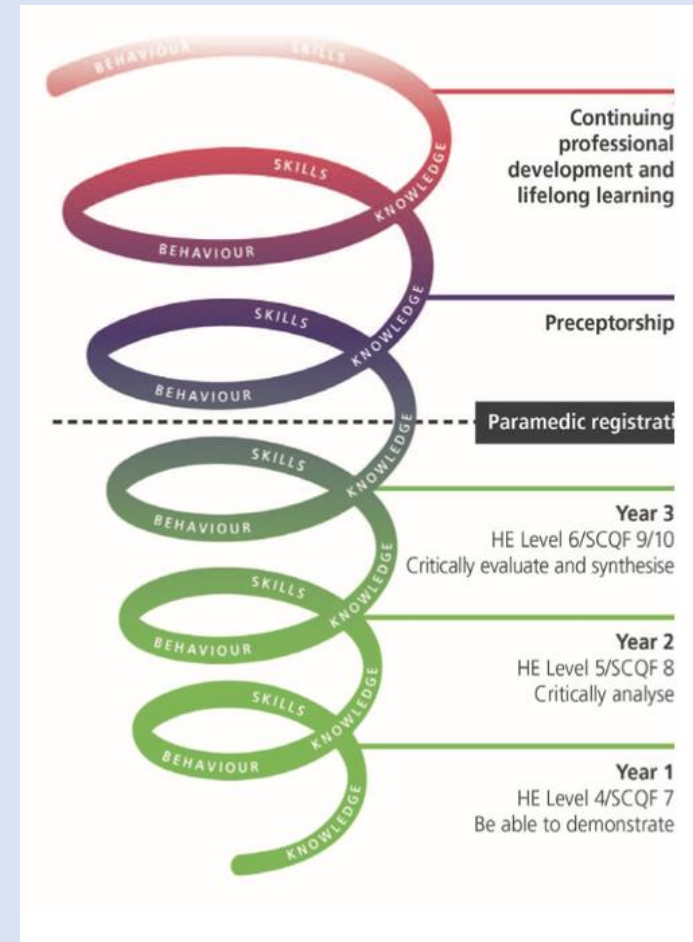
# Support Paramedic Health and Well-being

## Development of a suite of resources to support the mental health and wellbeing of pre-registration and newly qualified paramedics

1. Development of **curriculum guidance** regarding personal mental health and well-being for pre-registration Paramedic training.
2. Development of a **wellbeing and recovery support tool** for use by paramedic students and early career staff in ambulance trusts.
3. Development of a **learning and development package** for student and preceptorship supervisors.

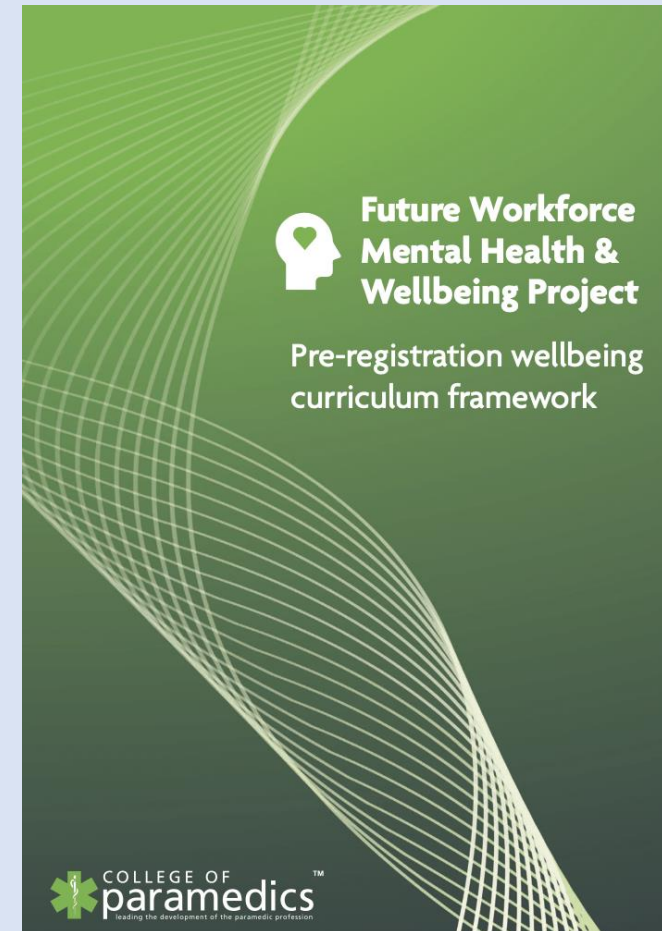
# Intervention 1: National Mental Health & Wellbeing Curriculum

- Consistency of approach
- 'Golden thread'
- Spiral Curriculum aligned to CoP Curriculum Framework & QAA (level 4, 5, 6)
- Level 7 aligned to post graduate curriculum and QAA.
- Stakeholder groups
- Systemic and cultural change



# Intervention 1: National Mental Health & Wellbeing Curriculum

- Foundations of paramedic wellbeing, Emergent Practitioner, Transition to Autonomous Practice
- Programme adaptations – creativity
- Confidence & Support for HEIs
- Best practice examples
- Community of Practice – online repository



## Intervention 2: A wellbeing support tool

- Reflection
- Improving and maintaining the link between placements and universities
- NQP competencies
- Piloted with four universities
- PAD documents
- Practice educators





## Intervention 3: Education Package for Practice Educators & Preceptors



E-learning



Pre-registration students and newly qualified paramedics



Stakeholder groups – mentors and NQPs



Explored risk and current context



Face to face pilots – 5 trusts- SWAST, NEAS, NWAS, EMAS, YAS

# Looking to the future: FWMHP

WRAP regional research

Curriculum implementation and  
community of practice

Face to face train the trainer pilot  
workstream

***Thank you!***  
***Any Questions?***

*[emma.geis@collegeofparamedics.co.uk](mailto:emma.geis@collegeofparamedics.co.uk)*

*[kpavoni@sgul.ac.uk](mailto:kpavoni@sgul.ac.uk)*

# Improving Student Mental Health through Partnerships

University of Liverpool

Julia Purvis – Head of Student Services



# Purpose and Overview of Project

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Funded by OfS in 2019 - project aimed to develop a sustainable framework for an integrated partnership approach to student Mental Health

Partners:

- University of Liverpool
- Liverpool John Moores
- Merseycare NHS Trust
- Brownlow GP Practice (Student Health)
- North West Academic Health Science Network

# Overview of Project

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- Develop a pathway for students who self-harm
- Liaison Model between NHS and HEI's
- 'Living with and understanding ... workshops' e.g. psychosis, eating disorders, anxiety
- Co-develop services with students to increase our understanding of students' experiences of mental health services
- An evaluation to inform the development of project
- OfS did allow flexibility, some of the above was not in original bid. Developed organically e.g. assess current pathways for students between NHS and HEI's – primary care and secondary care

# First Steps

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- Successful with the bid
- Governance structures in place including a steering group which included representation from all the partners and Liverpool CCG, Liverpool City Council and Third Sector
- Clinical and Evaluation Steering Group
- Recruitment for 5 new posts within Merseycare NHS Trust and University of Liverpool
- COVID!! - Delayed project for several months



# Liaison Model

- **LIAISON** - between NHS and HEI professionals and services. The service is informed of a student in distress, or requiring follow-up, by urgent care services and then contacts the student to offer a brief intervention and to signpost or refer to relevant services.
- **MDT** - multidisciplinary team meetings at each HEI where students with complex needs and or presenting to multiple services are discussed and care pathways agreed.
- Over 520 students referred to date (Oct 20 – Mar 22)

# Developing MDT Approach

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Benefits of extending MDT approaches in the case management of University students presenting in crisis to include Mersey Care Trust:

- Increased flow of communication and information sharing between organisations and improved case management
- More effective utilisation of resource for all partners (clarification of roles)
- Effective and timely referral of student cases
- Effective approach in managing risk
- Reduces staff anxiety
- The right support at the right time for the student

# U-COPE

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## UCOPE

- Intervention for students who self-harm – robust referral criteria
- Students identified and referred to Merseycare NHS Trust
- Based on campus

## Six session PIT/CAT therapy

- Assessment
- Four therapy sessions
- Follow up session (2-3 weeks)

## WORKSHOPS

A series of interactive workshops on a range of topics identified by students during focus groups at project start e.g. anxiety, eating disorder, depression, suicide prevention etc.

# U-COPE: Evaluation

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Total referrals to date (Sep 20 to Mar 22): 280 students

Appointments delivered: 817

Average number of days for the first appointment 21/22: 15.1

Qualitative feedback from students is very positive, they appreciate the simplicity of referral pathways, speed of access and focused nature of intervention

# What Next ?

- Agreement for one year funding from MCT and all HEI's in Liverpool; July 2022-June 2023. All HEI's now involved in the pilot
- Develop Student engagement further e.g. mental health forum. Continue with UCOPE feedback
- Developing consistency of approach – involves 5 HEI's of varying sizes
- Buy-in from leadership both within HEI's and NHS
- On-going evaluation including robust data collection, case studies, regular reports to Steering Group etc.
- If pilot successful we can develop a long-term model

# Challenges

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- COVID
- Recruitment delays
- General day to day issues of two large organisations working together
- IT systems
- Sharing information
- Evaluation and data collection
- Student co-production – engaged students but covid was a barrier
- New challenge for our pilot year – consistency of approach by new Universities joining the project
- Not much time to demonstrate impact

# Successes

- Two large organisations ultimately working well together – developed a better understanding of what each organisation does
- OfS allowing us to adapt our model – we achieved initial aims of project but via a different model e.g. Liaison Model/MDT rather than mapping and improvement of original processes
- Right staff working together on the project at the right time – we made it work!
- Student engagement with UCOPE
- A&E – student data field
- Liaison model and MDT approach
- Positive feedback from students and staff



# Next Steps



Join at  
**slido.com**  
**#2339 835**

# Thank you!