Psychology Informing University Practice Advisory Board

Meeting 1 – Wednesday 13 May, 16.00-17.00

Agenda

1	Welcome and introductions		MR	
2	Programme overview	Link: Summary overview	PF/ SP	Information
3	Advisory Board Terms of Reference	Link: Terms of Reference	MR	Approval
4	Steps Model	Link: Steps summary	LG	Information
5	Office for Students current project	Link: Project summary	LG/ SP	Comment
6	Future funding		PF/ SP	Approval
7	Any other business		MR	

Advisory Board members

Present
Prof Mike Roberts (Chair), Managing Director, UCLPartners
Prof David Clark, University of Oxford and National Clinical & Informatics Advisor for IAPT, NHS England
Prof Peter Fonagy, Head of Division of Psychology and Language Sciences, UCL and PsychUP Director
Prof Deborah Gill, Pro-Vice-Provost for Student Experience & Director of Medical School, UCL
Prof Tim Kendall, National Clinical Director for Mental Health, NHS England
Prof Stephen Pilling, Head of Department, Clinical, Educational and Health Psychology, Division of Psychology and Language Sciences, UCL and PsychUP Director
Prof Sasha Roseneil, Dean of the Faculty of Social and Historical Sciences, UCL
Fiona Ryland, Chief Operating Officer, UCL
Prof Alan Thompson, Dean of Faculty of Brain Sciences, UCL

Apologies
Sir David Sloman, NHS Regional Director for London
Rosie Tressler, Chief Executive Officer, Student Minds
Dr Vincent Kirchner, Medical Director, Camden & Islington NHS Foundation Trust

Secretariat
Dr Laura Gibbon, PsychUP Coordinating Director

Psychology Informing University Practice (PsychUP)
Summary overview

1. Background

Student mental health has worsened over the last decade, leaving the majority of student services struggling to meet demand. Staff report difficulties supporting students with their mental health, impacting on their experience of work and ability to fulfil the pastoral components of their roles.

Student and staff mental health are areas of growing research and policy interest. Psychology Informing University Practice (PsychUP) was set up to provide a perspective not otherwise represented in the field. Drawing on the strengths of its constituent partners, PsychUP aims to promote evidence-based mental healthcare for students in the UK and effect a culture change so that university staff are better supported in their roles.

2. Aims

2.1 Involve stakeholders in our work (particularly students, staff members, student service leads and university leaders).
2.2 Develop knowledge and understanding about mental health at university, through research, consultation and dissemination.
2.3 Support the aims of NHS Long Term Plan and Office for Students, to better integrate university and NHS care, through developing models and care pathways, and driving quality improvement.

PsychUP has a national focus, as opposed to a specific focus on UCL; and whilst supporting quality improvement, PsychUP does not deliver clinical services. However, the programme is closely linked with the UCL University Clinic, which provides NHS mental health care to UCL students on campus.

3. Organisation and governance

PsychUP is a working partnership between the UCL Division of Psychology and Language Sciences, UCLPartners and the Anna Freud National Centre for Children and Families, with a range of NHS services and organisations as key stakeholders. Programme direction is informed by an Advisory Board of professionals and a Student Steering Group.

4. Funding

PsychUP is currently funded by the British Psychological Society, Wellcome Trust (via an institutional grant to UCL), Office for Students, Health Education England and UCLPartners.

5. Workstreams

5.1 *Community engagement and communication*, including: Involvement of key stakeholders (students, university staff, student service leads and university senior leaders); User-oriented communication via the PsychUP website (going live in early June) and other channels.
5.2 *Research and evaluation*, including: Survey projects; Investigations of barriers to students accessing support and service users' experience of care; Piloting novel interventions.
5.3 *Clinical resource development*, including: Development of an implementation toolkit for the Steps Model; Adaption of interventions and resources to support their implementation.

Psychology Informing University Practice Advisory Board

Terms of Reference

1. Background

Psychology Informing University Practice ('PsychUP') has been set up improve the knowledge base about mental health at university, develop models of mental health care and cross-sector care pathways, engage key stakeholders (e.g. students, members of staff, student service leads and university senior leaders) and promote the principles of evidence-based practice to the Higher Education support sector. The PsychUP university partner is UCL; however, the programme has a national focus, aiming to support the sector and drive quality improvement.

2. Role and purpose

The role of the Advisory Board is to provide strategic advice in support of programme strategy and activity. This will include clarification of priorities, development of plans to address priorities, oversight of activity and identification of new opportunities for the programme. PsychUP aims to develop cross-sector models of care and the Advisory Board will draw on their experience across relevant sectors to advise on feasibility of implementation.

3. Duties and responsibilities

3.1 Advise on programme strategic direction and priorities.
3.2 Maintain a close working partnership with the Student Steering Group.
3.3 Ensure two-way sharing of information with project governance groups (e.g. research project Expert Reference Groups; NHS Integration Operational Group).
3.4 Make recommendations for implementable cross-sector mental health pathways for students.
3.5 Advise on appropriate structures for local decision-making, as needed.
3.6 Inform the programme team of funding or other strategic opportunities.
3.7 Champion an evidence-based approach to improving mental health for students and staff.
3.8 Contribute to publications, reports and other programme outputs, as appropriate.
3.9 Help raise the profile of the programme nationally.

4. Membership

Prof Mike Roberts (Chair), Managing Director, UCLPartners
Prof David Clark CBE, National Clinical & Informatics Advisor for IAPT; University of Oxford
Prof Peter Fonagy, Head of Division, PALS, UCL; PsychUP Director
Prof Deborah Gill, Pro-Vice-Provost (Student Experience) & Director of Medical School, UCL
Prof Tim Kendall, National Clinical Director for Mental Health, NHS England
Prof Stephen Pilling, Head of Department, Clinical, Educational and Health Psychology; PsychUP Director
Prof Sasha Roseneil, Dean of Faculty of Social Science, UCL
Fiona Ryland, Chief Operating Officer, UCL
Sir David Sloman, NHS Regional Director for London
Prof Alan Thompson, Dean of Faculty of SLMS, UCL
Rosie Tressler OBE, Chief Executive Officer, Student Minds

Dr Vincent Kirchner, Medical Director, Camden & Islington NHS Foundation Trust

Members of the Board must declare any conflicts of interest in relation to decisions considered. The Chair will determine whether it is appropriate for members with a conflict of interest to vote on any particular matter.

5. Meetings

The Board will meet quarterly, usually in April, July, November and January.

The minimum number of people that must be in attendance for meetings to be Quorate is half of the Board membership.

7. Transparency

Advisory Board meeting agendas, papers and minutes will be made available on the PsychUP website.

8. Advisory Board secretariat and contact

Dr Laura Gibbon, PsychUP Coordinating Director: l.gibbon@ucl.ac.uk

Psychology Informing University Practice

Steps summary

This paper sets out key summary points of the Steps Model in brief – a more detailed paper setting out the background is appended for information.

1. A pragmatic model of care

1.1 Starting assumptions

A workable model of care for the student population should:

- Titrate treatment to need (NICE recommends 'stepped care')
- Be developmentally appropriate (69% of students are under 25 years)
- Facilitate partnership working with NHS services

1.2 Meeting these assumptions

The Steps Model brings together the stepped care model common across NHS adult mental health services, so that active treatment maps on to services providing treatment for this population (steps 2-4), with iThrive, an NHS Innovation Accelerator model for organising mental health care for young people, to ensure care is developmentally appropriate (steps 1 and 5).
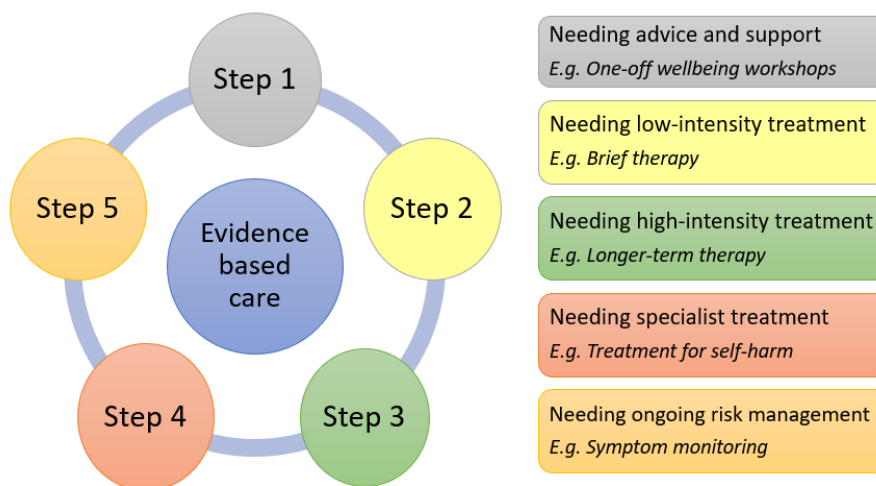

Figure 1: Conceptual diagram of the Steps Model

2. Translating the Steps Model into practice

Evidence-based treatment and support may be delivered by a range of services. Steps is therefore a whole-system model, implementation of which will require cross-sector collaboration.

2.1 Case study: UCL

An approximation of the current care pathway for UCL students (Figure 2), sketched following a 'mapping workshop' held with service leads from university and NHS services in September 2019, demonstrates several key points:

- Cultural and practical differences between services mean the guiding framework used by service leads to organise university, NHS and third sector services is 'provider type'
- Students are 'signposted' through the system (signified by grey arrows) through recommendations to self-refer to another service if they enter through the 'wrong door' for them. This increases the likelihood of drop out, particularly for vulnerable students.
- Data is collected and outcomes evaluated in an *ad hoc* way across the pathway, with different services using different approaches, measures and systems to collect data.
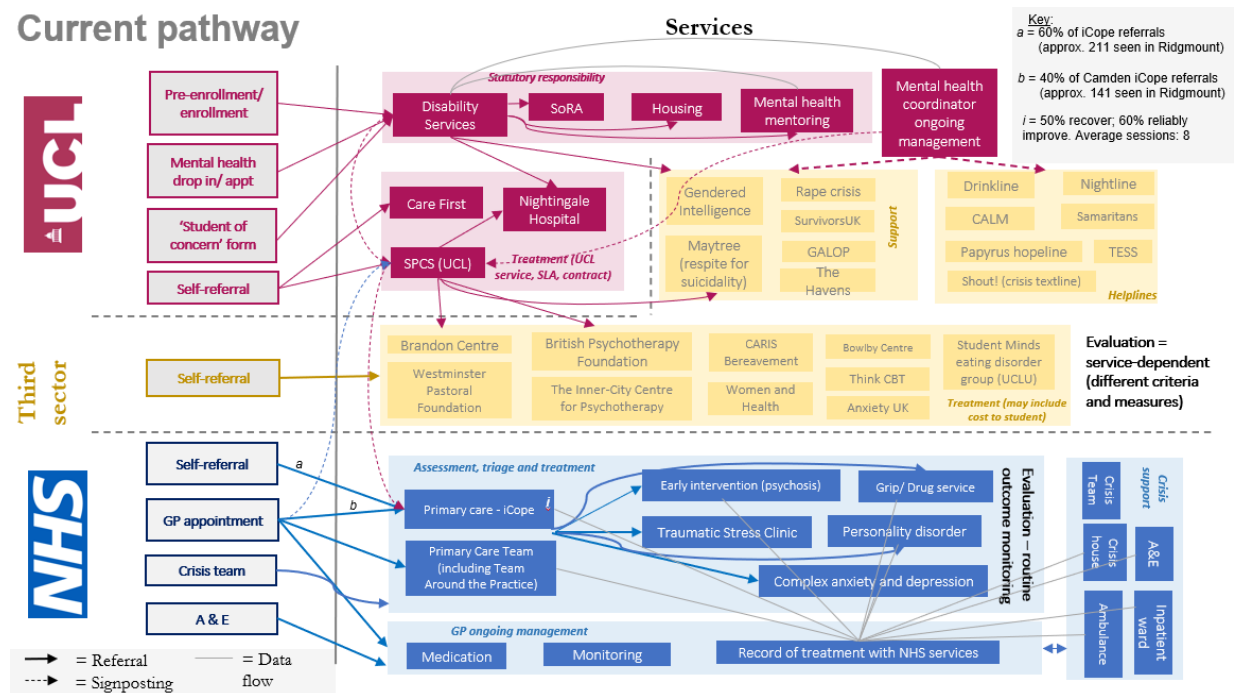

Figure 2: Current mental health care pathway for UCL students

In contrast, recommendations arising from the Steps Model include:

- A 'no wrong door' approach, including better consistent approaches to assessment and triage, and better integration of services to support direct referrals and shared assessments where appropriate.
- Conceptual organisation of services and interventions according to their function and the evidence for a positive outcome, rather than provider type.
- Clearly-defined outcomes for different steps and collection of appropriate data to evaluate outcome.

The services in Figure 2 are shown in a re-imagined Steps-informed care pathway in Figure 3.
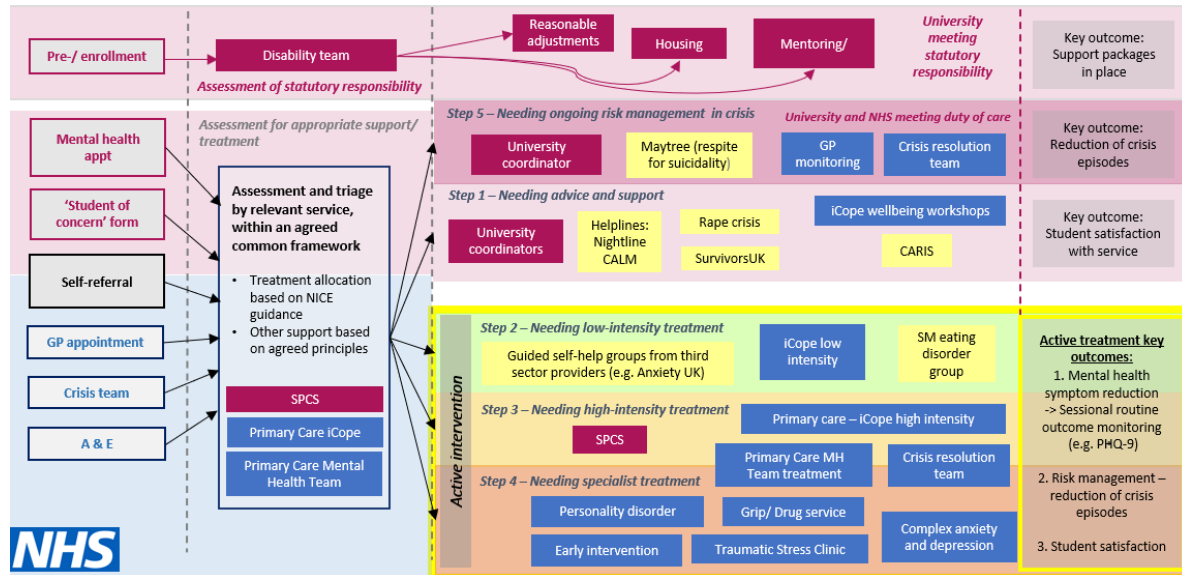

Figure 3: Care pathway showing current services available to UCL students, organised according to the Steps Model

3. Co-producing effective pathways

Developing care pathways beyond this conceptual framework requires, at a minimum:

- Assessment of population need
- Auditing of available support and the function of this support
- Adaptations to interventions, where required, and targeted development of new interventions to address unmet need
- Agreed principles of assessment and triage, to identify the right support for each student
- A user interface to assist with navigating support
- Cross-sector database systems to support data collection and comparison of outcomes across services
- Ongoing evaluation of outcomes and quality improvement.

The next stage of the project is to develop these aspects of the model is collaboration with service users and providers.

3.1 Case study: Identifying unmet need

A peer research project (an MSc student's dissertation, 2018/19) looked at the experiences of students supporting a friend with suicidal ideation, or who had attempted or completed suicide. One of her research questions was to identify the types of support these students would like UCL to provide. Figure 4 shows the reimagined Steps care pathway (Figure 3) augmented with students' recommendations for a drop in crisis café, provision of more practical advice and peer support.
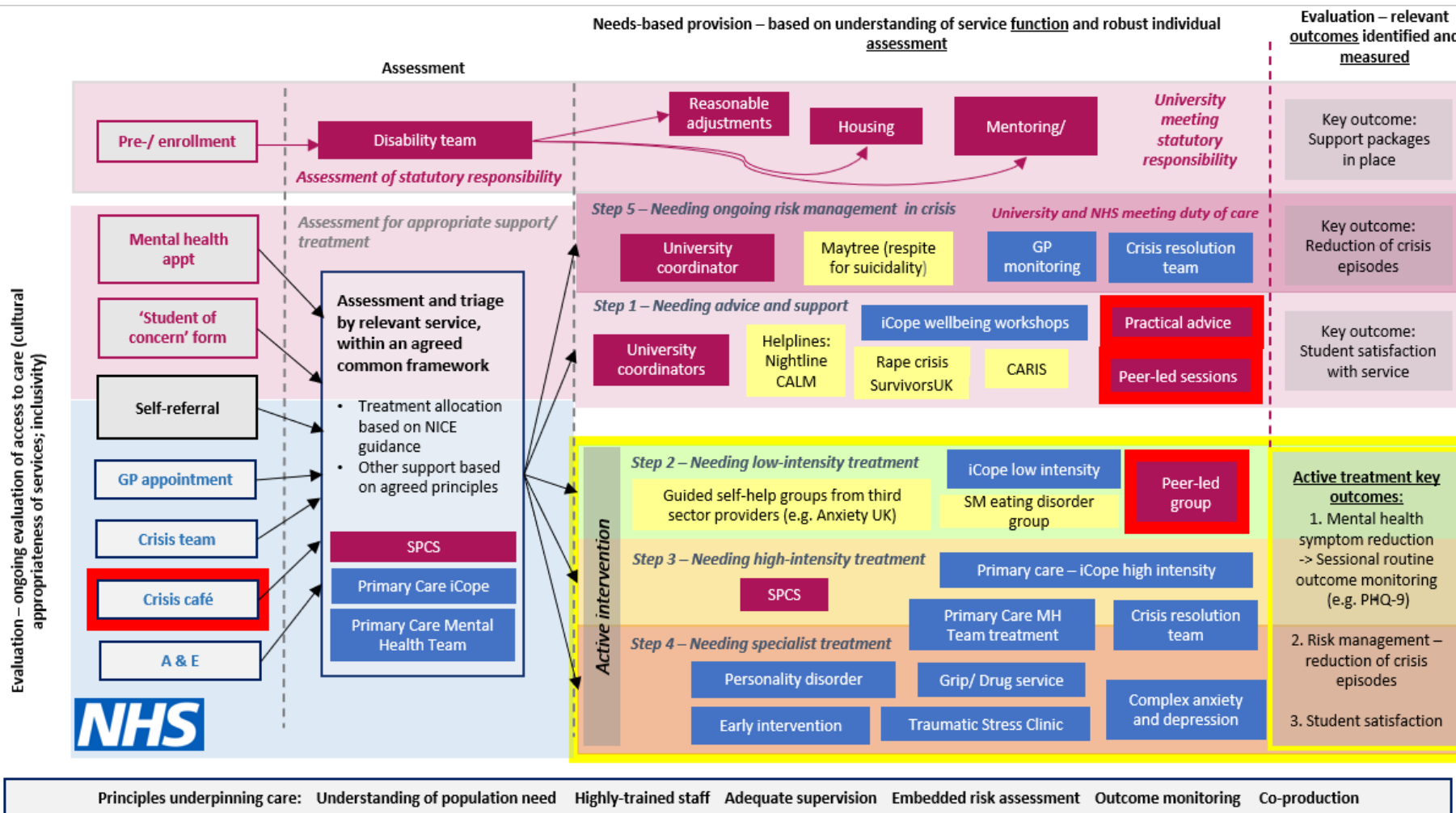
Figure 4: Steps care pathway, augmented with student recommendations from a peer research project (highlighted red)

Office for Students-funded Student Mental Health Partnerships project

Project summary

1. Student Mental Health Partnerships national project

Student Mental Health Partnerships is a national project, funded by the Office for Students over two academic years for the purpose of developing improved models of care in five city 'Hubs' in England. The project is led by the University of the West of England, Bristol.

1.1. National project aims

- Improve access to care for students
- Co-produce the design and delivery of care with students and practitioners
- Drive innovation
- Shape policy
- Evaluate different models of partnership working

1.2 Hubs and partners

- *National partners*: Universities UK, NHS England, Public Health England, the Academic Health Science Network, Student Minds, NHS Confederation Mental Health Network
- *North London Hub*: UCL, UCL Student Union, Camden & Islington NHS Foundation Trust, Imperial College London, Imperial College London Student Union, Central and North West London NHS Foundation
- *Bristol Hub*: University of the West of England Bristol, UWE Bristol Student Union, University of Bristol, University of Bristol Student Union, North Bristol NHS Trust
- *Sheffield Hub*: University of Sheffield, Sheffield Health and Social Care NHS Foundation Trust
- *Manchester Hub*: University of Manchester, University of Manchester Student Union, Greater Manchester Mental Health NHS Foundation Trust
- *Liverpool Hub*: University of Liverpool, Mersey Care NHS Foundation Trust

2. North London Hub

2.1 North London Hub aims

The care pathway to be implemented in North London is the Steps Model (an objective of the UCL Health and Wellbeing Strategy). The aims of this project are to initiate the process, through:

- Co-producing care pathways with students
- Improving access to NHS support on campus, by setting up a University Clinic
- Facilitating shared working between university, NHS and Student Union services

2.2 Project oversight at UCL

Project activity at UCL is overseen by the NHS-Integration Operational Group (NHS-IOG). The group is comprised of 15 members, with representation from UCL Student Support and Wellbeing, Student Union UCL, student representatives (project student fellows), Camden and Islington NHS Foundation Trust, primary care services and PsychUP.

3. Co-producing care pathways with students

3.1 IMPACTS

A peer research project, where BSc and MSc students interview other students about barriers to them accessing support and, where they have accessed support, their experiences of it, is ongoing. The experiences of three broad groups of students have been looked at to date:

- Demographic (British Asian; Chinese; male)
- Particular mental health presentations (eating disorders; self-harm; depression; anxiety)
- Particular experiences (sexual assault; abusive relationship; supporting a suicidal friend)

In addition to arranging for the peer researchers to present their findings to key people at the university and beyond, Trainee Clinical Psychologists on placement with PsychUP are starting to work with the peer researchers and professionals to identify potential changes to support (e.g. adapted interventions; recommendations for access campaigns).

3.2 Student-led consultations

Four student fellows (two each from UCL and Imperial College London) have been recruited to lead student consultations on four themes during the 2020/21 academic year:

- Data sharing
- Evaluation of the national project
- Expectations of university and NHS services and how public health messages are received
- Non-treatment interventions, including peer support and social prescribing

4. Improving access to NHS support on campus: the University Clinic

4.1 University Clinic: psychological treatment

University-run psychological treatment clinics are a mainstay of clinical psychology training and practice in other parts of the world, especially US and Australia, but less common in the UK due to the fact the majority of mental health care is provided by the NHS. Clinics that do exist in the UK are recognised as providing extremely high quality care.

The Division of Psychology and Language Sciences is funded by Health Education England to train a large number of clinicians (150 Trainee Clinical Psychologists; 270 Trainee Psychological Wellbeing Practitioners), supported by 25 Clinical Tutors. This provides an opportunity for the development of an NHS-based University Clinic at UCL, to provide treatment for our students and potentially also members of the public.

Agreement has been reached between UCL and Camden & Islington NHS Foundation Trust legal teams for their IAPT service, iCope, to start providing treatment to UCL students on campus in UCL buildings. At present, NHS funding arrangements are such that treatment is only available to students registered with a Camden or Islington GP, although attempts are being made to address this issue with the NHS England IAPT national team.

4.2 University Clinic: workshops

iCope has started providing one-off wellbeing workshops on the topics of Perfectionism, Stress and Relaxation, and Assertiveness, to all UCL students. Student experience data is not available due to the lockdown, but initial indications are that students have had positive experiences of the workshops.

Future plans for developing the workshop programme include evaluation of different modes of digital delivery whilst the university is working remotely (e.g. pre-recorded psychoeducational lectures; combined pre-recorded lectures with interactive follow up sessions). Adaptations to the content of workshops for different demographic groups are being considered (e.g. for Chinese students), as is the development of new workshops in line with findings from the IMPACTS project (e.g. healthy relationships).

5. Facilitating shared working

5.1 Workshops

PsychUP is currently facilitating a discussion between UCL Student Support and Wellbeing and iCope about the delivery of workshops on exam stress.

5.2 Development of peer support at UCL

Feedback from the UCL Student Union and several IMPACTS peer research projects (e.g. see section 3.1 of 'Steps summary') is that strengthening peer support may help improve access for particular groups of students, which may be especially important whilst the university is working remotely. However, a challenge is how to ensure peer support in the university context is delivered safely.

PsychUP Director Stephen Pilling has led a partnership between UCL, UCLPartners, the National Collaborating Centre for Mental Health and Health Education England to develop a Peer Support Worker Competence Framework for Mental Health. This framework specifies skills and abilities a Peer Support Worker would need to have within particular domains, in order to provide peer support safely and effectively. The focus on behaviourally-specific competencies in the framework is the basis for curricula and training to support development of relevant skills. Funding has been obtained from Health Education England to adapt the existing framework and training materials for the student population.

Initial plans are being made for peer support training and support to be provided by PsychUP to the Student Union from the start of the 2020/21 academic year. The details are to be agreed, but the project may involve training the Student Union's extensive network of society wellbeing officers and developing peer support groups.