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1. Introduction

1.1 This Code of Practice applies to Registered Students, Students on Leave of Absence, Students with Thesis Awaited Status and External Students on all modes of study e.g. distance learning, part time or full time, as well as Students on a placement or a year abroad (collectively referred to in this Code of Practice as “students”). This Code does not apply to students following Fitness to Practise programmes.

1.2 The University has an obligation to provide a safe learning environment for all Students, but ultimately each Student is responsible for managing their own health and wellbeing. The University is committed to supporting Students and recognises the importance of a Student’s health and wellbeing in relation to their academic progression and wider University life (such as living with other Students, socialising and participating in University sports and activities).

1.3 A Primary Person will be nominated by the Head of School, the General Manager of Student Accommodation, and the Head of Wellbeing and Partnership to deal with concerns in their School, Accommodation Services and Student Support respectively.

1.4 Concerns should be acted on promptly, as early intervention and support is likely to be in a Student’s best interests and reduce the potential for an issue to become more complex. Once a concern has been raised about a Student’s health and/or wellbeing, it should be referred to the relevant Primary Person to consider and take appropriate action.

1.5 Concerns can be raised by anyone, whether internal or external to the University, at any time during a Student’s registration.

1.6 This Code of Practice is intended as a supportive procedure to be used when a Student appears to be unable or unwilling to manage their health and wellbeing, and the University has good reason to intervene. The use of the procedure may be prompted by a reasonable suspicion that a Student’s ability to study on their programme and/or participate in University life is or may be compromised as the result of health and/or wellbeing issues.

1.7 Health concerns for students following Fitness to Practise programmes should be dealt with by the relevant Code of Professional Conduct and Fitness to Practise and by the relevant College Fitness to Practise Committee in accordance with the Code of Practice on Procedures for Misconduct and Fitness to Practise Committee.

1.8 Temporary exclusion or suspension from placement or from study should be dealt with in accordance with the procedures in Regulation 8.

1.9 If a concern is raised about a Student’s health and wellbeing whilst they are on a placement or a study year abroad (arranged as part of their programme of study) the University will liaise with the host/placement provider to assist in addressing the concern with the Student.

1.10 Action taken under this Code of Practice does not preclude and may be taken in conjunction with, or at the same time, as other relevant action available to the University including disciplinary action.
1.11 The University may continue to act in accordance with this Code of Practice notwithstanding that a Student fails to, or does not engage with, any of the procedures set out below.

1.12 In the case of students based at the University’s overseas campuses working days will reflect national public holidays and any locally designated closed days.

2. **Primary Person**

2.1 The Primary Person should be aware of the Protocol on Disclosure of a Disability and action that may need to be taken in light of information and/or medical evidence provided by the Student.

2.2 The designated Primary Person should normally:

   2.2.1. Contact the Student to make them aware of the concern and allow them the opportunity to respond.

   2.2.2. Attempt to resolve the concerns in discussions with the Student.

   2.2.3. Consider appropriate procedures and/or advise the Student to engage with any support services provided by the University.

   2.2.4. Hold a review meeting with the Student after they have been given sufficient time to access any support and/or address the concern.

3. **Procedure – where there is no immediate serious risk to the Student or others**

3.1 **Introduction**

   3.1.1. This Code of Practice identifies 3 levels of intervention which may be appropriate depending on the perceived level of risk to the health and wellbeing of the Student or others. It is possible for a matter to begin at any level, progress through some or all of the levels, return to lower-level intervention or be resolved at any level.

3.2. **Level 1 – Emerging/low level concerns**

   3.2.1 This low level of intervention should be considered when a concern is raised about minor issues relating to a Student’s health and wellbeing.

   3.2.2 The Student will be informed of the concern and allowed the opportunity to respond. Normally an attempt to resolve the concerns in discussions with the Student will be made. The Student will be given sufficient time to access any support and/or address the concern, following which a review meeting may be held (which can be conducted remotely where appropriate).

3.3. **Level 2 – Continuing/significant concerns**

   3.3.1. This level of intervention should be considered if low level intervention has not resolved the concern or if the concern raised is too serious to be dealt with informally.
3.3.2 The concern should be referred to the Head of Wellbeing and Partnerships by the Primary Person. The Head of Wellbeing and Partnership will convene a case conference to discuss the concern about the Student and will decide whether to invite the Student to attend the case conference. The Student will normally be given notice of the date of the meeting. If permitted to attend, the Student may be accompanied by a Friend (as defined in Regulation 1). The meeting may be conducted remotely, where appropriate.

3.3.3 Medical evidence may be requested from the Student before the case conference. The Student may be invited to submit documents for consideration and will normally be given copies of any documents seen by those at the case conference.

3.3.4 The Student will be informed in writing of the decision made at the case conference and the reasons for the decision.

3.3.5 The decisions available are:

   a. No formal action is required
   b. To implement a Support Plan, which should detail any steps that the Student will need to take and any support to be provided by the University. Regular review meetings will be scheduled to take place with a nominated member of staff who may be the Primary Person. The Support Plan will also detail what will happen if the requirements are not being met by the Student, which will normally involve treating the matter as a Level 3 concern.
   c. To recommend that the Student take a period of Leave of Absence. If the Student does not agree to take Leave of Absence or does not submit or proceed with the appropriate application, the case should be treated as a Level 3 serious/persistent concern.
   d. To refer the case as a Level 3 serious/persistent concern.

3.4 Level 3 - Serious/persistent concerns

3.4.1 A concern should be treated as serious or persistent if:

   a. earlier intervention at Level 2 has not resolved the concern;
   b. at a previous level it has become apparent that the concern is significantly more severe than originally anticipated or
   c. A Student’s health/or wellbeing is adversely affecting, or is a possible danger to, the health, or wellbeing of themselves or others with whom they come into contact.
   d. A Student’s health and/or wellbeing is significantly affecting their ability to engage with their studies, placement and/or other aspects of University life;
   e. The concern is so serious that treating it as a Level 1 or Level 2 concern would not be appropriate.

3.4.2 Serious or persistent concerns should be referred to the Assistant Director of Student Services – Student Wellbeing, who will convene a meeting of the Academic Registrar Advisory Panel (herein referred to as “the Panel”). The Panel will discuss the
circumstances of the concern and make a recommendation to the Academic Registrar on what, if any, action should be taken.

3.4.3 The Panel should normally include:

   a. The Assistant Director of Student Services – Student Wellbeing (or nominee) (Chair)
   b. The University Medical Officer or their nominee
   c. The Primary Person from Level 1 where the case has escalated through the procedure,
   d. Any relevant member(s) of Student Support
   e. The Vice President (Welfare) (or nominee) of the Guild of Students
   f. Additional members who may be required e.g. a member of Hospitality and Accommodation Services, or the Student’s Personal Tutor, or Wellbeing Officer if they are not already included as Primary Person.
   g. A secretary to take notes and advise the Panel.

3.4.4 The Student will normally be advised in writing that a concern has prompted a Panel meeting. The Assistant Director Student Services (or nominee) will decide if the Student should be invited to attend the Panel meeting. If permitted to attend, the Student may be accompanied by a Friend (as defined in Regulation 1). The meeting may be conducted remotely, where appropriate.

3.4.5 The Student will normally be invited to submit representations and documents for consideration at the Panel meeting.

3.4.6 If unable to attend the meeting, the University Medical Officer or their nominee may provide advice in writing.

3.4.7 Where the Student has not engaged, is not able to engage and/or has not provided medical or other evidence as requested, the Panel meeting will proceed on the basis of the information available at the time.

3.4.8 Following the Panel a report summarising its recommendation should normally be sent to the Student, who will normally be invited to submit written representations within 10 University working days of the date of the letter enclosing the report.

3.4.9 The Academic Registrar will consider the recommendation; the advice of the University Medical Officer or their nominee and any representations made by the Student and will decide the action to be taken, giving reasons for the decision.

3.4.10 The outcome of a Level 3 concern may be one or more of the following:

   a. No formal action is required.
   b. To implement a Support Plan, which should detail any steps that the Student will need to take and any support to be provided by the University. Regular review meetings will be scheduled to take place with a nominated member of staff (which can take place remotely, where appropriate). The Support Plan will also detail what
will happen if the requirements are not being met by the Student, which will normally involve further consideration of the matter by the Panel.

c. Where the option is available, and with the Student’s consent, to transfer them to an alternative mode of study, for example part-time or distance learning.

d. To suspend the Student temporarily from the University for a specified or unspecified period subject to regular review.

e. To debar the Student temporarily from use of some or all of the University facilities or from entry to the whole or part of University premises for a specified or unspecified period subject to regular review.

f. To suspend the Student temporarily from attending a placement, a field trip or a year abroad for a specified or unspecified period subject to regular review.

g. To withdraw the Student from the University.

h. Any other action considered to be appropriate and proportionate.

3.4.11 The Student will be informed in writing of the Academic Registrar’s decision and their right to appeal, normally within 5 University working days.

4. Immediate suspension due to immediate serious risk to the Student and/or others

4.1 The Academic Registrar, in consultation with the University Medical Officer or their nominee and appropriate members of the University where necessary, may suspend a Student with immediate effect where they have the reasonable suspicion that the Student is an immediate danger to themselves or other persons with whom they will come into contact. There is no right of appeal against this decision.

4.2 Following immediate suspension, the concern will be dealt with as a Level 3 concern. The immediate suspension will normally remain in place and be considered as part of the Level 3 process.

5. Return to study

5.1 In order to return to the University following a suspension, a Student will be required to submit appropriate medical evidence. If a Student has been suspended for a specified period of time, medical evidence should be submitted at least 20 University working days before the end of the suspension period. Where the Student has been suspended for an unspecified period medical evidence may be submitted at any time.

5.2 The University Medical Officer or their nominee will be asked to consider any medical evidence and to advise the Academic Registrar about whether the concern has been sufficiently addressed or managed to enable the Student to return to the University.

5.3 The Student’s School will be consulted in relation to any academic or programme-related factors that need to be considered for the Student’s return to the University.

5.4 The Student will be informed of the Academic Registrar’s decision in writing as soon as possible and normally within 15 University working days of receipt of the medical evidence. The Student will also be informed of the right to appeal against that decision.
5.5 A Student suspended under this Code of Practice should normally be invited to attend a meeting with an appropriate member of Student Support before they return to study (which can be held remotely where appropriate). This meeting is to give the Student the opportunity to discuss preparing for and managing their health and wellbeing on their return.

6 Appeal

6.1 A Student may submit an appeal to the Pro-Vice-Chancellor (Education) (or nominee) against a decision made by the Academic Registrar within 15 University working days of the date of the letter advising the Student of the decision. Immediate suspension from study under Section 4 cannot be appealed.

The grounds for appeal are:

6.1.1 That there is new material evidence/information that, for good reason, was not available at the time the decision was made.

6.1.2 That there was a procedural irregularity.

6.2 The Pro-Vice-Chancellor (Education) may consult with relevant members of Staff and/or the University Medical Officer or their nominee, in order to reach a decision. The Student will normally be provided with copies of any advice from the University Medical Officer or their nominee or University Staff to the Pro-Vice-Chancellor (Education) and be given the opportunity to make representations in response, before the Pro-Vice-Chancellor (Education) makes a decision.

6.3 The Pro-Vice-Chancellor (Education) may decide either:

6.3.1 To refer the case back to the Panel. The Pro-Vice-Chancellor (Education) may make recommendations as to the Panel membership.

6.3.2 To reject the appeal.

6.4 The Student will be informed in writing of the decision made by the Pro-Vice-Chancellor (Education) as soon as possible, normally within 20 University working days.