

JOINT STUDENT MENTAL HEALTH COMMITTEE

A Common Approach to Support Student Mental Health

Student Version

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PREFACE FOR STUDENTS

The Common Approach is a framework which sets out the standard provision that students can expect from their college and department, and from central University services, to support their mental health. The Collegiate University recognises that studying at higher education level can present a range of unique stresses and challenges, and takes seriously its responsibilities and commitment to create an environment which supports good mental health and the wellbeing of its student members. There are many ways in which this is achieved, and the provision and approach is outlined in the sections below; including where support falls beyond scope of an educational institution and should be accessed from external statutory healthcare and voluntary service providers.

Students are also key to this Common Approach because they have responsibilities for looking after their own mental health, and can do so in the following ways:

- Maintain communication with your college and department, and let them know if you need help;
- Seek support when needed (e.g., self-referring to the University Counselling Service);
- Support fellow students as part of a community (see Section 3.1);
- Students with a mental health disability should register with Disability Advisory Service (DAS) for structured support, ideally well before they arrive at Oxford;
- and, where students who are high-risk of serious self-harm and have been assessed by a medical professional, they are encouraged to share their personalised care plan with college welfare teams to ensure there is a shared understanding in relation to risk management and ongoing support.

1 SUMMARY

- 1.1. The Common Approach is a high-level framework which sets out some common expectations required of students, colleges and departments to support student mental health. It also describes the role of central Student Welfare and Support Services and the limits of reasonable provision. The Common Approach was noted by Conference and Education Committee on 16 February 2023 and recommended for adoption by the collegiate university.
- 1.2. The Common Approach is supported by existing policies and frameworks across the collegiate university including: the Student Mental Health Policy, [Support and Fitness to Study procedures](#), the Student Wellbeing and Mental Health Strategy¹, and the Common Framework on Supporting Disabled Students.
- 1.3. The collegiate university operates within the wider HEI sector and is subject to regulation by external bodies. The Office for Students offers advice and guidance on how the higher education sector can respond to the challenge of student mental health², which provides context for this common approach. The Common Approach is owned by the Joint Student Mental Health Committee, which will review the document regularly in line with changes to regulation, legislation and good practice guidance.

2 AIMS AND BASIC ASSUMPTIONS

- 2.1 The aim of the Common Approach is to provide a coherent institution-wide approach to supporting the mental health of Oxford students, by establishing a standard provision of mental health support that is required across colleges and departments without constraining those parts which can and wish to provide more.

2.2 Definitions:

The Common Approach uses following definitions for mental health, taken from the draft [University Mental Health Charter](#) and other documents from the Office for Students³:

Mental illness will be taken to mean a condition and experience, involving thoughts, feelings, symptoms and/or behaviours, that causes distress and reduces functioning, impacting negatively on an individual's day to day experience, and which may receive a clinical diagnosis.

Mental health problems or **poor mental health** will refer to a broader state that affects a range of individuals experiencing levels of emotional and/ or psychological distress beyond normal experience and beyond their current ability to effectively manage their lives.

Wellbeing is broader still and will encompass a wider framework, of which mental health is an integral part, but which also includes physical and social wellbeing.

2.3 Limits of reasonable provision:

Students are responsible for their own mental health and for seeking support appropriately. If a student has concerns about a peer, they can raise these through any of the layers of support outlined in Section 4 of this document. The University and its colleges want to create an

¹ The Student Wellbeing and Mental Health strategy considers mental health and wellbeing in a much wider context, including the impact of teaching and assessment practices.

² <https://www.officeforstudents.org.uk/advice-and-guidance/student-wellbeing-and-protection/student-mental-health/>

³ <https://www.officeforstudents.org.uk/media/b3e6669e-5337-4caa-9553-049b3e8e7803/insight-brief-mental-health-are-all-students-being-properly-supported.pdf>

environment which supports good mental health and are committed to taking reasonable steps to ensure the wellbeing of their student members. However, the collegiate University is an academic institution and there are limits to reasonable provision of mental health services in this context. Students can be signposted to both internal and external resources, and can choose whether to engage with support services, but their needs will always have to be considered in the context of the University community as a whole. The Common Approach therefore proposes that:

- a) University and College staff who are not professionally trained or qualified should not attempt to offer professional services or support beyond their expertise.
- b) Colleges and departments are not responsible for funding external interventions to address mental health issues.
- c) The Collegiate University is an academic institution, not the NHS, and is not responsible for providing mental health treatment. As with other health conditions, the role of the University is to provide support and reasonable adjustments and to work collaboratively with NHS services in order that students can successfully complete their academic studies.
- d) For individual students who present at risk of serious self-harm, the collegiate University cannot create a risk-free environment but should collectively adopt a proportionate response to mitigate risk together with external specialist services, which may mean minimal additional response⁴.

2.4 Understanding the provision of support for diverse student groups:

The structure of academic and welfare support differs across student groups and the challenges they face are diverse. Although all colleges have welfare structures and services, some students are less engaged with their colleges and are more likely to present with difficulties to their departments. This Common Approach seeks to clarify the role of departments⁵ and colleges⁶.

The Collegiate University also hosts students who do not have a college or departmental affiliation, including but not limited to those within OUDCE, visiting students solely based in a department or a college, and part-time students on open access or executive education courses. In these circumstances the departments (or college) providing those courses are responsible for welfare and mental health support.⁷

⁴ Colleges and departments should seek advice from medical professionals and Student Welfare and Support Services in the case of high-risk students. When considering the risks, colleges and departments must also take into account the impact of a student's mental state and behaviour on other students, as well as their Fitness to Study. Where students present to medical professionals (e.g., at A&E or GP surgeries) at risk of serious self-harm or suicide, those professionals will make a judgement of risk. Some students will be discharged to their accommodation despite being at on-going risk of self-harm, where the professional opinion is that, as adults with capacity, the risks are difficult to immediately modify and cannot be eliminated. The professional assessing should provide the student with a personalised plan outlining the support available, and what the student can do to reduce their risk of self-harm. Students should be encouraged to share their personalised plan with college welfare teams to ensure there is a shared understanding in relation to risk management and ongoing support. In such circumstances colleges and departments will need to determine as part of Fitness to Study whether a student in this situation is fit to remain on course and/or fit to be in residence or to remain in college accommodation.

⁵ 'Departments' in this document also refers to Faculties and Schools

⁶ 'Colleges' in this document also refers to Permanent Private Halls and societies of the University (Reuben College, Kellogg College and St Cross College)

⁷ Central welfare services are available to most categories of students (including suspended students), and its supportive resources (written/recorded materials) are open access.

3 FOUR LAYERS OF SUPPORT

The Collegiate University works hard to support students and ensure that they know where to turn when they need help. It does so through four layers of support, each designed to meet different and often escalating needs. For the welfare of both students and the staff providing support, college and departmental welfare roles should be clearly defined and appropriate professional boundaries should be understood and maintained.

3.1 Support from College and Departmental communities

Many of the diverse challenges encountered by students across the collegiate University can be overcome by talking to friends and peers. Colleges, departments and student groups offer a wide range of activities through events, sports and arts, which contribute to a balanced and healthy lifestyle. These activities provide friendship, stimulus, and stability to students, and encourage them to take proactive steps to support their own mental health. The provision of common rooms and physical spaces for clubs and societies in Colleges is important in enabling social interactions between students. This is the bedrock of good mental health.

3.2 Support from College and Departmental staff

Staff such as Welfare Officers⁸, tutors and supervisors understand the Oxford ecosystem and can refer students to appropriate avenues of support. Some colleges and departments also offer 24/7 lodge or security services, or have trained Mental Health First Aiders. These staff are not mental health professionals, so should not be offering formal counselling or mental health advice. They can be trained in active listening but should not over-medicalise normal levels of stress, or overstep professional boundaries. Colleges are not expected to provide a 24/7 emergency service for students with mental health difficulties.

3.3 Support from University mental health professionals

These include staff in the Counselling Service, Disability Advisory Service (for students with mental health disabilities), and other professionally trained groups, including College Nurses and GPs. They are not an emergency service but can offer professional support within the Oxford ecosystem. They will in turn be able to refer students on to specialist mental health services, including within the NHS. Central welfare services remain open during office hours outside of term for students to access (except for fixed closure periods over Christmas and Easter).

3.4 Support from external services and organisations

The collegiate university is not expected to provide 24/7 or year-round mental health support for students. Our support sits along external organisations such as GPs, local mental health services and emergency hospital services which are available all year. This also includes organisations like the Samaritans and other services which are available 24/7 365 days per year.

4 COLLEGE STANDARD PROVISION

There are eight standard elements of mental health provision that all Oxford colleges should provide during term-time to all students:

4.1 The friendship, stimulus and community provided by a range of activities to promote good physical and mental health.

⁸ Oxford uses different terms in different settings: 'Welfare Officers' means staff paid and trained to provide welfare support as part or all of their job.

4.2 Appropriate support and resources for those students who wish to take a more active role in supporting their peers within the college community (e.g., peer supporters, Junior Deans and JCR/MCR welfare reps).

4.3 An appropriately trained Welfare Lead, with the authority to be responsible for oversight of all aspects of welfare support in the College, and for being the contact person for the rest of the collegiate University.

4.4 A link counsellor appointed by the Counselling Service (CS) as the point of contact with the CS, a link with a Disability Advisor, and a link with the College GP practice.

4.5 A Disability Lead and a Disability Coordinator responsible for implementing reasonable adjustments for students with mental health disabilities in collaboration with the student and the department.

4.6 Colleges have a key role in managing Fitness to Study procedures primarily for undergraduate students, but also working closely with departments where there are concerns about graduate students.

4.7 Colleges should ensure that there are strong links between the work of staff responsible for discipline and the work of those responsible for welfare.

4.8 Colleges should recognise the limits to their reasonable provision of support as articulated above.

4.9 Going beyond the standard provision

Many colleges choose to provide additional support which can reinforce their mental health offering, for example a Nurse during full-term, or an on-site term-time Counsellor (contracted through the Counselling Service) who works at the college. Some colleges with large graduate populations also offer their welfare services outside of term.

This Common Approach does not seek to restrict colleges from offering beyond the standard provision if these services are compatible with the limits of reasonable provision articulated above. Some colleges use private funds to enable students to access external interventions. It is important that such support is delivered by professionals who understand the ecosystem of support in Oxford.

5 ROLE OF DEPARTMENTS

Whilst departments are not residential communities like colleges they should still offer mental health support, especially for graduate students.

5.1 The collegiate university agreed in the 2017 Student Mental Health Policy⁹ that while responsibility for the welfare of undergraduates lies primarily with colleges, the responsibility for graduate students is shared between colleges and departments. The vast majority of students at Oxford belong to a college and for those students colleges have a primary responsibility for pastoral care. Close collaboration between departmental and college welfare staff (and Student Welfare and Support Services) will be necessary to provide effective, joined up support to students, particularly for students experiencing mental illness.

⁹ Section 3.1 of the policy states “In the case of graduate students, colleges and departments have a joint responsibility”

5.2 Departments have a key role in managing [Support and Fitness to Study procedures](#) for graduate students, working closely with colleges who have concerns. This includes liaising closely over requests for extensions, suspensions etc.

5.3 All departments should have a single, appropriately trained Welfare contact, responsible for being the contact person for the rest of the collegiate University. In some cases, it may be more appropriate to have one Welfare contact for undergraduates and one for postgraduates. Details for the welfare contact(s) (at minimum an email address) and whether these are out of hours contacts should be clearly shared on departmental webpages so that students know who to contact.

The role of the departmental Welfare contact is primarily a first point of contact for the student, signposting them to available support and key contacts within the department, college, Student Welfare and Support Services and external agencies¹⁰.

In addition to the Welfare contact, all departments should support other staff members in appropriate roles to be trained in active listening, signposting and navigation skills. Departments can also support students to become Peer Supporters through [Peer Support Training](#)¹¹. Peer Supporters can work closely with Departmental/Divisional welfare teams and other professional support networks/services to signpost their peers to the support they need. It is highly recommended that all Welfare Contacts undergo training from the Counselling Service so that they understand their role and its limits, and how to support students in distress.

Each department should have a Disability Lead and a Disability Coordinator responsible for implementing reasonable adjustments for students with mental health disabilities in collaboration with the student and the college.

Departments should recognise the limits to their reasonable provision of support as above.

6 ROLE OF DEPARTMENTS FOR STUDENTS WITHOUT A COLLEGE

For those students on courses without a college affiliation, the hosting department has a degree of responsibility for helping students to manage their mental health and for responding to serious mental health difficulties. This comes partly from the community and activities provided by the department, but mainly through their appointment of a trained Welfare contact.

7 ROLE OF THE CENTRAL STUDENT WELFARE AND SUPPORT SERVICES

The colleges and departments have an important role in signposting their students to the central Student Welfare and Support Services ([Welfare and Wellbeing | Oxford University](#)). In complex cases, the Director of Student Welfare and Support Services and the Head of the Counselling Service can provide central expert advice to college and departmental staff. The routes to central services differ:

7.1 Students with a mental health disability should apply for structured support from the Disability Advisory Service (DAS), ideally well before they arrive at Oxford. Early registration is

¹⁰ Effective signposting in this context involves ensuring that students do not have to repeat the personal details of their issues, but that they are encouraged to disclose to the most appropriate person.

¹¹ The peer support scheme is currently available in the Nuffield Department of Population Health, Department of Education, Department of Geography, Said Business School. Peer supporters are also available to all students in the Medical Sciences Division.

vital so that the DAS have sufficient time to set up Student Support Plans and apply for disability support funding. The DAS liaise with college and departmental Disability Coordinators to arrange support where needed. Further detail is available on the [Disability Advisory Service website](#).

7.2 Students experiencing mental health difficulties can self-refer to the Counselling Service, and can also be referred by welfare staff in colleges or departments. The CS is open-access, which means that any student can refer themselves for counselling, for any reason, for the duration of their studies at Oxford. The CS helps students to address personal or emotional problems and to realise their full academic and personal potential through therapeutic interventions, groups and workshops. It does not offer out of hours or emergency services to students and does not provide treatment for mental health conditions. Further detail is available on the [Counselling Service website](#).

7.3 Students who need longer or more specialised therapeutic treatments to help address psychological difficulties will need to be referred to the appropriate NHS medical, psychological or psychiatric services.

7.4 Students experiencing poor mental health who are enrolled on course but away from Oxford on placements, fieldwork, research trips or other activities can access central welfare services.¹²

7.5 Central welfare services cannot offer emergency provision or medical care. These services also operate within the limits of reasonable provision.

Recommended February 2023

Reviewed and revised September 2025

Links updated October 2026

¹² Although there may be limits to what can be provided for those overseas.