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Student of Concern Policy and Procedure

Approved by:	Student Experience Committee
Version no:	1.1
Date of approval	February 2025
Next review due:	November 2028
Last version approved:	November 2024
Changes since last version:	Reference to new student support line in: • Additional Appendix (the BIMM Student Support Line Poster) • section 5.2 (suicidal ideation) • An additional section (7) – out of hours support • Appendix C – (student in crisis action plan flowchart)

Contents

1. Applicability
2. Purpose and scope
3. Identifying a concern
4. Emergency and urgent need / acute risk
    a. Emergency need (imminent risk to self)
    b. Emergency need (imminent risk to others)
5. Serious concerns
6. Reporting a concern
7. Related Policies and Procedures

Appendices

- Appendix A – Risk assessment procedures for Student Wellbeing services
- Appendix B – Acute risk factors
- Appendix C - Student Crisis Action Plan flowchart
- Appendix D – Campus CPOMS infographic
- Appendix E – BIMM Student Support Line
- Appendix F - Counselling Service Suicide Risk flowchart

1. Applicability

1.1. This policy and its related procedure apply to students on BIMM University's higher education programmes who are 18 years of age or over. It covers situations which fall outside the scope of BIMM University's Safeguarding Policy, such as general student concerns relating to mental health and wellbeing.

1.2. The University's Safeguarding Policy relates, in the most part, to legal compliance for safeguarding those under the age of 18. It also applies to vulnerable adults and those who might be at risk of exploitation, trafficking, abuse or radicalisation.

1.3. This policy is most relevant for staff who work directly with students, however all members of the BIMM University community are required to familiarise themselves with this policy and to take steps to report any relevant concerns in accordance with the procedure set out below.

2. Purpose and scope

2.1. This purpose of this policy is to provide guidance to staff who may be concerned about a student's health, welfare or wellbeing, to help them decide the level of risk and identify appropriate internal and external sources of support to which students can be referred. It will provide a framework for reactive crisis management in cases occurring on campus where high risk has been identified and the probability of a student causing harm to themselves or others is considered both imminent and high.

2.2. All forms of suicidal ideation and threats of harm to self or others by students will be taken seriously. Any student seeking support from the Student Wellbeing service may be asked questions relating to risk of harm to themselves or others, in line with the Student Wellbeing risk procedure (See Appendix A).

2.3. When in doubt as to whether a situation is high or low risk, the default response must be in line with the **Emergency and urgent need** / **acute risk** category.

2.4. Concerns about students who may be at risk of radicalisation, regardless of age, as set out in the Prevent Duty Policy, should be reported to the Campus Designated Safeguarding Lead who is the Local Prevent Lead, using the procedure set out in BIMM University's Safeguarding Policy.

3. Identifying a concern

3.1. There are several ways in which you may come to know that a student is experiencing difficulties with their mental health or wellbeing. The student may disclose their difficulties to you directly or indirectly, for example by telling you in conversation that 'things are a bit difficult'. Listening and responding calmly in these situations can help you to determine whether the student might benefit from further support. Do express concern but, particularly for staff outside Student Wellbeing, be wary of giving advice that is beyond the boundaries of your role (unless you are a trained Mental Health First Aider).

3.2. You may also become concerned about a student because of their behaviour or comments from other students. Examples of factors which may indicate an underlying issue include:

- Other students approaching you to tell you that they have concerns.
- Regular absence or lateness
- Changes in the way the student engages with their work, such as a lack of concentration or inability to think things through.
- Working very long hours and a lack of balance between study and other activities
- Presenting as unpredictable, disruptive, or withdrawn
- Presenting as agitated, irritable, aggressive or sad.
- Lack of concentration, lack of energy/fatigue
- Poor personal hygiene or unkempt appearance
- Sudden changes in appearance or behaviour
- Smelling of alcohol or showing signs of taking drugs
- Visible bruising, cuts, or scars
- Difficulties initiating and maintaining social relationships.

3.3. Individuals may be more likely to contemplate suicide, self-destructive acts, harming self or others at certain points in their lives or if certain conditions exist. These factors will be considered, as appropriate, by Student Wellbeing staff when meeting with students and assessing risk. (See Appendix A – Acute risk factors.)

3.4. If you have concerns about a student having spoken to them or observed some of the behaviours listed in 2.2, the next step is to determine how urgent the issue is. The sections below provide guidance to help you determine where the concern falls within the categories of:

- Emergency and urgent need / acute risk
- Serious concern
- Other concern

3.5. When in doubt as to whether a situation is high or low risk, the default response must be in line with the **Emergency and urgent need** / **acute risk** category.

3.6. A BIMM University Student Crisis Action Plan flowchart is available in Appendix C.

3.7. In all situations, if a student has a diagnosed long-term medical condition, a physical disability, a Specific Learning Difficulty (SpLd), or a mental health condition, they can seek

support from the Learning Support Co-ordinator who can help support them in applying for Disabled Student Allowance (DSA), where applicable, which can offer a range of supports.

4. Emergency and Urgent Need / acute risk

4.1. Emergency need (imminent risk to self):

When a student is in immediate danger of harming themselves or have indicated that they either have, or are considering, steps to take their lives (i.e. have taken an overdose or have made a very recent suicide attempt or have clear plans to harm themselves and have the means, or have posted what looks like a suicide message on social media):

- Communicate clearly to the student that you do not want them to take their life / harm themselves and that you will stay with them in person (or on the phone) whilst you seek assistance for them.
- If on campus, explore with the student if they feel safe enough to go to the nearest A&E Department accompanied by a friend (if available) or a Student Wellbeing member of staff if no one else is available.
- In other circumstances, including if the student is unable or would not go to the hospital themselves, call 999 (UK) or 112 (Germany and Ireland) to request an ambulance, informing the call handler that the student is at acute risk. Pass on any health information about the student, if necessary (e.g. they have swallowed 50 paracetamol).
- Where appropriate, inform the campus Information Hub that an ambulance has been called and ask them to alert Campus & Technical Services to direct emergency services on arrival.
- Whilst on campus, or if escorting the student to A&E, do not leave the student alone until they have been registered at reception or triaged, according to your professional judgement.
- Ask the student to help you keep them 'safe for now' by giving you any means they may have on their person to harm themselves or others (as far as reasonable and where this is safe for you, such as handing over pills). Anything taken in this way should be bagged by Campus & Technical Services and made secure. It may be necessary to return any such item to the student at a later date.
- Notify the campus Student Wellbeing team.
- The campus Student Wellbeing Manager (or nominee) should follow the Trusted Student Contact procedure to determine whether to contact the student's Trusted Contact.
- The campus Student Wellbeing Manager (or nominee) should inform the Campus Dean and Head of School as soon as possible.
- Record the incident on CPOMS.
- Consult your manager, or the first available manager, and seek support for yourself.

4.2. Emergency need (imminent risk to others):

If a student is posing a risk to others, is violent or under the influence of substances and behaving in a concerning manner, it is paramount that your safety and that of others, including the individual, is prioritised:

- Try to remain and appear calm and adopt a non-threatening approach
- If there are other students nearby, calmly ask them to leave the area
- Alert the campus Information Hub and ask them to call the Police on 999 and alert Campus & Technical Services.
- Notify the campus Student Wellbeing team.
- The campus Student Wellbeing Manager (or nominee) should follow the Trusted Student Contact procedure to determine whether to get in touch with the student's Trusted Contact.
- The campus Student Wellbeing Manager (or nominee) should inform the Campus Dean and Head of School as soon as possible.
- Make a CPOMS report.
- Consult your manager, or the first available manager, and seek support for yourself.

5. Serious Concerns

5.1. **Prolonged Absence (where you are concerned for that student's wellbeing or safety)**
The University has a Student Engagement Policy with responsibility for attendance monitoring shared between several teams including Academic Administration, academic staff and Student Wellbeing.

Where you have specific concerns about a student's attendance, please discuss this with the campus Student Wellbeing team in the first instance. They will be able to attempt to contact the student using additional contact information, such as mobile phone number or private email address. Where the student remains uncontactable, a CPOMS report should be made by Student Wellbeing.

Where the student is suspected to be missing, a decision may be taken by the Student Wellbeing Manager, in consultation with the Head of Student Wellbeing and/or Campus Dean to report this to the police.

Once the student is located the Student Wellbeing team will offer advice as appropriate.

5.2. **Suicidal Ideation**
Suicidal feelings (ideation) can range from having abstract thoughts about ending your life or feeling that people would be better off without you, to having an active plan to take your own life. Someone is considered to be at high risk if they have current active suicidal plans or thoughts (see Appendix B).

If a student is reporting suicidal thoughts and intent to harm themselves, even if it appears they have not acted on these thoughts or are not sure if they have or will, it is important that you alert the campus Student Wellbeing team immediately either by phone, or in person. Once you have done so, please complete a CPOMS report. The Student Wellbeing team will contact the student as a matter of urgency (Monday to Friday outside of closure periods) to offer support or signpost the student to relevant external services.

If it is out of hours, and you feel the student requires immediate support, ask the student for permission to pass their contact information onto a crisis service:

UK:
Call NHS 111
Samaritans on 116 123

Berlin:
Berlin Crisis Service - ENGLISH (EN) | Berliner Krisendienst (berliner-krisendienst.de)

Dublin:
HSE emergency services 112
Pieta House 1800 247 247

Students should also be encouraged to contact the BIMM Student Support Line, which is available 24/7 (see section 7 and Appendix E for further information).

In the UK, students can also contact the Papyrus helpline (available 24/7) at 0800 068 41 41 (phone) or 07860 039967 (text) or email pat@papyrus-uk.org

In line with BACP guidance regarding confidentiality within University Counselling Services, BIMM University's in-house counselling service has its own procedure for assessing students at risk of suicide (see Appendix F).

5.3. **Substance abuse and self-harm**
Where it appears that a student is misusing drugs or alcohol or you become aware that they have harmed themselves, you should complete a CPOMS report. The Student Wellbeing team will normally contact the student within 24 hours (Monday to Friday outside of closure periods) to offer support or signpost the student to relevant external services.

5.4. **Homelessness**
Where a student is homeless or at risk of homelessness, you should complete a CPOMS report and the campus Student Wellbeing team will then respond to offer advice and support, which may include referral to local authority housing services.

5.5. **Experience of sexual assault**
If a student discloses a sexual assault to you, you should advise them to contact their nearest Sexual Assault Referral Centre (UK); Dublin Rape Crisis Centre (1800 77 88 88) Sexualisierte Gewalt (Berlin) and to complete the Reporting Form. The campus Student Wellbeing team will normally contact the student within 24 hours (Monday to Friday outside of closure periods) to offer support or signpost the student to relevant external services. Outside of these times, information on reporting and seeking support for sexual assault is available on the relevant campus Student Wellbeing SharePoint site.

5.6. **Other concerns**

Where you have noticed **poor engagement and/or frequent absence** due to suspected health or wellbeing issues, you should complete a CPOMS report and the campus Student Wellbeing team will then contact the student to arrange a meeting to explore the reasons and identify supporting actions. In some instances, it may be appropriate to invoke the Fitness to Study Policy. You can also signpost the student to the Student Wellbeing team and encourage them to make contact themselves.

Long term physical health conditions, such as long COVID or chronic pain, may well impact on the student's ability to engage (particularly with performance-based courses), so it is important that students are offered support with managing the condition. Please seek advice from Student Wellbeing to see what support might be available.

Students experiencing **financial or accommodation issues** can be directed to the Student Wellbeing team.

Students experiencing a **general deterioration in their mental health** should be encouraged to refer themselves to Student Wellbeing. If they are distressed you should find a quiet space for them to sit and if, possible check in with them again after a short period. If you're unsure how to deal with the situation, contact the campus Student Wellbeing team for advice.

6. Reporting a Concern

6.1. The safeguarding reporting tool CPOMS should be used by all staff to log any incident or concern about a student, even when unsure whether it is a safeguarding issue. This will send an alert to the Campus Designated Safeguarding Lead (DSL). Whilst those involving students who are 18 or over are less likely to be deemed safeguarding issues, it is still essential that the DSL is alerted via CPOMS where there are any concerns about student wellbeing. The report should be completed as soon as is reasonably possible, with as much detail as possible, including student's name and contact details. A campus CPOMS infographic is available at Appendix D.

6.2. If a student shares an issue to you, you should advise them that you will note down the key points and make a report to Student Wellbeing (via CPOMS). You should not promise to keep the disclosure confidential and, where possible, you should encourage the student to contact Student Wellbeing themselves.

6.3. CPOMS Training videos are available as follows:

- Logging in for the first time
- Resetting your password
- How to report an incident

There are also support materials and guides on the Central Application support page – Business Applications Resources for Staff

All staff on the People HR system, including freelancers, have access to CPOMS when using their BIMM email address. If you do not have access, and need to report a concern, contact the campus Student Wellbeing team.

6.4. Once a report has been made, due to confidentiality restrictions, Student Wellbeing may not always be able to provide you with further information about the student's circumstances or any resulting actions but, where possible and appropriate, they will ensure that you are kept informed.

6.5. In all instances, where appropriate, and particularly in the event of an acute crisis, the campus Student Wellbeing Manager (or nominee) should inform the Campus Dean and Head of School as soon as possible.

7. Out of hours support

7.1. In all emergency situations, the procedure set out in section 4, above, should be followed.

7.2. Out of hours, where you are concerned about a student but, do not consider it to fall within the category of emergency and urgent need/acute risk, the student should be advised to contact the BIMM Student Support Line. The service is run on behalf of the university by Spectrum Life, and offers mental health support 24 hours a day, 7 days a week, every day of the year:

- UK: 0800 031 8227
- Germany: +49 800 082 6970
- Ireland: 1800 851 340

7.3. Further details are available in Appendix E.

8. Related policies and procedures:

- Safeguarding Policy
- Student Code of Conduct
- Fitness to Study Policy
- Suicide Safer Strategy
- Prevent Duty Policy
- Bullying and Harassment Policy & Procedure
- Sexual Misconduct Policy
- Student Disciplinary Procedure
- Student Wellbeing Strategy
- Student Trusted Contact policy
- Student Engagement Policy

In addition, this policy operates in line with the BACP Ethical Framework (2018).

Appendix A - Risk assessment procedures for Student Wellbeing services

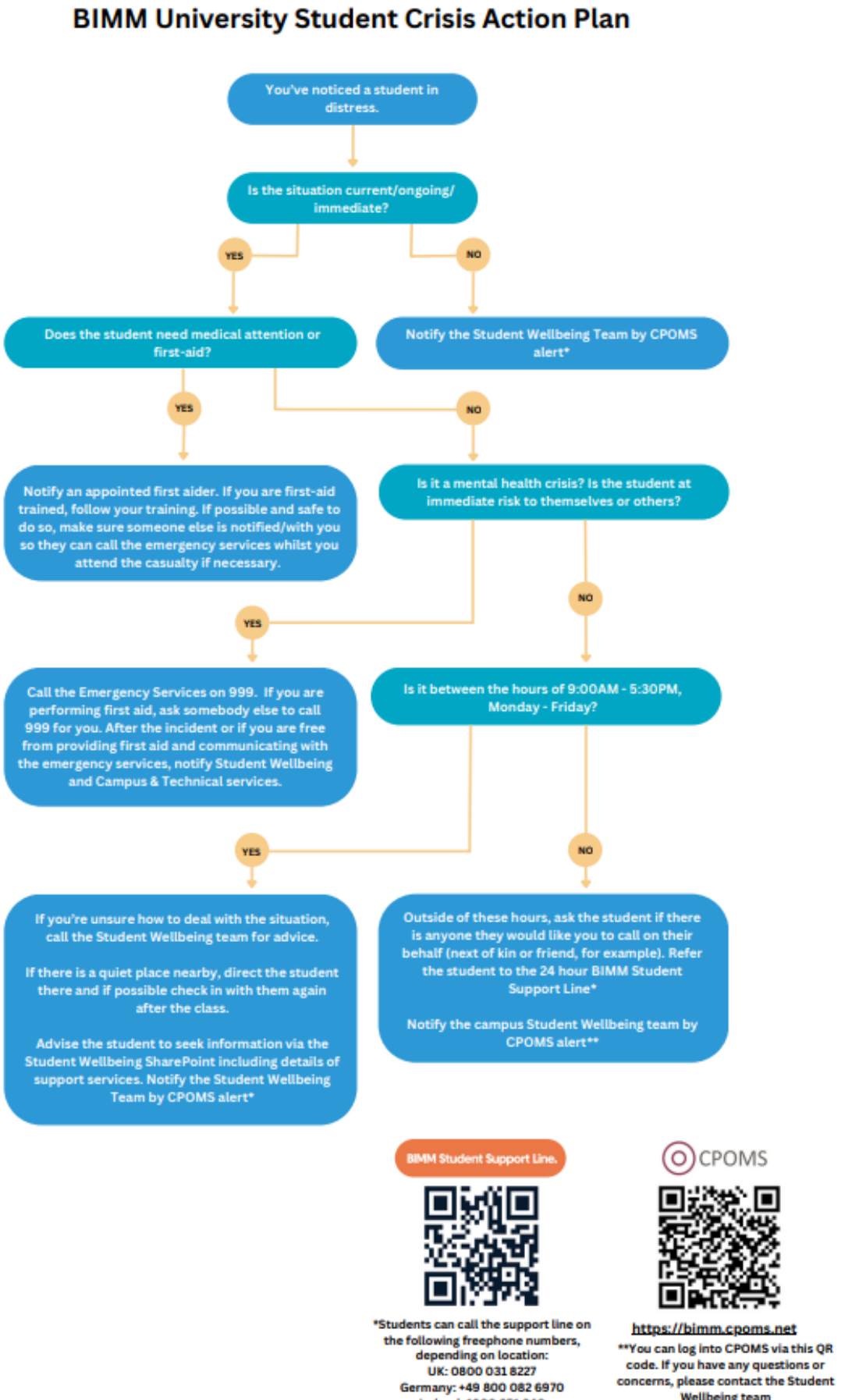
1. A student's capacity for suicide risk/harm to self or others will be discussed with the student, as appropriate, initially by a suitably trained member of Student Wellbeing wherever possible.
2. The student will be asked questions relating to risk in accordance with the training of the team member working with them.
3. If the student appears to be at high risk, then the procedures in section 3 of this policy should be followed.
4. If a student is expressing risk of harm to self or others, but this may not be imminent and they are 'safe for now', then an appropriately trained adviser should discuss risk with the student and fully explore this issue. Where appropriate, a safety plan should be developed with the student.
5. If the student appears not to be at imminent risk, then the adviser should document the discussion of risk with the student and seek advice/discuss this with their line manager as soon as possible.
6. Members of Student Wellbeing working with students who may be at risk will continue to review risk regularly with the student, as appropriate.
7. Students expressing suicidal thoughts may also be referred to their GP or other mental health professional for further mental health assessment.
8. If a student has been aggressive or behaved in an unacceptable manner to a member of staff or other person(s) on campus or over the phone, then a full report needs to be provided, and an investigation may follow in line with the Student Disciplinary Procedure or the Fitness to Study Procedure as appropriate.

Appendix B - Acute risk factors

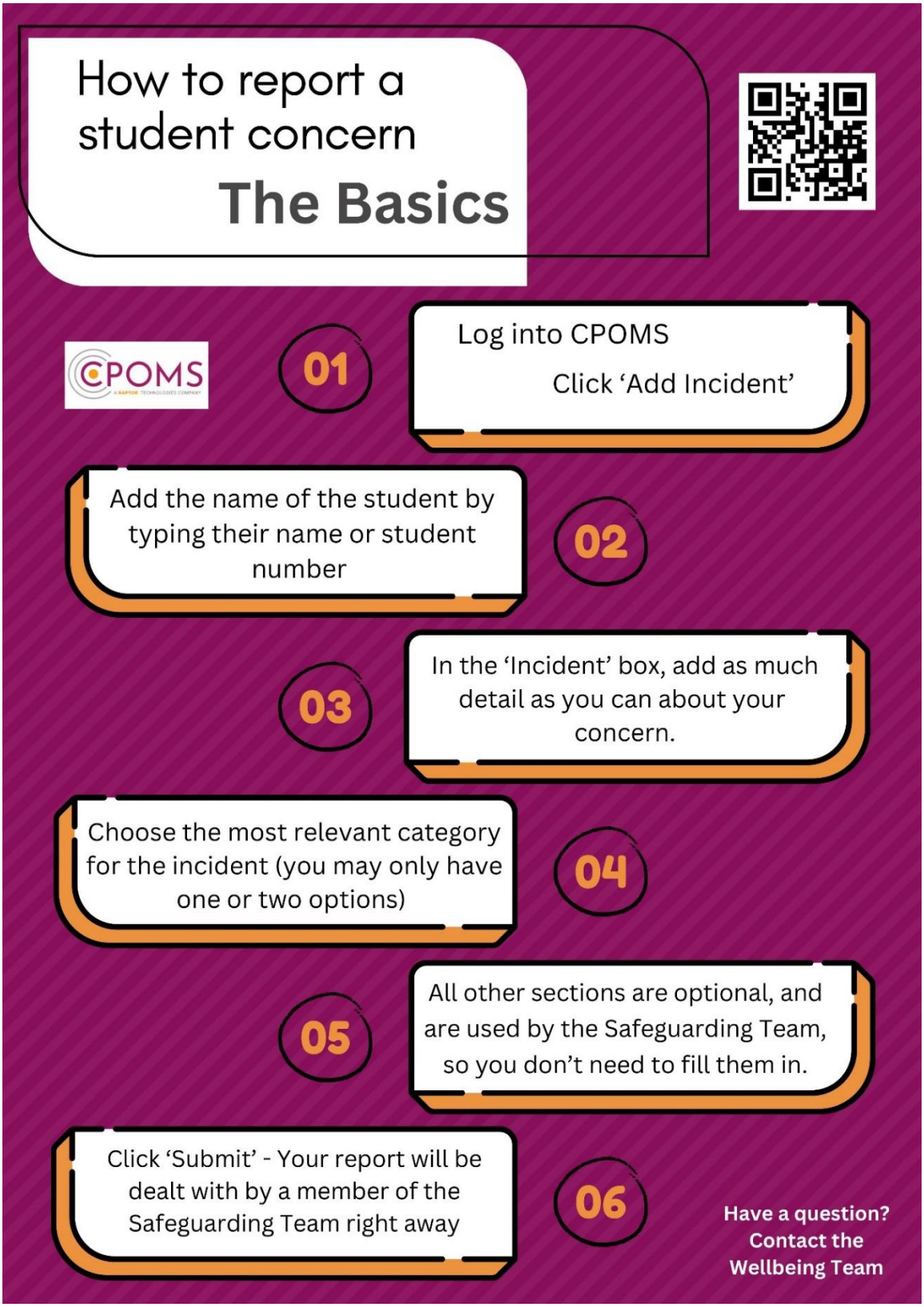
Individuals may be more likely to contemplate suicide, self-destructive acts, harming self or others, at certain points in their lives or if certain conditions exist. The following factors should be considered by Student Wellbeing staff when assessing acute risk to self or others and should be discussed with the student:

- **Acute Risk** refers to the level of current risk (of suicide, self-destructive acts, harming self or others) with progression along a continuum based on escalating intent and risk. The level of risk also accounts for the extent of the individual's risk, protective factors, and any known history regarding the student's behaviour towards themselves or others and their potential and/or capacity/intent to harm themselves or others.
- **Chronic Risk** refers to the ongoing likelihood of a person making a future attempt and is based on historical information e.g. previous suicide/self-destructive attempts, history of depression, extent of background and current risk factors and presence of protective factors.
- **Intent or motivation** reflects whether the student has a reason to live or a reason why they may choose to carry out an act of harm to self or others. The greater the motivation to die or to harm self or others, the greater the risk. The student should be asked about their intent by the adviser.
- **Plan** is how/when/where the student will carry out his/her suicide or plan to harm self or others. A more detailed and specific plan indicates a greater risk and they should be asked for details on when/how/if they plan to act on their thoughts to harm themselves or others.
- **Means** is what the student intends to use to commit suicide or harm self/others. The more lethal the means, the more serious the risk (e.g. a gun could be deemed a more immediate threat to self and others rather than pills). Also, the more available the method, the more serious the risk (e.g. loaded gun).
- **History:** An individual who has attempted suicide in the past, or who has seriously harmed themselves/others may be at higher risk of achieving their goal than someone who has no history of suicide/harm to self or others. A student who has been known to be aggressive towards others may also become quickly agitated or aggressive with others in stressful circumstances. The risk may also be increased by alcohol or drugs.
- **Demographics (suicide)**: In the UK, ONS data shows that suicide rates across all age groups under 25 have been increasing over the last decade. This increase is particularly apparent among young females under 25 (though this increase in rate is now levelling off). Despite this increase, men are still more likely to die from suicide than women: in 2022, around three-quarters of suicides registered were males.
- **Stress**: Someone with a lot of stress in their life is at greater risk of suicide/harm to self or others.
- **Resources:** A person with fewer resources and support networks is at greater risk than a person with considerable resources. The more socially isolated the individual, the greater the risk.

Appendix C - BIMM University Student Crisis Action Plan flowchart



Appendix D – Campus CPOMS infographic



Appendix E- BIMM Student Support Line

spectrum.life

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BIMM Student Support Line.

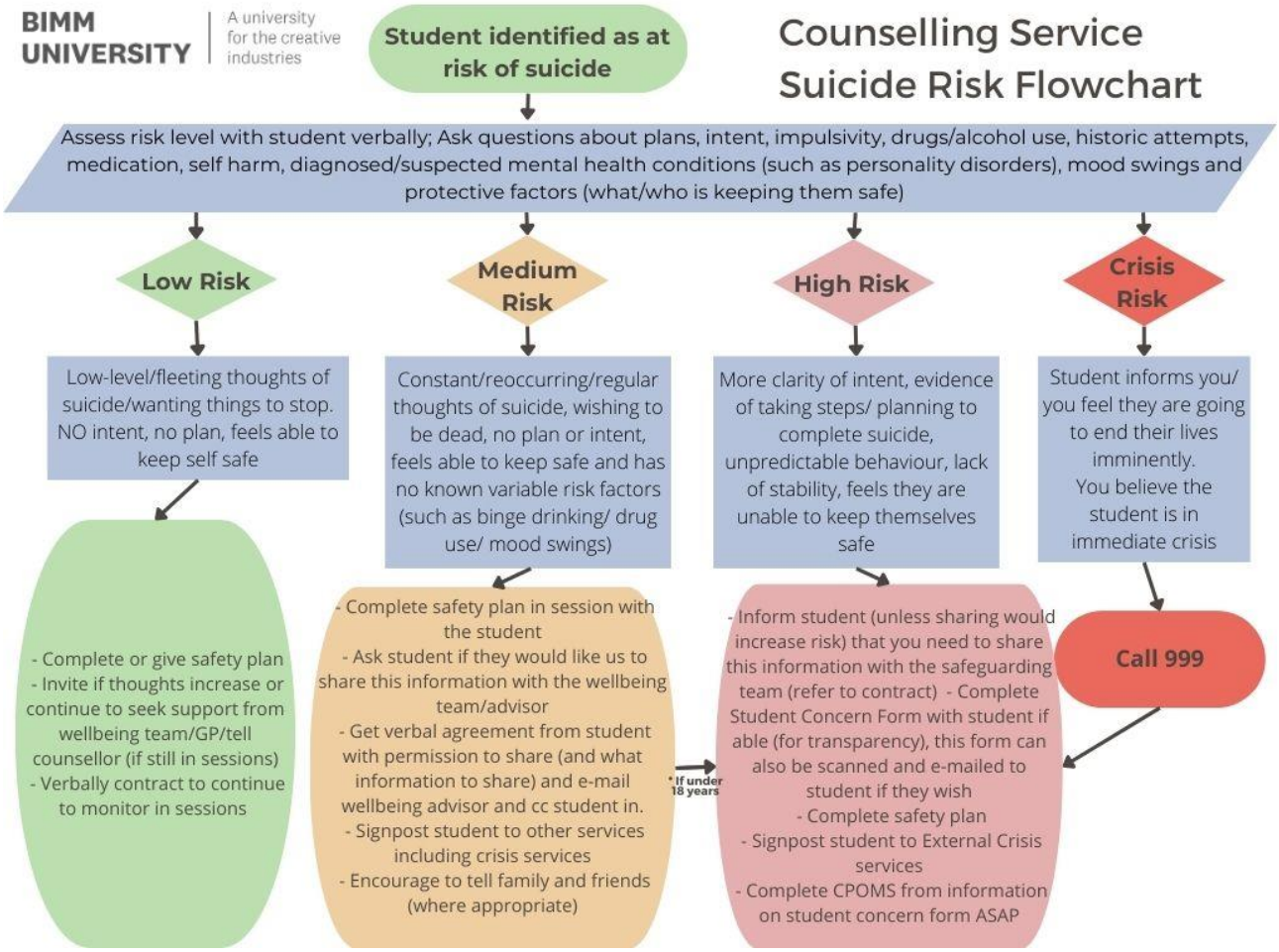
Your free, confidential service providing support for concerns big or small.
Unlimited access to a 24/7 helpline, and hours of wellbeing content on the student portal.

Access your Wellbeing Portal:
bimmuniversity.spectrum.life/login
Click 'New Here? Sign Up' and enter your college/university's organisation code: BIMM

If you have signed up previously, your username is your email address.

UK Freephone: 0800 031 8227
IRE Freephone: 1800 851 340
Germany Freephone: +49 800 082 6970
International: 00353 1 518 0277
WhatsApp: Text 'Hi' to 074 1836 0780

We provide guidance and support on topics such as:

- Depression
- Anxiety
- Grief
- Addiction
- Relationships
- LGBTQ+

Appendix F - Counselling Service Suicide Risk flowchart