

# STUDENT WELLBEING

In Purpose-Built Student  
Accommodation



Cover image provided  
by Unite Students

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## Working group

This booklet is the product of the hard work and dedication of individuals and organisations from across the student accommodation sector and we thank them profusely for their contributions.

We also thank the many providers, universities and others who have provided the case studies illustrated throughout. Regrettably, we have only been able to include a representative sample.:

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# Why Provide Effective Wellbeing Support?

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## Ministerial Foreword: Chris Skidmore MP Minister of State for Universities, Science, Research and Innovation

Going to university is a major milestone in an individual's life. And for students in the UK, this can often mean leaving home and moving away to a new city as well.

This 'residential' model of higher education makes us different to many of our counterparts on the continent, where students generally live at home and study at their 'local' university. Traditionally, our residential approach has meant that a student's university years in the UK are a truly transformative process – not just centred on learning new knowledge and skills, but developing as individuals too.

Learning how to live with others, how to cope with being away from family and friends, and how to adapt to independent study are all part and parcel of the student journey in the UK. And this is especially true for international students, who come here – often with no existing support networks or experience of our customs and culture – and look to adapt to our way of life and make new friends alongside their studies or research.

With this residential dimension to our higher education, nevertheless, comes increased responsibility on accommodation providers, including universities, to ensure they are offering students the best possible environments in which to live and work. This not only includes offering students safe and secure accommodation, but thinking seriously about how best to help them make the most of their university years while there.

I am keen we take a 'STEP' approach to higher education, looking at how we can improve students' experiences at each stage of their university journey – from supporting Student Transition to their university, course or city, enhancing their university Experience, and facilitating their Progression on to further study or the world of work.

And I see accommodation providers as playing a big part in supporting students in each stage of the student lifecycle. From helping them settle into their new lives at university or college, to spotting the early warning signs when things go wrong, and pointing students in the right direction for support.

As the interface between students' private, social and scholarly lives, accommodation providers are often best placed to notice issues as they arise on their premises. Significant changes in a student's lifestyle or behaviour can be key indicators of poor mental health and wellbeing. So, spotting the signs early and knowing what to do with them can be critical to a student's happiness and success. Delays in signposting or poor practice can cost lives.

That is why I am pleased to support this guide to encourage accommodation providers to look again at their policies and procedures concerning student mental health and wellbeing, and bring them up to date with what is expected of them to support students in the UK today.

As Universities Minister, I am keen that UK universities are seen as some of the best environments for study and research in the world. Providing students with safe and supportive accommodation is a major part of achieving this ambition. So, I look forward to working with you as you shape and deliver the wellbeing support that is essential to a first-rate student experience.



## Foreword:

**David Tymms**, British Property Federation Student Accommodation Committee (BPFSA) Chair

**Jenny Shaw**, Unite Students



As an accommodation provider supporting students' mental health and wellbeing is both the right and the logical thing to do. Right, because university offers a real opportunity to promote positive wellbeing and if we can alleviate ill health and suffering within our sphere of influence then we should. Logical, because businesses become successful by meeting and exceeding the needs of all their stakeholders, not just their investors.

Ultimately, as long-term investors in our communities, our job is to create healthy, thriving places that put students first and enable them to realise their full potential.

Mental ill-health and distress is unfortunately a part of life and will therefore occur not only on campus but also wherever students call home. Whether it be homesickness, a panic attack or a more life-threatening problem such as an eating disorder, it will often be accommodation teams that spot it first.

The role of a private accommodation provider in these cases is complex. These issues often play out on our premises. They directly affect our customers, our employees and sometimes our buildings, and yet we do not – and should not – provide the therapeutic care services to address these issues directly. Those services quite rightly sit with the NHS and other professional services dedicated to meeting these needs.

This means that accommodation providers need to develop strong, trusting relationships in both directions:

- With students, so that they know we genuinely care about them, understand the boundaries of what we can and cannot do for them, and will accept our recommendations to seek the necessary support
- With external partners, such as universities, the NHS and wider support services, so that we have up to date information and a good rapport with named contacts for the issues that students may be experiencing

Much more than 'tea and sympathy', those on the front line of student accommodation need an understanding of young people's wellbeing, skills in active listening and good boundary management. They also need to be aware of how to manage their own wellbeing and mental health and should operate within a safe and confidential professional framework to avoid unintended poor practice and ensure residents are appropriately safeguarded.

Student wellbeing is a complex issue that no one group can address on their own. By working together as a sector to raise awareness and kick start the conversation around best practice we can raise awareness of issues around student wellbeing in the private accommodation sector and ultimately improve outcomes for students.

## Introduction

Accommodation providers have a unique opportunity to help students make the most of their university experience.

However, until recently it has not been widely recognised that PBSA operators have any role to play in student wellbeing. In practice, operators have had no choice but to respond to real and present student needs, but they are at different levels of maturity in their student wellbeing policies and process depending on their size and experience. Moreover, with many operators working with many more different university partners, there are not yet any established norms around how to collaborate effectively with universities and external partners regarding student wellbeing concerns. Collaboration can be further complicated by concerns over data privacy which until now have not been clarified.

This is understandable given that the needs and requirements of students have changed rapidly in recent years alongside a swiftly growing Purpose-Built Student Accommodation (PBSA) sector. Relevant legislative changes have also had substantial implications for providers' duty of care responsibilities.

This Guide is intended to encourage accommodation providers to reform or progress their mental health and wellbeing policies so that they are in line with what is expected of them in 2019. It should be treated as primarily a Guide to best-practice in private PBSA for mental health and wellbeing. Many of the recommendations are however equally applicable to university-operated accommodation.

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## How to Use This Guide

This Guide is not intended to be used as a “how to” instruction manual, regardless of individual circumstance.

Rather, it is as an illustration of what the BPF considers ‘best-practice’ already being delivered in the sector and what we recommend that providers consider when designing mental health and wellbeing policy and procedures. We have structured this Guide so that users need not read it cover to cover but can draw upon the parts of most relevance to them. It is split into four main sections:

- An introductory ‘[Why Provide Effective Wellbeing Support?](#)’ section, which outlines why student wellbeing should be considered a top priority for providers
- A ‘[Responding to Student Wellbeing Issues](#)’ section, which sets out the minimum reactive wellbeing policy measures that providers should consider putting in place so that wellbeing concerns can be addressed

- A ‘[Supporting Student Wellbeing](#)’ section, which looks at the proactive measures providers can take and outlines where the Guide’s Working Group believes support should be focused
- And finally, a ‘[Providers’ Legal Responsibilities](#)’ section, which explores the legal environment providers operate in regarding student wellbeing. It should be noted that this is the only section of this Guide that sets out legal requirements of providers.

Several useful tools for providers, including a self-assessment checklist, are provided in the [Appendix](#). Case studies are given throughout and are intended to inspire rather than prescribe.

This Guide inevitably cannot cover every area accommodation providers should consider regarding their mental health and wellbeing policy. Building design, for example, should be considered by providers and has a significant impact on wellbeing but falls outside the scope of this Guide. The Working Group considers there to be a wealth of good material already available on this subject and others not covered. With this in mind, we recommend that operators also consider the following reading:

- Student Minds [Student living: collaborating to support mental health in university accommodation](#) 2016 report<sup>1</sup>; which we believe remains the most in-depth and detailed study of student wellbeing in PBSA
- Universities UK’s [Student Mental Wellbeing Good Practice Guide](#)<sup>2</sup> and [StepChange Framework](#)<sup>3</sup>; this highlights the importance of aligning activities and responses with a ‘whole system/whole university’ approach (see [Section 3](#) for more further information on this)
- Global Student Accommodation Group’s [Student Wellbeing Matters](#) report<sup>4</sup>, which takes a comparative view of on and off-campus student wellbeing in the United Kingdom, Germany, Spain and Australia.



# Summary of recommendations

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## 1. Wellbeing Policy

### Staff Training [[jump to page](#)]

- So that they can deliver effective wellbeing support, frontline staff should receive training in:
  - Awareness of student wellbeing issues, including recognising the signs of mental distress and issues such as depression, self-harm, anorexia and potential suicide
  - Confidentiality
  - Active listening and communicating with students in distress
  - Signposting
  - Boundary management
  - Responding to students in distress, including how to assess and contain urgent situations and how to refer cases to appropriate professional support
  - Mental health first aid or equivalent
  - Inclusivity and equality
  - How staff can manage their own wellbeing and avoid putting themselves at risk of harm.
- Management staff should have:
  - All of the above
  - Accountability for good handling of student wellbeing issues
- Any staff member whose role has a substantive wellbeing component should also have a formal opportunity for supervision and debrief
- Out of hours staff should be considered for enhanced wellbeing training and should have access to information on common types of mental health conditions.



## Reactive Measures [[jump to page](#)]

- It is crucial that reactive wellbeing policies be understood as part of an overarching wellbeing strategy
- At the minimum, providers' reactive policies must include confidentiality considerations, boundary management, staff training and risk assessment and include a broad guidance framework for staff, to demonstrate best-practice
- A case management approach should be implemented to ensure that students in distress receive a co-ordinated and cohesive response from their accommodation provider. At the minimum, this should include:
  - Accurate, timely, objective and confidential recording of concerns about a student's wellbeing
  - Appropriate and timely practical actions to mitigate distress, including signposting
  - Consistent internal escalation to more senior management based on the severity of the concern, with access to expert advice for staff either internally or externally
  - Referral to the relevant specialist service, if appropriate
  - An overview of historical cases within the organisation
- Good relationships with all relevant partners should be developed
- If Resident Assistant teams are in place, they should receive full training and supervision, in line with the recommendations made in this Guide for front-line staff
- Good general crisis management procedures should be proactively put in place, consistently followed and regularly reviewed
- Providers should know the range of incident procedures university partners have in place
- When reacting to a specific incident, providers need to ensure that they have procedures in place that establish:
  - Who needs to be communicated with about the incident?
  - How will that communication be conducted?
  - Is support being provided by appropriately trained and experienced people?
- Post-incident, accommodation providers need to have predetermined policies in place that consider:
  - What practical actions are needed after the incident?
  - What immediate debrief support is needed by the team?
  - Is anyone, staff or student, in need of ongoing support? How will they be communicated with and that support be provided?
  - How will the incident be reviewed, and the learnings captured?
- If providers are to issue a communications response to a wellbeing incident, it is important to ensure that messages are aligned with those of the relevant institution's approach.

## Proactive Measures [[jump to page](#)]

- We recommend that providers consider implementing a package of non-care wellbeing initiatives. This could encompass:
  - An events and social activities programme
  - Health and wellbeing information, advice and guidance campaigns
  - Resident Assistant teams
- It is important to listen to what student tenants actually want and to ensure that their individual wellbeing needs are accounted for in proactive wellbeing measures
- Providers should consider how they can utilise and/or align with university wellbeing initiatives
- The value of providing Resident Assistant teams should be considered
- Non-care wellbeing services should take into consideration how all student residents can be reached out to, including those with disabilities
- It is recommended that proactive provision take into account student transition issues, loneliness and exam stress.

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## Collaborative Working [[jump to page](#)]

- In order to demonstrate best-practice, an accommodation provider will need to understand, at a minimum:
  - What wellbeing services are available in the area, including at the relevant university
  - How students can access university initiatives or NHS therapeutic care services
  - The likely waiting times for accessing such services
- Appropriate level accommodation provider staff should seek to build relationships with relevant staff within the relevant university wellbeing services so that referrals can be made directly if need be
- For collaborative working to be successful, the role of the provider must be clear, and duty of care boundaries observed. To achieve this, it is recommended that providers seek:
  - Consent to disclose from students
  - Information Sharing Agreements with universities
- Providers should establish whether university partners are taking a 'whole university' approach to wellbeing
- Providers should seek to identify if universities have a mental health strategy
- Collaboration with groups aside from universities should be sought, such as Local Authorities or Students' Unions.

## 2. Legal Requirements

### Contract [[jump to page](#)]

- Providers should be aware that all promotional and other material, such as the accommodation provider's website, advertising materials, rules of occupation etc. may be regarded as forming part of a contract. This will therefore impact upon any consideration of an accommodation provider's obligations to students. It is important therefore to be clear and honest with prospective students about wellbeing provision.

### Duty of Care [[jump to page](#)]

- In most situations, the standard of care expected of an accommodation provider will be that of 'an ordinary and competent accommodation provider'.
- When considering the extent of the duty of care owed to students, providers should consider the three-stage test the Courts have applied to establish whether a legal duty of care exists. The test is as follows:
  - On the facts, the harm suffered by the claiming party would have been reasonably foreseeable to the defendant
  - There was a relationship of proximity between the defendant and the claiming party (often called the assumption of responsibility)
  - On the facts of the case it is fair, just and reasonable for the Court to impose a duty of care on the defendant party in favour of the claimant.
- Providers will need to ensure that staff are aware of and comply with any agreed policies and protocols governing the referral of students to the institution's student support services to discharge their duty of care obligations.
- We would expect the likely training providers should offer all staff, to fulfil their duty of care, would include as a minimum:
  - Guidance on mental health issues and recognising the signs of students in likely mental distress
  - Guidance on how to assess potential student issues such as self-harm, anorexia and potential suicide
  - Guidance on how to communicate with and support students in distress including use of non-discriminatory, non-stigmatising and positive language
  - Guidance on how to encourage to self-refer or how to refer students to professional support (including any procedures or protocols set up by the provider or agreed with institutions)
  - Guidance on how to deal with a crisis involving student mental health and how to assess and contain urgent situations and the details of how to refer cases to networks of appropriately trained professionals, including NHS mental health services
  - Guidance on the need for staff not to place themselves at risk of harm or to take any action that would exceed their expertise.
- The duty may be higher where an accommodation provider has put in place their own mental health policy or offers its own support networks, such as counselling services or access to trained healthcare professionals.

## Equality Law [[jump to page](#)]

- Under the Equality Act 2010, accommodation providers are obliged to show forward planning and put in place ‘reasonable adjustments’ to avoid student tenants with protected characteristics being treated less favourably. Students with mental health difficulties may be protected by the Act and providers will need to pay careful attention to the duties owed to them when delivering pastoral and accommodation services. What constitutes a ‘reasonable’ adjustment is not defined in law, therefore, any certainty, in the event of a dispute, can only be achieved through litigation.

## Data Protection [[jump to page](#)]

- A private student accommodation provider is highly likely to be a data controller in relation to the personal data of students who are resident in the accommodation it provides. In order to ensure GDPR compliance, providers need to ask:
  - What personal data do they process?
  - Who does it belong to?
  - Why do they have it?
  - Why are they allowed to have it?
  - Why do they have so much of it?
  - What are they going to do with it?
  - Do they intend to share it (if so, with whom and why?)?
- Providers also need to make sure that the people identified from the personal data, (the “data subjects”) know the answers to the questions above because the provider has told them by means of a privacy policy or statement, and/or because they would reasonably expect the provider to be doing what they’re doing with their data. There is a requirement for transparency with data subjects.
- Personal data which concerns health (including mental health) is classified under the GDPR to be ‘special category’ data and controllers who process such data will therefore need:
  - A basis from Article 6 GDPR to apply (in common with all personal data)
  - A condition from [Article 9](#).
- Where the processing is of special category data, for example if a provider is concerned about a student’s mental health, and needs to disclose its concerns either to university pastoral services, or to the student’s own emergency contact, then it is likely that the most appropriate Article 6 basis will be “legitimate interests”.
- The Information Commissioners Office (ICO) has produced [guidance](#) setting out how the legitimate interest ground is to be applied under the GDPR, in which it states that data controllers should consider a three-part test:
  - Purpose test: are you pursuing a legitimate interest?
  - Necessity test: is the processing necessary for that purpose?
  - Balancing test: do the individual’s interests override the legitimate interest?
- Under the GDPR it is particularly important for providers to keep a record of any ‘legitimate interests assessment’ which they carry out in order to determine whether this ground for processing can be relied upon.
- If providers believe there to be an immediate risk of harm, we recommend that they utilise the Article 9 condition (which concerns safeguarding of children and of individuals at risk) when they need to process personal data concerning mental health issues. Whilst the consent of the data subject (as a legal basis) may be desirable in many situations, it is not without its limitations and could, for example, be withdrawn.

# Responding to student wellbeing issues

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Lecturers tell their students that if they fail to prepare, they should prepare to fail. The same is true for accommodation providers when it comes to responding to student wellbeing issues.

Without the appropriate [policies, procedures, staff training](#) and [relationships](#) developed with partners, it is significantly harder to provide the necessary support to students when they need it most.

Putting in place effective response policies does not just help providers deal with students in distress. It also allows them to prevent issues from developing and assists in creating the safe and supportive environment needed for students to make the most of their university education.

This chapter, and its policy recommendations, draw on the Working Group's combined professional experience in student wellbeing, a detailed analysis of Unite Students' student welfare case data from 2015-18, as well as conversations with private PBSA operators across the UK. The aim throughout is to provide straightforward guidance on minimum standards and best practice that even smaller providers should be able to implement within their reactive wellbeing policies.

These recommendations should be seen within the wider context of the availability of statutory mental health and wellbeing services for students at the point of need.

While it should be noted that it is not an accommodation provider's role to provide therapeutic services, the rise in demand for these services, together with the challenges of multi-agency working, means that waiting times

can be long and services may not be adequate to meet student needs or expectations. Furthermore, students who have been discharged from acute care may be returned to their accommodation provider in the belief that it is a 'place of safety'. As well as the direct impact on students themselves, this can place a huge expectation on providers, who by default are left to manage the impact of having a very unwell student under their roof.

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*It is more important than ever that providers can effectively signpost to the appropriate sources of care*

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It is therefore more important than ever that providers can effectively signpost to the appropriate sources of care, collaborate with partners and have the correct operating protocols in place.

These protocols should sit within an overarching wellbeing strategy, which should be institution-wide and should consider the '[whole-university](#)' approach that many higher-education institutions are employing.

A [self-assessment tool](#) relating to this section is provided in the [Appendix](#) of this Guide. This tool will help those designing reactive wellbeing policies to assess their current provision, identify what is done well and what can be improved.

This chapter covers the following areas:

1. [Policies and Procedures](#)
2. [Case Management](#)
3. [Employee Awareness, Development and Support](#)
4. [Partnerships and Relationships](#)
5. [Crisis Management](#)

## 1. Policies and Procedures

Good policies and procedures form the bedrock of good student wellbeing management but are only effective if they are well known and understood across the organisation as part of an overarching wellbeing strategy.

Private accommodation providers come in many forms and have differing levels of experience when it comes to student wellbeing. With this in mind, the list below represents the recommended minimum that should be covered within the scope of a student wellbeing strategy to ensure that providers can react effectively to wellbeing concerns:

- **Confidentiality, disclosure and data protection:** First, it is crucial that providers have a student's consent to share and disclose information about their wellbeing and that providers are compliant with their GDPR and data protection responsibilities. Such consents can be built into Assured Shorthold Tenancies or Licences issued to student tenants prior to arrival. [Section 4](#) of this booklet covers the legal perspective on this issue in more depth
- **Boundary management:** It is important to ensure that the limit of support the organisation can provide is clearly understood across the business. Without this, individuals or teams may inadvertently assume a duty of care that they are not equipped to provide. Individual staff should be clear about their own boundaries with individual students, while remaining compassionate, professional and helpful. Again, [Section 4](#) of this booklet clarifies the legalities on this
- **Staff training and risk assessment:** A full risk assessment of individual cases should only be attempted by experienced, qualified staff. All frontline and management staff should also have at least bedrock training in how to respond to student wellbeing concerns (the scope of the training staff need is [outlined further below](#))
- **A guidance framework:** Some universities ask that private accommodation providers notify them of all concerns about students, no matter how minor. However, not all universities do so, and this may not be possible within agreed data sharing processes anyway. This is when a broad guidance framework for staff can be a useful tool. It helps ensure that seemingly minor concerns are not overlooked when

they may point to a more serious issue, especially if the student is vulnerable in other ways (e.g. has a disability, is in financial hardship or does not have family support). Similarly, it can help reassure staff when dealing with students who have distressing but low-risk issues, such as a one-off panic attack. We recommend that such a framework be created with expert input and that suitable training be given to staff on its use.

## 2. Case Management

A case management approach ensures that students in distress receive a co-ordinated and joined-up response from their accommodation provider. Without it, there is a risk that early warning signs will be ignored and not escalated appropriately.

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*A case management approach ensures that students in distress receive a co-ordinated and joined-up response from their accommodation provider*

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Students may also find themselves receiving a disjointed and even contradictory response from different staff members, which could exacerbate their primary issue. Case management at the very least should include:

- Accurate, timely, objective and confidential recording of concerns about a student's wellbeing
- Appropriate and timely practical actions to mitigate distress, including signposting
- Consistent internal escalation to more senior management based on the severity of the concern, with access to expert advice for staff either internally or externally
- Referral to the relevant specialist service, if appropriate. This may also include making the university aware, within the constraints of data protection legislation, as outlined in the legal section of this Guide
- An overview of historical cases within the organisation, to spot trends and patterns. This should be used to evolve policy, procedures and staff training.

There are some scenarios that raise more specific risks. Most common is where a student is mentally unwell enough to cause ongoing concern to accommodation staff and impact on flatmates, but is not sufficiently ill to be picked up as an acute case by a mental health professional.

Situations like these can put significant strain on accommodation staff and may have a severe effect on other students in the building, especially flatmates. While there is often no straightforward solution to this kind of situation, it can be mitigated by having an agreed approach with the relevant university as to how such cases will be managed in partnership. Where appropriate, the provider and the university may work jointly with the student's agreed 'emergency contact', which can be highly effective if the student's relationship with their contact is a supportive one. It may well be that the management of cases within this particular category might benefit from upfront consent to disclose personal information having been gained when a student first enters the accommodation. We will look at this in greater detail in the section detailing providers' [legal responsibilities](#). In some circumstances it will also be beneficial to include other stakeholders within such case management.

In some cases, the accommodation provider will have evidence to suggest that the student is currently unable to live safely within a student community, or in extreme cases is unable to live independently at all. Where possible, we recommend that providers and universities discuss in advance how such evidence will be treated and responded to.

Assault and harassment incidents can prove particularly challenging for accommodation providers. While these are often dealt with under behaviour and disciplinary processes, accommodation providers are advised to be aware of the impact of such incidents on the wellbeing of those involved and should consider whether these incidents may in themselves be the result of an underlying case of wellbeing or mental ill health. With the student's permission, it may be appropriate to alert the university that such an incident has occurred so that appropriate support can be offered, again with regard to [data protection](#) constraints.

### 3. Employee Awareness, Development and Support

#### Frontline staff

The exact type and level of professional development offered to frontline staff will depend on the commitment that the accommodation provider wishes to make to student wellbeing. Staff awareness, development and support backs up the commitment made by the organisation and enables it to deliver as promised. This commitment should be assessed with regard to a provider's [duty of care](#) and [legal obligations](#).

Based on the recommended policy and procedures outlined, there is a minimum standard of frontline staff training that should be provided by operators in order to display what we would deem best-practice. At a [minimum](#), frontline staff training should include:

- Awareness of student wellbeing issues, including recognising the signs of mental distress and issues such as depression, self-harm, anorexia and suicide risk
- Confidentiality
- Active listening and communicating with students in distress
- Signposting
- Boundary management
- Responding to students in distress, including how to assess and contain urgent situations and how to refer cases to appropriate professional support
- Mental health first aid training or equivalent
- Inclusivity and equality training
- Training in how staff can manage their own wellbeing and avoid putting themselves at risk of harm.

Turnover can be high in front line accommodation roles, so a development programme should also encompass induction for new employees and periodic refreshers.

Any staff member whose role has a substantive wellbeing component should have a formal opportunity for supervision and debrief, either through their line manager or externally. We also recommend that providers consider giving out of hours staff enhanced wellbeing training and access to information on common types of mental health conditions.

## Case study

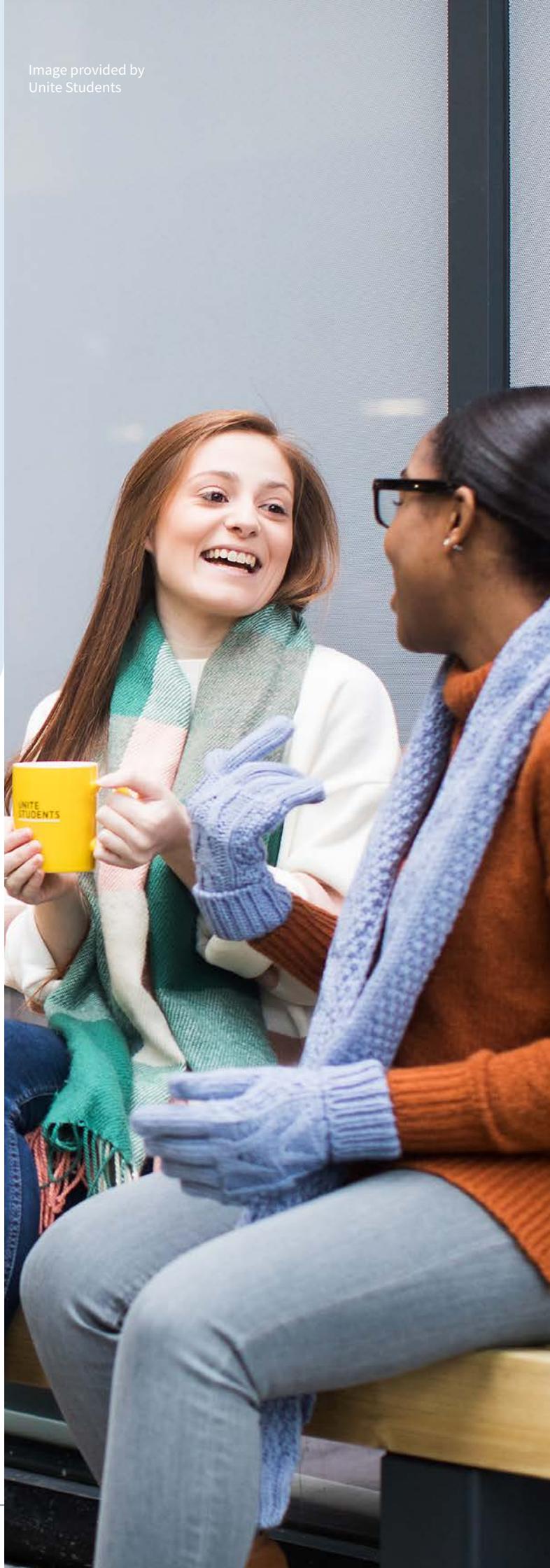
The University of Leicester have introduced a training initiative across its campus accommodation called Make Every Contact Count (MECC).

Through MECC, all levels of accommodation staff, including porters, cleaners and Resident Assistants are given full wellbeing awareness and first aid training and are equipped with the tools needed to identify wellbeing concerns.

Training is then put in action through a simple yet effective card system whereby frontline staff carry postcards on which they note any potential wellbeing issues. These cards are handed in to management staff at the end of the day. This allows for an extremely efficient system for both picking up and responding to wellbeing concerns, as having a physical card removes the need for staff to input details digitally. Daily reporting also allows staff to assess, monitor and take action on an extremely regular basis.

This programme has been so successful that it won the Residence Life Award at the [2018 CUBO awards](#).

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## Management staff

Equally important to front-line staff training is the need for all staff to use their knowledge and skills consistently and effectively in their day-to-day work. This can only come from good management practice.

Management staff need to take accountability for good handling of student wellbeing issues. In practice this may involve ensuring those in student facing roles have student wellbeing responsibilities listed in job descriptions and that this is included in annual objectives setting. Managers should also create an opportunity for staff to discuss student wellbeing at one-to-one meetings and to air their own feelings and concerns.

Managers should also have the same bedrock wellbeing training as frontline staff, as outlined above.

## 4. Partnerships and Relationships

### Universities

Poor or under-developed relationships with a university partner can significantly hamper the ability of the accommodation provider to raise early concerns about a student's wellbeing or seek support and help for a student in distress. This represents a risk to the student, the accommodation provider and the university.

All universities are structured differently so there is no blueprint for the ideal partnership when it comes to student wellbeing. However, as a minimum, the accommodation provider will need to understand:

- What wellbeing services are available at the relevant university
- How students can access services
- The likely waiting times for accessing services.

Appropriate level accommodation provider staff should seek to build relationships with relevant staff within the university wellbeing services so that referrals can be made directly if need be.

In serious cases, the university and accommodation provider can proactively work together to ensure that the student gets access to the appropriate level of support. This should only be conducted within the constraints of [data protection](#) laws, as explained in more depth [here](#).

*The university and accommodation provider can proactively work together to ensure that the student gets access to the appropriate level of support*

In long-term lease and nomination agreement arrangements, accommodation providers may be asked by the university to join a student welfare or case management group. Such collaboration is seen as positive as it should be beneficial to the needs of the affected student, but the parties need to ensure that the role of the provider representative is clear and that [duty of care](#) boundaries are observed. The university and provider should always include in such agreements a schedule which sets out how the parties will work with one another in matters of wellbeing, taking into account their respective [legal responsibilities](#).

### Case study

Bournemouth University (BU) has little student accommodation of its own and instead has a strategy of professionally partnering with several private providers in the town. Each sign up to a detailed agreement, setting out how wellbeing will be managed by the parties. Through these agreements, PBSA managers can review and discuss relevant student welfare issues that have arisen or are ongoing in their site(s) with the university's dedicated Wellbeing Officer. This is a full-time member of staff within BU's 'ResLifeBU' programme team who is responsible for working with all PBSA partners on student welfare matters.

Through monthly operations meetings, the Wellbeing Officer and the accommodation provider can share up to date information as well as discuss and agree actions on how best to support the student(s) in question. This is clearly of significant value to all parties as this relationship can be utilised to case manage students in distress in a coordinated and effective manner.

In addition to these operations meetings, BU and their PBSA partners hold monthly 'all manager' student wellbeing meetings that encompass non-specific student welfare issues. These meetings are a forum in which university and PBSA stakeholders come together to discuss current topics and share best-practice. This forum also allows BU's various PBSA managers to develop relationships and consequently provide support to each other as well, where appropriate.

### Information sharing

Some universities ask that a private accommodation provider notifies them of all concerns about students, no matter how minor. It is important to agree the reason for any information sharing so that this is proportionate and not on a blanket basis where not needed. Information sharing protocols are useful, but note that on occasion, and if the circumstances warrant it (e.g. imminent risk to life), it is possible to share information without an agreement, as outlined in the [legal responsibilities](#) section of this Guide.

Most private provider schemes in the UK are "direct let" where the building owner or operator has no formal relationship with the university. These schemes are often home to students from multiple universities, colleges or language schools, especially in large cities like London.

In these examples, there may be no formal nomination agreement set up with a specific university. The challenge of maintaining good referral relationships with multiple partners will mean that accommodation providers need to invest in additional resource in this area.

For all providers, but in these cases especially, we recommend that formalised [information sharing agreements](#) with universities be sought, where practical. This is so both parties know their [legal requirements](#) and feel comfortable sharing information. These agreements are particularly beneficial in cases where there is an emergency but contact between the university and provider is infrequent. An example of a good [information sharing agreement](#) is provided in the [Appendix](#).

### The 'Whole University' Approach

In addressing student wellbeing, it is important to appreciate that accommodation is one of many influences on a student's health. Providers can therefore maximise their contribution to health and wellbeing by partnering with universities to implement a 'Whole University' approach.

The whole university approach, which is advocated for by Healthy Universities, Universities UK<sup>3</sup> and others, recognises that student, staff, environmental and societal wellbeing are essentially inter-connected, and appreciates that health is crucial to the success of higher education institutions, providing a foundational resource that supports its performance and productivity.

We encourage providers to establish whether university partners are taking this approach to wellbeing and to find ways to contribute to it. More information on the 'Whole University' approach can be found in Universities UK's [StepChange](#)<sup>3</sup> report.

One of the main recommendations of [StepChange](#)<sup>3</sup> is for HE institutions to have a university-wide mental health strategy. Providers should seek to identify if universities have such a strategy and should work with the university staff responsible for implementing it, so that measures taken by the provider are aligned with university policy.

### Student Unions, Local Authorities and Other Partners

It is not standard practice for accommodation providers to have formalised or comprehensive relationships with Students' Unions or Local Authorities, or indeed many other groups who may have an interest in student wellbeing. However, this does not mean that there is nothing to gain from developing these relationships.

### Case study

Nightline is a confidential listening, support and practical information service.

Unite Students and Nightline have collaborated since 2014 to ensure that this valuable, student-led service is available to all Unite's residents. Unite Students pays a fee to London Nightline to extend its service to its students and advertises their contact details throughout the year. Both the London Nightline and local Nightlines also run roadshows in Unite accommodation during the settling in period, using creative approaches to engage students in talking about wellbeing and mental health.

### Case study

Cass and Claredale, a private PBSA operator in East London, run a Resident Assistant programme whereby full training is provided and escalation routes are clear.

The Resident Assistants receive full first-aid, mental health awareness and scenario training, where they are taught not only how to respond to incidents themselves but also when and where to escalate issues. This training is provided by external, qualified instructors.

One of the strengths of this provision is that team members are drawn from the student population. This means they are embedded within the tenant community and can more easily identify potential issues at an early stage and take action.

### Case study

Bournemouth University (BU) use a Welfare Coordinator programme in liaison with their PBSA partners.

For every two residences, BU employs a Welfare Coordinator on a part-time basis who acts as the point of coordination for students and staff on all matters related to student wellbeing. They are informed in relevant student welfare related matters but are not a welfare professional. It is however clearly understood that their role is to identify concerns at an early stage and, through working with the relevant PBSA teams, get students in distress the most appropriate support as quickly as possible.

Local Authorities or Students' Union representatives may, for example, wish to be involved in a case management group and such groups may benefit from their involvement. If providers already have relationships in place with these stakeholders, this will benefit the working of these groups as well as the students in question. Local Authorities may be particularly valuable partners if there are safety and security risks in the locality of student accommodation, or if there are serious antisocial behaviour issues that are affecting local communities.

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*Local Authorities may be particularly valuable partners if there are safety and security risks in the locality of student accommodation*

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We recommend that where possible, providers reach out to Students' Unions, Local Authorities, or other external bodies focused on mental health or wellbeing to establish whether there are areas for appropriate collaboration.

### **Resident Assistants, Welfare Coordinators and Wardens**

Resident Assistants (RA's), Welfare Coordinators, Wardens and other similar resident staff or student roles may be deployed by the university as part of a nomination or lease agreement. RA's can offer an effective peer support system for students, although their role may be more about social integration than welfare provision.

Welfare Coordinators, Wardens and other roles of a similar nature are normally designed to offer more non-specialist pastoral and welfare support than RAs. They should therefore have a clear understanding of the university sources of support and know how to escalate concerns within their own organisation.

In a few cases, private providers run their own RA equivalent scheme. This can be valuable when no such scheme is available through the university, however it is essential that these roles be tightly and appropriately scoped. Full training and supervision, in line with the [recommendations](#) made in this Guide for front-line staff, should be given so that RAs can carry out their role effectively. Without these safeguards, the scheme represents a risk to the provider, the RA's and the student residents.

## 5. Crisis Management

Good general crisis management procedures consistently followed are crucial when handling a student welfare related crisis. These should be set out proactively in accordance with a providers' overarching wellbeing strategy.

In a crisis, the emergency services will usually be the first port of call, but university crisis teams may also provide support if this has been agreed in advance.

Many universities will also have a range of incident procedures (e.g. a major incident procedure, a missing students procedure, or a student death procedure) and it is of great benefit to the accommodation provider to know what the university's approach is to these types of incidents in advance. This will ensure that an efficient, coordinated response is possible. It should also be noted that universities may respond to a death by suicide in a way which is distinct from their normal student death policies and providers should be aware of how their university partners respond to these incidents.

Out of hours teams, who may be third party contractors, should be considered for enhanced training and should have access to information on common types of mental health and wellbeing crises. It is advised best-practice that these staff members should also understand the abilities and limitations of emergency services, other statutory services (e.g. NHS crisis teams) and university services.

When reacting to an event, providers need to ensure that they have procedures in place that establish:

- Who needs to be communicated with about the incident?
- How will that communication be conducted?
- Is support being provided by appropriately trained and experienced people?

After the initial incident has been stabilised, de-escalation and after-incident follow-up are equally important.

Accommodation providers should have predetermined post-incident policies in place that consider:

- What practical actions are needed after the incident. For example, how will the area be made safe; do students need to move rooms; is there a need for specialist clean-up?

- What immediate debrief support is needed by the team? For particularly distressing incidents, a compulsory group debrief by a trained counsellor followed up by one-to-one sessions, where needed, is recommended as best-practice, and collaboration with university partners is recommended
- Is anyone, staff or student, in need of ongoing support? How will they be communicated with and that support be provided?

### *Accommodation providers should have predetermined post-incident policies in place*

Actions taken after a suicide are particularly important in preventing further tragedy. The Samaritans have published a [‘postvention support’ toolkit](#)<sup>5</sup> for student suicide. Although the police and universities usually take the lead in the aftermath of a suicide, the sections on communication and memorials in the Samaritans guidance will be of direct relevance to accommodation staff and will help to avoid common mistakes.

If providers are to issue a communications response to a suicide, or indeed any wellbeing incident, it is important to consider that messages are aligned with those of the university and are not in contradiction with or harming the institution’s approach.

We also recommend that providers’ refer to Universities UK’s guidance for universities on [preventing student suicide](#)<sup>6</sup>. This will ensure that operators are better informed as to how university partners are working to prevent suicide and how that may impact upon PBSA protocol.

#### Case study

Bournemouth University (BU) shares its Major Incident Plan (MIP) with each of its PBSA partners, who have in turn shared their incident plans with the university.

In any ‘blue light’ incident, it is established protocol that PBSA managers notify BU, who can then assess the incident and escalate it through the MIP if they deem it appropriate to do so. This then forms the first step of a partnership in which both parties work together to support and coordinate a response.

#### Case study

iQ Student Accommodation have an Employee Assistance Scheme in place so that they can support staff following a wellbeing incident. Through this scheme, teams of staff who have witnessed or been involved in an incident receive on-site help from an external counsellor, initially for either a day or half-day.

It is ensured that the counsellor is able to signpost to all the ongoing support available, and counsellors will also usually encourage individual staff members to make further use of the employee assistance programme, which includes 6 sessions of face to face counselling support.

This scheme is run centrally by iQ, thereby meaning that invoicing comes through to the national HR department. This removes the stress of arranging and processing counselling support, which could also create an unnecessary memory trigger for the site team.

Image provided by  
Unite Students



# Supporting Student Wellbeing

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Accommodation providers can do a great deal to support student wellbeing just through the way they manage their accommodation. After all, good general customer service can promote wellbeing simply because the reverse is true – poor service can cause upset and stress.

Providers should, however, recognise that they have the power to go beyond just ensuring they minimise wellbeing concerns. The amount of time students spend in halls means that the accommodation sector has perhaps an unrivalled opportunity to promote and support positive wellbeing and ensure students make the most of their university experience.

In order to utilise this opportunity, providers should have in place a wellbeing strategy that looks not only at reactive wellbeing policies but proactive supportive measures too. This should include consideration of what reasonable adjustments can be made for students with a disability.

When designing proactive wellbeing policies, it is important to listen to what student tenants want and to ensure their individual wellbeing needs are accounted for. This will not only save money, it will ensure that these services are as impactful as they can be.

This chapter covers the following areas:

1. [Non-care Wellbeing Services](#)
2. [Where to Focus Provision:](#)
  - a) [Transitions](#)
  - b) [Loneliness](#)
  - c) [Assessment, Exams and Stress](#)

## 1. Non-care Wellbeing Services

It is not the role of an accommodation provider to run therapeutic care services. Doing so will usually mean encroaching on universities' provision, thereby creating confusion, a lack of accountability and a lower quality of service. This would also likely change provider's [legal responsibilities](#).



That being said, there are a number of non-care-based services or initiatives that operators can provide that support the wellbeing of tenants. Many of these can be put in place at little cost and make for better living conditions and happier tenants. Some may appear trivial but can have a real and significant impact upon students.

These measures should be designed with the provider's [reactive wellbeing policies](#) in mind. They can, for instance, provide a useful tool through which to develop the relationships between students and Resident Assistant or accommodation staff with responsibility for identifying and escalating wellbeing concerns.

### Case study

Bournemouth University (BU) provide a wealth of non-care-based wellbeing initiatives through their residential life programme, ResLifeBU. This programme is delivered across all of its accommodation portfolio, including private PBSA.

The philosophy and aim of the programme is to create a truly collaborative community based platform that ensures students, as well as the PBSA partner's teams, feel part of the wider BU community. These activities also help create a shared social experience out of which arises individual positive wellbeing and a broader self-supporting student community.

ResLifeBU takes £1 from student weekly rents and with this revenue can put on a host of social activities that support wellbeing. This includes, but is not exclusive to, stand-up-paddle-boarding/kayaking trips, Fifa tournaments, fashion shows and open mic nights. There are also many themed events put on through the programme, such as Halloween face painting, Chinese New Year & valentine's day speed dating, cooking activities such as 'Master Chef' contests, and an annual 'Winter Ice Ball', where students get to shake off the dust from their suits and ball gowns.

To oversee these initiatives, BU employs a full-time ResLifeBU Social Officer, who is responsible for working with all of BU's PBSA partners to deliver the annual event calendar.

We recommend that providers consider implementing a package of these non-care wellbeing initiatives. This could encompass an [events and social activities programme](#), [health and wellbeing campaigns](#) and [resident assistant teams](#), or similar. Furthermore, we recommend that providers collaborate with university partners to ensure measures do not detract from or conflict with university initiatives already in place. It may also be the case that providers are able to support these initiatives within their own buildings where appropriate.

### Events Programmes & Social Activities

An events programme is clearly a good place to start when it comes to implementing a proactive wellbeing strategy. Many students, though by no means all, enjoy socialising and doing so can be of significant benefit to their wellbeing. Such events also provide opportunities to deliver key messaging around wellbeing and, provided they are taking place within a provider's own building, can be relatively cost effective.

Providers should consider whether their students would want or could benefit from events related to:

- Community building and socialising
- Wellbeing issues
- Exams and study
- External trips to places of interest
- Holiday celebrations and cultural awareness
- Social responsibility
- Life skills and networking.

Networking or skills-based events may be especially of importance during times of [transition](#) for students. This type of event can help alleviate concerns about the end of university or the need to learn new independent living or life skills.

As discussed in the [next section of this chapter](#), it should be recognised that some students will not engage with these initiatives and there may be times of the year when certain types of event are more appropriate than others. It is important therefore to provide a range of events that appeal to as many students as possible and, recognising that some students are never likely to engage, ensure that an events programme is matched with other initiatives that promote wellbeing.

### Health and Wellbeing Campaigns

Another good way to support student wellbeing is to share information about healthy lifestyles, mental health or general wellbeing through a coordinated and thoughtful campaign.

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These campaigns can be broadcast throughout accommodation blocks in the form of posters, leaflets or direct interaction and can provide a useful reference point for starting conversations with students about their wellbeing. Such campaigns can also link in with a provider's event programme, thereby creating a joined-up and effective approach.

Many universities, Students' Unions and Local Authorities run such campaigns and therefore this is a good opportunity for collaborative working and developing these relationships.

More information on where we recommend providers focus provision is available in the [next part of this chapter](#). In short however, possible campaigns could centre on:

- Healthy eating
- Fitness and physical exercise
- Mental and physical health
- Security and violence
- Alcohol or drugs
- Loneliness
- Assessment, exams and stress
- Sex and consent
- Transitions.

### Utilising University Wellbeing Initiatives

As with campaigns, it is also possible for providers to 'piggyback' on wider university wellbeing initiatives.

Just expanding knowledge of what non-therapeutic care wellbeing services are available at universities can provide students with some of the tools needed to improve their wellbeing. This could include but is not limited to:

- Student societies
- Sports clubs
- Wellbeing events or initiatives, such as university provision of yoga classes or therapy pets.

Partnering with universities or providing information to tenants on what is available is also relatively cost-free as providers need not supply these services.

It is additionally worthwhile keeping in mind that many universities provide facilities that providers cannot, but which may in some way help students improve their wellbeing. This could include such facilities as cycle racks, social spaces and contemplation rooms. It may be useful to direct students to these.

### Case study

The University of Leicester have implemented a health and wellbeing 'tea campaign', which is virtually cost free and has proven to be extremely powerful in driving discussions with students about their wellbeing.

The tea campaign involves the university holding events each month in the reception area of accommodation buildings. Through introducing relaxed furniture and confidential space, they provide a welcoming environment in which students can talk about their wellbeing with trained staff, thereby allowing them to feel supported or for issues to be picked up and responded to efficiently.

### Case study

Bournemouth University's ResLifeBU residential life programme includes a significant focus on skills and recognises how integral this is to student wellbeing.

Through a diverse programme of events, ResLifeBU helps students have a smooth transition into university life and then go on to live and learn independently. The initial focus of the programme is on how to prepare for university life. Once settled, ResLifeBU offers students opportunities to develop existing skills or learn new ones including learning how to cook, how to set and keep to a budget, how to live a sustainable life, and to how to write a CV. They also provide interview tips and essay writing, revision and presentation skills sessions.

### Case study

Unite Students' "[Common Room](#)" website offers a constantly updated programme of content to help students get the best from their time at university. Content includes health and wellbeing, living on a budget, cooking, living with other students, and employability.

Much of this content is created by students themselves, with coaching and editorial support from Unite's editorial team. From 2019, Common Room wellbeing content will be reflected in in-property campaigns, and from 2020 students will be able to receive content via the Unite App based on preferences they select.



Image provided by  
Unite Students

### Resident Assistants, Residence Life Teams, Welfare Coordinators and Wardens

As well as providing a role in helping [respond to wellbeing concerns](#), Resident Assistant, Residence Life Teams, Welfare Coordinators or Warden teams also offer a great means through which to proactively promote healthy living.

Many Resident Assistant Residence Life teams live within accommodation blocks, can be current or former students, and are therefore already an integral part of student communities, and able to draw on their own or others' actual experiences. They can reach out to students in a way in which regular staff are not able to. Resident Assistants can be used to run, design or drum-up support for a provider's [events programmes](#) for example. In this case, these teams are likely to be more informed as to what the specific desires of tenants are and can design or promote events accordingly. In much the same way, these teams can also be utilised as an effective tool for improving the effectiveness of [health and wellbeing campaigns](#).

Resident Assistants are also an effective student wellbeing support network in their own right. These teams can offer an assurance to students that there is always somebody there who is willing and able to talk to them about their wellbeing or direct them to the appropriate care services. If providers do plan to implement a Resident Assistants programme or similar, it is crucial that [appropriate training](#) is given and clear escalation routes are mapped out. This will allow them to fulfil their [responsive wellbeing duties](#) in the most effective manner.

## 2. Where to Focus Provision

Providers should keep in mind that students are on a journey through university, with some parts of the experience harder, easier or just different from others. Furthermore, whilst there are some general factors that will be true for most students, it should be recognised that students are also an incredibly diverse group of people, with different needs, interests and desires that should be accounted for.

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*Students are an incredibly diverse group of people, with different needs, interests and desires that should be accounted for*

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When designing non-care wellbeing services, and an overall wellbeing strategy, it is important therefore to consider how initiatives can be both inclusive and how they can account for the specific needs of students.

We believe three of the key areas providers should consider when designing supportive, proactive wellbeing measures are student [transitions](#), [loneliness](#) and [exams or stress](#).

### 2a) Transitions

#### Arrival at University

Transition to university can be a particularly vulnerable time, and [research](#)<sup>7</sup> shows that almost two thirds of applicants are worried about going to university. About half of those moving away from home feel nervous about living with people they don't know, and this is notably higher among LGBT+ students<sup>7</sup>.



It should be noted that many students arrive at university with a previous history of mental health issues and may already have a diagnosis. The stresses of moving to university can also cause issues to arise.

During this time, students are unlikely to have developed a sophisticated understanding of the statutory care available in their new environment and will possibly have to wait to access some of these services before getting treatment. It can, for instance, take months for a referral to a specialist eating disorder service to be completed<sup>8</sup>.

Although accommodation providers cannot and should not provide alternative therapeutic care services for new students, there are many ways in which providers can help students cope with moving away from home.

One of the key roles for providers here is in the dissemination of information about wellbeing and statutory care services, which can be done as part of a [campaign, social activity or event](#). Student Minds have provided two incredibly useful [guides](#)<sup>9</sup> on transitions, one for students before they arrive at university and one for current university students. We recommend that providers share these guides, or other resources like them, with students in the first few weeks of their occupation, or even ahead of arrival if possible. Student Minds also provide a number of other [resources](#)<sup>10</sup> on transitions that providers may find useful, such as posters, leaflets and postcards.

Within the boundaries of [data protection](#) constraints, it is worthwhile operators considering if they can reach out to students before they arrive. As in the two case studies accompanying this section, online messaging or information services can be utilised in order to

### Case study

In 2018, Unite Students introduced uChat, an app-based service that allowed booked students to talk to their future flatmates in a private messaging group before arrival.

This replaced the (largely ineffective) attempts of students to find their future flatmates via traditional social media. Take-up was huge, and students gave very positive feedback about the service. Staff reported much higher levels of confidence among students when they arrived, because the fear of living with strangers had been taken away.

### Case study

Sheffield Hallam University (SHU) offers both an effective pre-arrival communication service and a portal that continues to provide assistance as students' progress through university.

The Accommodation Services team at SHU start to engage with student tenants as soon as they have accepted their offer of university allocated accommodation by way of their SHUstart online welcome portal. SHUstart offers information, advice and guidance to help students prepare for their arrival in Sheffield and explains some of the common health and wellbeing issues experienced by students. It also signposts them to where and how they can find advice and support once they do arrive.

Links to Facebook and social media allow students to communicate with flatmates ahead of intake days and dispels some of the concerns associated with meeting so many new people.

After students have arrived in halls, SHU use [Browser](#) - a sister portal of SHUstart - to continue communication with students. Through Browser, the accommodation team can send out regular newsletters, information and support. The platform also allows SHU the ability to send out reactive communications in response to specific safety concerns in Sheffield.

This tool allows SHU to create an annual plan for delivering relevant news, support and information, which is timed so that it is received when they know students will most need it; finance info when the rent is due, mental health support when revision and exams are taking place, and safety and security when the clocks go back.

share relevant information that may help students settle effectively or raise awareness of wellbeing issues. It should be noted that the university will also be communicating with new students prior to their arrival and therefore providers will want to ensure that any campaign is coordinated, and information provided is consistent and complimentary with that provided by the university.

In addition to information and guidance directly on wellbeing, the transition into university life can be eased through providing information or support on independent living, for example, advice on how to use a washing machine or eat healthily.

Welcome [events](#) are a useful tool that many providers will be able to employ to help students navigate transitions. These provide not only an opportunity for new students to meet, socialise and acclimatise but also give accommodation providers another opportunity to disseminate key messaging and information on wellbeing.

### The End of University

Another key transition for students comes at the end of their university experience.

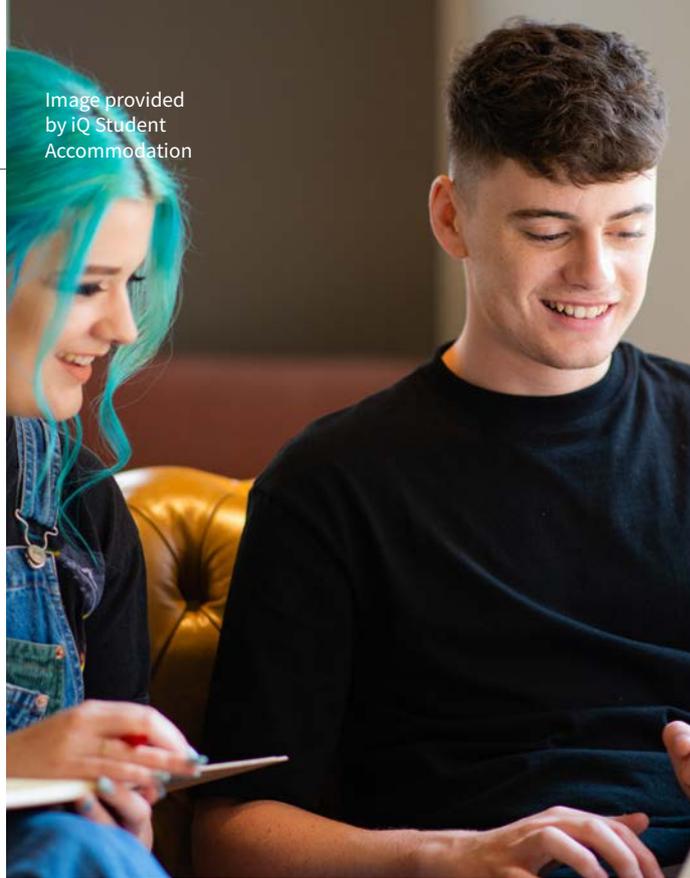
This can be a particularly stressful time for students, or soon to be graduates, as they contemplate their next steps and prepare to enter the world of work.

A 2017 Student Minds report, entitled [Graduate Mental Wellbeing in the Workplace](#)<sup>11</sup> found that one of the reasons for this is the substantial pressure on students to find high-skilled graduate employment. With this in mind, accommodation providers should seek to use this period to work with university partners and, if possible, local employers, so as to ensure students are fully aware of their options. Part of this collaborative working could involve providers referring or signposting students to university careers services or hosting networking events.

### 2b) Loneliness

For some students, university is an unrivalled opportunity to enjoy themselves, make friends and develop long-term connections. However, it should be recognised that this isn't the experience of everyone and many experience loneliness and are upset living away from home, often for the first time. As illustration of this, iQ Student Accommodation's recent [Opening Up](#) report<sup>12</sup> found that as many as one in five students are chronically lonely

Image provided  
by iQ Student  
Accommodation



### Case study

In 2019, iQ Student Accommodation launched a student wellbeing campaign in response to the insights gathered through their research with partners [Relate](#), the relationship experts, that revealed a fifth of UK university students reported feeling often or always lonely.

Their joint report: [Opening Up: insights into loneliness among students](#)<sup>12</sup> explores the risk factors for, and consequences of, student loneliness and marked the start of a dedicated iQ campaign – Embrace the Unexpected – to encourage students to take a chance on new friendships, and to work with them to better understand and co-design innovative solutions that could help facilitate meaningful relationships and combat loneliness.

Drawing on the key insights they uncovered, iQ continue to work with [Relate](#), wellbeing professionals and students to pilot the most promising solutions, and are testing these in their sites in London and Manchester during the 2019/20 academic year with a view to scale the interventions that work across their properties in 2020/21. They will measure the success of the pilot programme and make these findings publicly available so that others can learn from and adopt these approaches.

during their time at university. It is therefore crucial that PBSA operators recognise that this is a significant issue within student communities and ensure that proactive wellbeing initiatives reflect this.

Loneliness can be a factor at any point during a student's time at university but [transitions](#) are again an area of significant importance. When a student arrives at university there is substantial pressure on them to make new friends, 'fit in' and socialise with new people. They are also away from their established social networks, in some cases for the very first time. As IQ's [Opening Up report](#)<sup>12</sup> makes clear however, chronic loneliness is something that develops over a substantial period of time. It is therefore important that providers appreciate its relationship with student transitions and ensure that combating loneliness is a prioritised feature of provision throughout term times and for all years of students.

### International Students

Many accommodation providers house a high proportion of international students and should account for this in wellbeing provision. This group of students are more likely to experience loneliness during their time at university and may encounter difficulties due to language or cultural barriers<sup>12</sup>.

Recognising this, providers should ensure that accommodation staff try to make contacts among the various nationality groups within the accommodation so a level of 'cultural competence' is obtained. This will enable a greater understanding of specific issues for each group. For example, students from some countries may attach real stigma to disclosure of mental health issues while others have added pressures to succeed because their family has made significant financial and personal sacrifices to send their daughter or son to study in the UK.

### 2c) Assessments, Exams and Stress

Assessments, exams, coursework deadlines and other work pressures can take a significant toll on students.

Whilst often an integral part of the university experience, exams will naturally cause worry and stress as students are faced with the challenge of revising, performing and delivering on their academic potential.

Contrary to common belief, most stress dealt with on a daily basis is actually a good thing, as it encourages people to develop the skills and resilience needed to cope with problems when they occur<sup>13</sup>. It is important therefore

that students don't necessarily avoid stress but learn how to deal with it in the most productive way possible. This is where accommodation providers can help.

Operators should plan their non-care wellbeing service provision for these periods and ensure that managers, front-line staff and students themselves are prepared for them. In doing this, it is worth considering whether the following can be put in place:

- Additional space where students can relax, unwind or socialise
- Staff who are aware that these periods are difficult and are accommodating, vigilant and sympathetic to student needs
- Information or campaigns about the impact of noise, and stricter rules around noise at night time, during the revision and exams period
- Information so that students not only know how to access statutory care services but have resources that can inform and assist them in managing their own wellbeing during exam periods. Student Minds have produced some [exemplary guidance](#)<sup>14</sup> on this which could be disseminated to students
- [Events](#) that allow students to unwind or talk through the pressures they're facing.

Different universities will have exams at different times, so providers with several university partners are recommended to keep a record of these different exam periods so that they can time campaigns and additional services appropriately.

It should be noted that toxic stress, for example caused by abuse, neglect, violence or poverty is however particularly harmful and should always be dealt with through referral to specialist care. It is important that staff know how to identify this type of stress and deal with it appropriately when they encounter it. An [excellent summary](#)<sup>13</sup> of this difference is available [here](#). Simply put, if a student is finding it difficult to cope or is overwhelmed, they should be referred to the relevant care services.

# Providers' Legal Responsibilities

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## Pinsent Masons LLP – Legal Note on Duty of Care to Students

Students may be at risk of mental health issues when studying at university and staying in student accommodation. This can arise out of feelings of isolation, or the stress caused by those students experiencing, for the first time, the financial, social, academic and psychological pressures of adulthood and living away from home.

It should be noted that many students arrive at university with a previous history of mental health issues and may already have a diagnosis<sup>7</sup>. In the 2017 [“Reality Check” Report](#)<sup>7</sup> published by Unite Students and HEPI, 13% of applicants said they had a named mental health condition, compared with 15% of current students. In this case, the stresses of moving to university, and sometimes the lack of continuity of medical care, can cause issues to arise.

While these difficulties can often manifest themselves in the academic environment, such as through a lack of engagement and concentration on studies, they can also manifest themselves in student accommodation through anti-social behavioural problems, or through displayed symptoms of mental illnesses; depression, anxiety and eating disorders being the most common mental illnesses reported by students<sup>7</sup>.

In shaping a strategy for supporting student mental health, student accommodation providers should consider these factors and be mindful of their related general, common law, [duty of care](#) to their student tenants. They must also make consideration for their contractual and statutory duties (in particular the requirement to avoid unlawfully discriminating under the [Equality Act](#)).

A provider's delivery of pastoral support and the steps it takes to protect the health, safety and wellbeing of a student will be judged against any duty owed to that student. In a situation where it is alleged that failings on the part of a provider contributed to the harm suffered by the student, providers could be found to be liable.

This will involve accommodation providers engaging with universities about university investment in support and counselling networks and forming a more joined up structure for dealing with student mental health.

From a legal perspective, supporting student mental health needs to become a strategic aim of any partnership between accommodation providers and universities and will have to be reflected in the design of policies, procedures and training as well as the integration of consistent good practice across the sector.

This chapter covers the following areas:

1. [Contract](#)
2. [Duty of Care](#)
3. [Equality Law](#)
4. [Data Protection](#)
  - a) [Legitimate Interest](#)
  - b) [Article 9 \(Special Category\) Conditions - Consent](#)
  - c) [Other available Article 9 conditions](#)
5. [ANUK/Unipol Code for Educational Establishments](#)

## 1. Contract

The relationship between an accommodation provider and students is governed by contract.

Any contract is subject to consumer law and regulated by the Competition and Markets Authority (CMA). The CMA requires any terms to be in an accessible form and to be clear and transparent in relation to the parties' respective rights and obligations.

In the event that an accommodation provider breaches the terms of its student accommodation contract (either by non-delivery of services or failure to deliver to a satisfactory standard) then it risks a student complaint. If not resolved internally a complaint could then be referred to the Courts for breach of contract, misrepresentation or for a breach of the Consumer Rights Act 2015.

The contractual position will impact on any consideration of an accommodation provider's obligations to students who require mental health support. All promotional and other material, such as the accommodation provider's website, advertising materials, rules of occupation etc. may be regarded as forming part of the contract, and therefore must give an accurate account of the services offered and any other support provided in practice.

Part of that work may involve positively engaging with potential students who flag mental health issues at pre-contract and contracting stages to better plan support for needs. Another aspect will be making sure providers work with university partners to help ensure student contracts provide clarity around support available, and that implementation meets the standards required by law.

In taking steps to set out accurately the nature of the support offered in relation to wellbeing<sup>15</sup> and mental health support<sup>16</sup>, it is crucial that the parameters of any support and circumstances where services may not be available are set out. Accommodation providers should ensure that they comply with their legal obligations, deliver what students have 'signed up for', and manage the expectations of current and prospective students. This step along with the use of appropriate disclaimers and force majeure terms will help to minimise exposure to complaints and claims from students.

In situations where mental health issues arise accommodation providers must also be careful to ensure that policies and procedures are not enforced arbitrarily

against affected students. In particular, where disciplinary allegations are made against a student with a mental health issue it may be that alternative approaches are required to avoid any allegations of discrimination under the 2010 Equality Act. In these cases, it may be appropriate to have the discretion to develop alternative procedures by which the provider has the ability to consider alternatives to termination of occupation.

## 2. Duty of Care

The extent of a student accommodation provider's duties in respect of mental health have not been tested in the Courts, and whether a duty of care arises, or has been breached, will depend on the facts of a particular case. However, as the law in this area is continually developing there is the potential for future precedent to be established.

In England and Wales, the Courts have applied a three-stage test to establish whether a legal duty of care exists. The test is as follows:

- On the facts, the harm suffered by the claiming party would have been reasonably foreseeable to the defendant; and
- There was a relationship of proximity between the defendant and the claiming party (often called the assumption of responsibility); and
- On the facts of the case it is fair, just and reasonable for the Court to impose a duty of care on the defendant party in favour of the claimant.<sup>16</sup>

If an accommodation provider fails to meet its duty to its students, there is a significant risk of a successful claim for damages arising out of that provider's negligence.

Central to the question of whether it is fair and reasonable to impose a duty will be the proximity of the relationship between the accommodation provider in question and its affected student or students, and the foreseeability of any injury. A further consideration will then be whether the accommodation provider discharged its duty to the standard of care expected.

In many cases, the proximity of the relationship will depend on the type of accommodation provider. Clearly, the extent of any duty will be greater where the accommodation is owned or controlled by a student's university given the fact that the university has most likely contracted with the student to provide support in relation

to all aspects of their educational and pastoral needs.

Where a student is being accommodated by an independent private provider the duty owed is likely to be more limited in its scope and will be defined by the contractual relationship with the student, the extent of the pastoral support offered and any agreements reached between the provider and a student's university regarding the allocation of roles and responsibilities.

In these circumstances, it is critical that a private accommodation provider has agreed the responsibilities reserved to a student's institution. A student must also be clearly signposted to the available wellbeing and support services which can be accessed by that student under the terms of their student contract, as well as any additional support the accommodation provider is able to offer onsite.

The accommodation provider will also need to ensure that its staff are aware of and comply with any agreed policies and protocols governing the referral of students to the institution's student support services to discharge its obligations. Part of that work may involve positively engaging with potential students who flag mental health issues at pre-contract and contracting stages to better plan support for needs. Providers should also encourage their university partners to have in place student contracts which provide clarity around support available and endeavour to ensure that implementation meets the standards required by law.

In situations where a provider has not entered into any arrangements with institutions which address the pastoral needs of students, the extent of the duty will depend on the level of support stated to be provided in any accommodation agreement. In these cases, the duty of care will be increased as the levels of support are increased.

In the majority of situations, the standard of care expected of an accommodation provider will be that of 'an ordinary and competent accommodation provider', and those working with students with mental health difficulties (such as receptionists, warders, cleaners and security and support teams) may be judged against the skills of an ordinary skilled individual exercising that skill. In practice, this will involve an accommodation provider training staff to be able to act appropriately in situations where a student's behaviour reasonably suggests that they are in difficulty. Please note that further guidance on

[training procedure](#) is given in [section 2](#).

We would however expect the likely training providers should offer staff, to fulfil their duty of care, would include as a minimum:

- Guidance on mental health issues and recognising the signs of students in likely mental distress
- Guidance on how to assess potential student issues such as self-harm, anorexia and potential suicide
- Guidance on how to communicate with and support students in distress including use of non-discriminatory, non-stigmatising and positive language
- Guidance on how to encourage to self-refer or how to refer students to professional support (including any procedures or protocols set up by the provider or agreed with institutions)
- Guidance on how to deal with a crisis involving student mental health and how to assess and contain urgent situations and the details of how to refer cases to networks of appropriately trained professionals including NHS mental health services
- Guidance on the need for staff not to place themselves at risk of harm or to take any action that would exceed their expertise.

All levels of staff should be considered for training, in particular front-line staff such as reception, warders, cleaners and out of hours security. This training should be reviewed regularly to maintain effectiveness and should be underpinned by appropriate policies and procedures which ensure that students are supported and referred to specialist services.

The important point for an accommodation provider to understand is that if the pastoral support goes beyond training and includes, for example, offering mental health services or an expert first aid professional or a manager who is crisis trained on site, or is providing access to trained healthcare professionals then the higher the expectation and the higher the likely duty of care. If the provider has over committed and the support is not delivered in the event of an actual crisis, a provider is more likely to be found liable for breaching that duty of care and therefore all providers need to be fully confident they can deliver on their support commitments.

We would expect that in most cases, accommodation providers who have student tenants with declared or diagnosed mental health issues will have enhanced

duties and will therefore need to ensure that all staff (not just those who provide pastoral care) properly understand their roles and their responsibilities towards these students.

In urgent or high-risk cases, it is also important that trained 'case conference' teams can be quickly mobilised and that these teams comprise a range of key multi-disciplinary stakeholders, as outlined in [Section 2](#). This will require a degree of investment in advance training and strategic planning for these key stakeholders.

In practice, this can be achieved by the accommodation provider ensuring that the work of its staff is supported by the guidance and training noted above as well as accessible and transparent policies and procedures which deal with the prospect of referrals. This is particularly true in cases where crisis situations arise (where a student has attempted self-harm, suicide or is judged to pose a risk of harm to themselves or others) as well as situations where there is evidence of a student becoming withdrawn from any engagement with the institution. In all cases, consent from the student to disclose information to the university should be sought in the first instance, and an [example consent to disclose form](#) is provided in the [Appendix](#).

Providers should also be especially mindful of situations where a student without diagnosed or disclosed health issues engages in behaviour which may indicate significant issues relating to their mental wellbeing. This can be achieved by a provider either communicating to staff and students a university's mental health policy or the provider's own. Again, further guidance on this is provided in [section 2](#).

In particular, a claim could arise when staff intervene in an incident where a student occupant of a residence operated by a provider has either self-harmed or attempted to take their own life. If a staff member volunteers assistance, then as a matter of law a duty is imposed on that individual (and on the provider through the principle that employers are vicariously liable for acts of staff carrying out their contractual obligations) not to take any action which would make the student's condition worse<sup>16</sup>. In this case if the staff member does not urgently escalate the incident to the appropriate authorities but recklessly or negligently attempt to resolve matters themselves then they place themselves and their employer at significant risk should the student's suffer harm as a result. At the same time, staff should

not make the opposite mistake of failing to provide any immediate, practical assistance that any bystander might be reasonably expected to offer.

This will be the case even if it is clear that the student placed themselves in danger. In cases where, due to intoxication or overdose, a student could no longer be said to be responsible for his or her actions, unless a provider can show that its employees gave clear thought to the care of the student and sought adequate medical intervention then a finding that there has been a breach of a duty of care to the student is likely<sup>17</sup>. While, the fact that the student may have been responsible for their initial injuries or mental state may reduce any award of damages based on contributory negligence, it is not a defence to a provider for the apparent failure of its staff to provide an adequate and reasonable response or intervention in a case of student harm or suicide.

### 3. Equality Law

Under the Equality Act 2010, it is unlawful for service providers, including providers of student accommodation, to discriminate, harass or victimise prospective student tenants or student tenants on the grounds of a characteristic protected by the Act. Accommodation providers are also obliged to anticipate and put in place reasonable adjustments to avoid student tenants with protected characteristics being treated less favourably.

Students with mental health difficulties may be protected by the Act and providers will need to pay careful attention to the duties owed to them when delivering pastoral and accommodation services.

Providers will be expected to show forward planning. A requirement under the Act is to anticipate the needs of disabled applicants and students and take positive steps to make reasonable adjustments to policies procedures accordingly, unless there is justification for not taking such a step. The justifications are extremely limited but may include impact on the financial resources available to the provider and health and safety, the interests of other students and practicability.

The challenge for providers however is that what constitutes a 'reasonable' adjustment is not defined in law and is left to be determined by the Courts in the context of the individual circumstances of a case. Therefore, while there may be justification for offering lesser or no adjustments where appropriate, any certainty,

in the event of a dispute, can only be achieved through litigation.

### 4. Data Protection

Data Protection and/or GDPR are often used as catch-all excuses as to why reasonable and sensible steps cannot be or could not have been taken. An increased awareness of individuals' rights in relation to their personal data has resulted in a commensurate rise in caution. At the same time, the introduction of GDPR has seen potential penalties rise exponentially, and organisations can become paralysed by a fear of getting it wrong.

However, data protection law is not intended to prevent organisations taking actions involving the processing of data where those actions are necessary in the circumstances. Data protection law relies on a number of common-sense principles, and it is not generally intended to prevent organisations from using data in a reasonable/fair way, but rather to make organisations ask themselves some fairly straightforward questions to make sure that what they are doing is, in fact, reasonable/fair. One of the most important principles is that personal data is (self-evidently) personal, and that accessing it and using it should not be taken for granted and should be kept to the minimum required for the particular purposes. This is the basis for data minimisation.

Organisations need to ask what personal data they process, who does it belong to, why do they have it, why are they allowed to have it, why do they have so much of it, what are they going to do with it, do they intend to share it (if so, with whom and why). They also need to ask whether the person that the personal data is about, the data subject, knows the answers to all of these questions (because the organisation has told them) and/or would reasonably expect the organisation to be doing what they're doing with their data. There is a requirement for transparency with data subjects.

An organisation which has asked these questions (and which has clear answers to them) is likely to be giving the right levels of protection to the individuals whose personal data they are processing.

Providers should note that if the organisation doesn't know or cannot say why it is processing a certain item of personal data, then it probably shouldn't be processing it. If the data subject doesn't know what an organisation is doing with their data then the data subject probably

should know, or the organisation shouldn't be doing what they are doing with it. If the organisation has more data than it needs, then it probably shouldn't have as much of it. Of course, there are exceptions. Telling someone what you are going to do with their personal data won't necessarily make it lawful to do it.

The bottom line is that if you are doing something with someone's data, that most people would think is reasonable and fair, and you have told the person concerned (or, if not, in the circumstances most people would agree that there was a very good reason not to), then you are likely to be in broad compliance with data protection law. However, there are defined lawful bases specified in the data protection law, one or more of which must apply. Consent is one of these, but, whilst we encourage providers to seek such consent, it is not going to be the right basis to use in all circumstances. We explore the available legal bases below.

A private student accommodation provider is highly likely to be a data controller in relation to the personal data of students resident in the accommodation it provides. Providers will decide the purposes for which, and the manner in which, student personal data is processed. This means that in general terms the provider will need to have asked (and continue to ask) the questions above. More specifically, in the context of students who are experiencing, or who appear to be experiencing, mental health issues, providers will need to know what information can be shared, with whom, and in what circumstances.

A controller needs to have a legal basis for all its processing (which includes its sharing) of personal data. This is the answer to the "why are they allowed to have it" question above. Under the GDPR, there are six lawful bases available to controllers for their processing – the processing will only be lawful to the extent that one of these bases applies. The accommodation provider will need to identify the most appropriate basis for the processing it is carrying out. To process most types of personal data, this is the only lawful basis that will be required. (Personal data may be processed for different purposes and different legal bases may apply to the different purposes).

However, in the context of processing personal data which concerns health (including mental health) a second legal basis is required. Health data is classified under the GDPR to be 'special category' data (under the old Data

Protection Act 1998, this was known as ‘sensitive personal data’), and controllers who process such data will need a basis from Article 6 GDPR to apply (in common with all personal data), and in addition, a condition from [Article 9](#). We will consider some of the appropriate bases for processing both from Article 6 and [Article 9](#) below.

The Article 6 bases which are likely to be appropriate for processing personal data other than special category data are:

- The data subject has given consent;
- The processing is necessary for the performance of a contract to which the data subject is party (or to take steps to enter into such a contract);
- The processing is necessary for the provider to comply with a legal obligation;
- The processing is necessary to protect the vital interests of the data subject; and
- The processing is necessary for the purposes of the legitimate interests pursued by the provider;
- There is a further basis permitted when the processing is “*necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller*”. However, this basis is normally relied upon by public bodies, and the task “*in the public interest*” in question must be one which is laid down by law. It is unlikely that a private provider of student accommodation would meet these criteria (although a university, as a public body, might).

For its processing of personal data that is not ‘special category’ personal data, the accommodation provider will need to identify which of the bases above is the most appropriate to the processing being carried out. Where the processing is of special category data, for example if a provider is concerned about a student’s mental health and needs to disclose its concerns either to university pastoral services, or to the student’s own emergency contact, then it is likely that the most appropriate Article 6 basis above will be “legitimate interests”.

### 4a) Legitimate Interests

Article 6(1)(f) of the GDPR states that processing will be lawful if it is: necessary for the purposes of the legitimate interests pursued by the controller or by a third party, except where such interests are overridden by the interests or fundamental rights and freedoms of the data subject which require protection of personal data.

This legal basis must be applied with caution, however, as it requires the accommodation provider (as controller) to apply the second half of the ground - the ‘prejudice test’ very carefully. Providers will need to weigh up the very strong right of students to have their privacy rights protected against their own needs as a data controller to process that individual’s personal data for their own (or a third party’s) legitimate interests.

The Information Commissioners Office (ICO) has produced [guidance](#) setting out how the legitimate interest ground is to be applied under the GDPR, in which it states that data controllers should consider a three-part test:

1. *Purpose test: are you pursuing a legitimate interest?*
2. *Necessity test: is the processing necessary for that purpose?*
3. *Balancing test: do the individual’s interests override the legitimate interest?*

*A wide range of interests may be legitimate interests. They can be your own interests or the interests of third parties, and commercial interests as well as wider societal benefits. They may be compelling or trivial, but trivial interests may be more easily overridden in the balancing test.*

*‘Necessary’ means that the processing must be a targeted and proportionate way of achieving your purpose. You cannot rely on legitimate interests if there is another reasonable and less intrusive way to achieve the same result.*

*You must balance your interests against the individual’s interests. In particular, if they would not reasonably expect you to use data in that way, or it would cause them unwarranted harm, their interests are likely to override yours. However, your interests do not always have to align with the individual’s interests. If there is a conflict, your interests can still prevail as long as there is “a clear justification for the impact on the individual.”<sup>17</sup>*

Under the GDPR it is particularly important for providers to keep a record of any ‘legitimate interests assessment’ which they carry out in order to determine whether this ground for processing can be relied upon. The [ICO website](#) provides a useful checklist of points which need to be considered.

However, even where providers have carried out a legitimate interests assessment and have concluded that this ground may be applied to any particular processing

(including sharing student personal data with university pastoral services, emergency contacts, and healthcare professionals), it is a legal requirement under the GDPR to tell individuals what you are doing with their personal data and why.

Providers should therefore check that their student privacy notices indicate that personal data will be used in this way. The notices would need to state what the legitimate interests are which justify this use, why this use of the data is necessary to achieve those purposes, and what the provider envisages the impact of the processing to be (i.e. the balancing test as outlined above).

### ***4b) Article 9 (Special Category) Conditions - Consent***

As we have already briefly indicated, if providers process special categories of personal data, under the GDPR they will need to have a condition for processing from Article 9, as well as from Article 6.

One of the conditions listed under Article 9 of the GDPR is that the “data subject has given explicit consent to the processing of those personal data for one of more specified purposes.” Consent can therefore be considered as the additional Article 9 basis for the processing of special categories of personal data.

Under GDPR consent must be explicit, informed and freely given. If consent for disclosure of this kind of information were to be requested from students (for example, up front, at the same time that the student contracts with the provider) providers should make sure that they collect this consent separately (once the student in question has been provided with full details of the processing). If consent is given at this time, providers should record that it has been given in relation to disclosures of this type.

However, whilst consent might seem the simplest, and potentially the fairest, way to ensure that accommodation providers can lawfully disclose personal data relating to the mental health of students, there are a number of requirements and limitations that providers will need to be aware of when relying on this basis. Providers should make sure that any consent notices should provide specific options (consent or otherwise) for each of the processing activities being considered.

For consent to be valid under GDPR, the data subject

must be given complete and irrevocable control over whether or not the processing should proceed. It would be unfair (and potentially in breach of GDPR) to ask an individual for their consent for their personal data to be shared and then to override a refusal to give that consent. If you ask for consent to process the personal data, and it is refused, providers should not then go on to process the data using a different basis for processing.

The data subject must also be informed of their right at any time to withdraw their consent. This creates the very real possibility that the consent to inform an emergency contact, or university pastoral services, or a healthcare professional might very well be withdrawn at precisely the moment a provider would want to take one of these steps.

For these reasons, providers should consider using an Article 9 basis other than consent for the majority of this kind of processing. Whilst consent may have a role to play, it is likely that an up-front consent provided when students enter accommodation contracts, unless carefully framed within the privacy notice, may create as many issues as it solves. It may be appropriate to continue to acknowledge in your privacy policy that consent may be sought in relation to the disclosure of sensitive personal data, but only in very specific, limited circumstances. For example the privacy policy might state that consent may be sought in relation to disclosure of information where there is no indication of immediate harm, but where a provider has concerns that a student may either be at immediate risk of harm (or pose such a risk), the provider would need to disclose sensitive personal data on the lawful basis that there is a substantial public interest in doing so (see further below).

### ***4c) Other available Article 9 conditions***

There are two other bases which might be appropriate in the circumstances. These are where processing is necessary to protect the vital interests of the data subject or of another natural person where the data subject is physically or legally incapable of giving consent; and where processing is necessary for reasons of substantial public interest.

The first of these may also be too limited in application for providers generally to rely on. It is aimed at life or death situations, and it could certainly be argued that a student who suffers from mental health issues to the extent of becoming suicidal might well be said to be in

a life or death situation. However, for the condition to apply, the data subject must be physically incapable of giving consent. It is possible to argue that mental distress might in effect physically prevent a person from giving their consent, but this does not seem a very solid basis on which providers can build a mental health policy.

### **Substantial public interest**

However, the second of these additional conditions is more likely to be applicable and is a sensible basis for providers to use in these circumstances. The Data Protection Act 2018 states that for the processing of special category personal data to be classed as being necessary for reasons of substantial public interest, it must meet one of a number of conditions set out in a schedule to the Act.

One of these conditions (Paragraph 18, Part 2, Schedule 1, DPA 2018) concerns safeguarding of children and of individuals at risk and applies when processing is necessary to protect an individual either from physical, mental or emotional harm or the physical, mental or emotional well-being of an individual.

The individual must either be under the age of 18 (which may be the case in relation to certain students), or at risk. 'At risk' is defined as needing care and support, experiencing (or at risk of) physical, mental or emotional harm, and as a result of those needs being unable to protect themselves from harm. The processing must be for reasons of substantial public interest and carried out without the consent of the data subject, because either (i) the data subject cannot give consent in the circumstances; or (ii) the controller cannot reasonably be expected to obtain consent in the circumstances; or (iii) obtaining consent would prejudice the provision of protection.

In our view, providers should consider using this substantial public interest basis when they need to process personal data concerning mental health issues. This basis avoids the need to obtain consent from students which may either be refused or later be withdrawn and avoids needing to make the argument that the situation is actually life or death, or that the student is physically incapable of giving consent. In the interests of transparency, the provider should set out in the student policy both the fact that such disclosures might be made, and the legal basis for them.

**This legal guidance was provided by Pinsent Masons LLP, 16th April 2019**

## 5. ANUK/Unipol Code for Educational Establishments

Whilst the current [ANUK/Unipol National Code of Standards](#)<sup>18</sup> for private student accommodation make no reference to student wellbeing, the one for university managed accommodation does. It is also expected that the new National Code for private providers will contain clauses on health and wellbeing when it is released next year.

All providers should, therefore, take steps to ensure they have in place adequate wellbeing policies and protocols to maintain continued compliance with the Code, which though not strictly a legal requirement, is necessary for members in order to avoid sanction.

For university-operated student accommodation, it is imperative that the following is in place to be compliant with the [current Code](#):

### Staff and Student Care:

- An appropriate residential presence is provided in any residential development which houses in excess of 150 students (where the residential development is larger there is a minimum of 1 residential presence for every 250 student occupants) and the purpose of this residential presence is made clear to occupants living within the building;
- Staff providing such a residential presence clearly understand their role and responsibilities and receive an appropriate level of structured and pre-planned training prior to commencing their duties;
- The educational establishment can demonstrate the effectiveness of this training process and that the content of the training has been developed following an analysis of the training needs of staff providing the residential presence;
- Such staff are also provided with the names and contact details of additional support so that they can be called upon in the event of an emergency.

### Health and Wellbeing:

- The educational establishment provides information to occupants in respect of its provision of student

support services (which may include but not be limited to wellbeing, financial and disability support) and how to access them. The information provided must include reference to services provided by the education establishment, the students' union and other appropriate or relevant agencies;

- The educational establishment provides occupants with information on how to access emergency support (both during usual working hours and also outside of these hours) including contact details and procedures to follow;
- The educational establishment provides information on how to register with one or more local GP practices or its own medical services and encourage all occupants to register as soon as possible;
- The educational establishment has in place appropriate policies and procedures to support occupants that are experiencing health and wellbeing issues, which include encouraging them to access relevant support services, and procedures to ensure the relevant organisations are contacted if an occupant is thought to be at risk, including Police, NHS and the educational establishment's officer/department (where data protection and confidentiality legislation permits);
- Staff have been trained on, or will have sufficient knowledge of, the procedures in place to refer students experiencing a health or wellbeing issue.

We expect that these terms will be broadly incorporated into the new Code for accommodation owned or managed by non-educational establishments when it is released next year.

# Appendix

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## Consent to disclose

As outlined in the main body of this Guide, it is important that providers proactively ensure they are capable of sharing information about their student tenants' health with their university partners.

This allows a more joined up and collaborative approach to student wellbeing, ensuring that issues do not 'slip through the cracks' or that important behavioural indicators are not missed. The sharing of information also allows both partners to proactively plan and improve their wellbeing provision, enhancing the university experience of all students.

This sharing must however always be within the bounds of the law, and providers should be especially wary of their responsibilities under the 2018 Data Protection Act. More information on these responsibilities is outlined in the [Legal Responsibilities](#) section of this Guide.

As also explained in the Legal Responsibilities section, it may be that, in some exceptional circumstances, providers can share some information with partners whether or not the student in question has given, withheld, or withdrawn their permission. However, given the legal complexities involved, we encourage providers to put in place proactive measures to ensure that they have the right to share information even when such exceptional circumstances have not yet arisen. We recommend that an [information sharing agreement](#) with universities is sought, as outlined elsewhere in this Appendix, and that providers seek the consent of students to disclose information about them through a 'consent to disclose' form.

A consent to disclose form asks students whether they would be willing to allow a provider to share information regarding their wellbeing before they start their tenancy. This should outline clearly what information the provider wishes to be able to share and why.

As part of this publication, Unite Students have kindly agreed to publicly share their consent to disclose form, which we encourage providers to learn from and adapt to their individual circumstances.

We believe this form to be an excellent example of to how gain consent to disclose personal information, as it sets out clearly and simply everything providers need in order to gain the ability to disclose, without intimidating tenants with needless complexity or legal language.

Any such form providers offer students should:

- Clearly demonstrate any person or organisation to which information will be shared
- Clearly note which student(s) the consent covers
- What information will be shared
- Why this sharing is necessary or sought
- The member of staff responsible for sharing information
- The signature of both parties.

We think it would be helpful if we could share some information about you with another person or organisation.

This form explains who we want to share information with, what we want to tell them, and why. Please sign at the bottom if you agree that it's OK for us to do this.

### Person or organisation to which we intend to disclose information

Person /  
Organisation

*Name of person or organisation to which we will disclose information*

### Student details

First name

*Student's first name*

Last name

*Student's last name*

Residence & flat  
number

*Residence & flat number*

### Information to be disclosed

What information  
will be disclosed  
about the student?

*What information will you share about the student?*

Why is this  
disclosure  
necessary?

*Why do you wish to disclose this information?*

### Student Services team member making this disclosure

*Your name*

### Student's consent to disclosure

Student's signature

Date:

If **not** signed by the  
student, why not?

*Reason student did not sign form*

## Information Sharing Agreement

An Information Sharing Agreement is a useful tool through which providers can establish the boundaries of information sharing with partners.

These agreements allow both parties to quickly and clearly assess both their legal requirements and the partners expectations. They are particularly beneficial in cases where there is an emergency but contact between the university and provider is infrequent.

Cass and Claredale, a charity accommodation provider operating in east London, frequently use these agreements with their university partners. As part of this publication they have kindly shared the below template for such an agreement, which providers should not copy directly but should adapt to their own individual circumstances.

## Example Information Sharing Agreement

### 1. PURPOSE OF THIS AGREEMENT

This agreement has been developed to enable the compliant sharing of personal information between C&C and X.

The data is shared within the existing legal framework of the General Data Protection Regulation and associated legislation, where parties act as ‘controller to controller’ rather than ‘joint controllers’.

### 2. BACKGROUND

Cass and Claredale Halls of Residence Association Limited (C&C) is a charitable Industrial and Provident Society that has the primary object of providing affordable accommodation, associated facilities and amenities and assistance to house people, with such provision being primarily directed to students.

C&C operates Claredale House:

- Claredale House, Claredale Street, London E2 6PE; providing 246 single study bedrooms configured in 59 flats of between two and seven residents sharing the communal flat facilities of shower, toilet and kitchen.

In these contexts there is often a requirement for the C&C to share data about its residents and tenants with X.

In this agreement, a “resident” refers to a student who has entered into a licence agreement for C&C halls of residence accommodation.

### 3. CATEGORIES OF DATA SUBJECT

The data subjects concerned in this agreement are students of X.

#### 4. RECIPIENTS AND THEIR RESPONSIBILITIES

This data sharing agreement will cover the following parties and responsibilities:	
<b>Institution name</b>	<b>Responsibility</b>
C&C	Liaising with customers where required about the management of resident and tenancy agreements, payment of rent and other financial obligations, management of complaints/issues and welfare and health issues
X	Liaising with C&C where required about their students in relation to the management of resident and tenancy agreements, payment of rent and other financial obligations, management of complaints/ issues and welfare and health issues

#### 5. PURPOSES OF THE DATA SHARING

The parties will share information sharing data for the following purposes, as required:

1. Managing applications for accommodation
2. Managing appropriate adjustments for declared physical or mental disability issues
3. Managing stages of the contract, residency or tenancy
4. Managing complaints and other related issues
5. Responding to serious welfare issues or medical emergencies
6. Providing summary reporting of service usage to assist assessment or planning around service delivery
7. Assisting in specific case work where sharing between the two parties is required

#### 6. DATA TO BE SHARED

The data to be shared will be in the following scenarios:	
<b>Scenario</b>	<b>Data to be shared</b>
Application process	Name, institution, course, date of birth, student ID, contact details
Managing appropriate adjustments for declared physical or mental disability issues	Name, institution, course, date of birth, student ID, contact details, property/room number, nature of the disability declared, student ID, any history relevant to their time at their college or institution.
Managing a complaint and other related issue	Name, institution, course, date of birth, student ID, contact details, details of complaint, complainant name, C&C action taken, any correspondence or notes relating to the complaint
Responding to a serious welfare issue or medical emergency	Name, institution, course, date of birth, student ID, contact details, situation (welfare or emergency), C&C action, any applicable correspondence or minutes taken from meetings.

Providing summary reporting of service usage to assist assessment or planning around service delivery	Name, institution, course, date of birth, student ID, property name, room types, year of study, nationality
Assisting in specific case work where sharing between the two parties is required	Name, institution, course, date of birth, student ID, contact details, case details, C&C action, any applicable correspondence or minutes taken from meetings.

## 7. LEGAL BASIS OF THE SHARING

The General Data Protection Regulation and UK Data Protection Act 2018 requires that both laws set a number of conditions that need to be met in order to process personal data.

The legal basis for this sharing will be as follows: <b>Purpose</b>	<b>Article 6 grounds for processing personal data</b>	<b>Legal grounds for processing special category data (Article 9, GDPR) if applicable</b>
<b><i>Application process</i></b>	(b) necessary for the performance of a contract	(b) necessary for the purposes of carrying out the obligations and exercising rights of the data controller or subject in the field of social protection law
<b><i>Managing appropriate adjustments for declared physical or mental disability issues</i></b>	(b) necessary for the performance of a contract	(b) necessary for the purposes of carrying out the obligations and exercising rights of the data controller or subject in the field of social protection law
<b><i>Managing a complaint and other related issue</i></b>	(b) necessary for the performance of a contract	(b) necessary for the purposes of carrying out the obligations and exercising rights of the data controller or subject in the field of social protection law
<b><i>Responding to a serious welfare issue or medical emergency</i></b>	(d) necessary in order to protect the vital interests of the data subject	(c) necessary in order to protect the vital interests of the data subject

Each party commits to ensuring appropriate technical measures are in place to ensure the security of the data to prevent loss, misuse or unauthorised access. This will include, but not be limited to:

1. Access restricted to named staff
2. Staff training and awareness
3. Appropriate to the risk around the data, password protected files (both in storage and in transfer)
4. No storage on unencrypted removable media
5. Retention of shared data

## 9. DATA BREACHES

Each party will notify the relevant parties without undue delay any incident which leads to a personal data breach. Each party will give the other party reasonable assistance in meeting GDPR Articles 33 and 34 around breach notification.

## **10. DATA QUALITY**

Each party commits to ensuring the accuracy, relevance and usability of the data it transfers to the other party.

## **11. RETENTION OF DATA**

The data will be retained in accordance with the 'Storage Limitation' principle in Article 5 GDPR and subject to the retention schedules of each party.

## **12. THE RIGHTS OF INDIVIDUALS**

Individuals (data subjects) have a number of rights under the GDPR. Each party acknowledges its responsibilities regarding the rights of individuals and will provide reasonable assistance to each other to meet these obligations. Each party is responsible for reflecting the data sharing defined in this agreement in their privacy notices, subject to their obligations under Article 13 and 14 of the GDPR.

## **13. FREEDOM OF INFORMATION**

Where a party is a public authority subject to the Freedom of Information Act 2000, the other party will provide reasonable assistance to such party in meeting its obligations.

## **14. REVIEW OF THIS AGREEMENT**

Each party may request a review of this agreement as necessary. This agreement shall only be varied by a written agreement signed by the duly authorised representatives of each party.

## **15. NO PARTNERSHIP OR AGENCY**

Nothing in this agreement is intended to, or shall be deemed to, establish any partnership or joint venture between any of the parties, constitute any party the agent of another party, or authorise any party to make or enter into any commitments for or on behalf of any other party.

## **16. ENTIRE AGREEMENT**

This agreement constitutes the entire agreement between the parties and supersedes and extinguishes all previous agreements, promises, assurances, warranties, representations and understandings between them, whether written or oral, relating to its subject matter.

## **17. RIGHTS OF THIRD PARTIES**

No one other than a party to this agreement shall have the right to enforce any of its terms.

## **18. GOVERNING LAW AND JURISDICTION**

This Agreement and any dispute or claim arising out of or in connection with it or its subject matter or formation shall be governed by and construed in accordance with English law and the parties submit to the exclusive jurisdiction of the English courts.

## Self Assessment

It is vital that providers proactively look at their wellbeing protocols on a frequent basis and update them in accordance with the developing needs and traits of both tenants and university partners.

The need to do this is made even more crucial by the ever-adapting regulatory environment that providers operate in.

### Self-assessment tool

In order to assist providers in doing this, we have created the below self-assessment tool, which outlines, in light of what has been discussed in the Guide, what providers should consider for their reactive wellbeing protocols in 2019.

### How to use this tool

Rate each statement from 1-4 as it applies to your organisation:

1. We do not do this at all
2. There is an intention to act but little action yet
3. We have activity in this area but it is not yet consistent
4. We have consistent activity in this area leading to consistent outcomes

To obtain a more comprehensive view, you could ask senior colleagues from different parts of the business to carry out the assessment, then share and discuss your answers.

When you have completed the review, look at your areas of strength and weakness. Think about your level of ambition: where do you want to get to, and how fast? What resource are you prepared to commit to it?

Where are you going to focus your efforts first – reducing risk from weaker areas, or building out from strong areas? What are your short, medium and long-term actions?

Think about what you might to address before you begin: Are all senior leaders supportive? Is the organisational culture a help or a hindrance? Do other policies or KPIs work against student wellbeing good practice?

### Proactive wellbeing

	1	2	3	4
We offer a programme of events and social activities that are appealing to a diverse range of students				
Our communications and activities pre-arrival, during arrival and post-arrival actively support first year students to make a good transition to university				
We actively share information about social activities that are run by the university and students' union				
We actively publicise university and students' union wellbeing campaigns within our accommodation and/or run our own wellbeing campaigns				
During exam times we take active measures to support students to study, sleep and manage their stress				
<b>Proactive wellbeing average</b>				

**Policies and procedures**

	1	2	3	4
We have comprehensive and up to date student wellbeing policies and procedures				
Policies and procedures are actively followed by all employees				
All student-facing staff and their managers are introduced to student wellbeing policies and procedures as part of their induction				
Policies and procedures are updated regularly with expert input				
Policies and procedures are signed off by a business-wide executive board				
<b>Policies and procedures average</b>				

**Case Management**

	1	2	3	4
Student-facing staff can record concerns about the welfare of students in a structured way				
Teams consistently take appropriate practical actions to mitigate student welfare issues (e.g. room moves)				
There is consensus across the organisation about the most appropriate actions to take in common welfare scenarios				
Someone takes a central overview of student wellbeing cases				
There are mitigation plans in place to cover high risk student welfare scenarios				
Wellbeing cases are reviewed regularly and learnings are captured and implemented				
<b>Case management average</b>				

**Employee awareness and development**

	1	2	3	4
There is a structured programme of awareness raising and staff development to support staff to manage student wellbeing issues				
Staff development on student wellbeing issues is tailored to different job roles				
Staff development on student wellbeing issues is included in staff inductions				
Staff development is regularly updated to include emerging trends				
Student wellbeing is regularly discussed at team meetings and 1-1s				
Staff who have high contact with student wellbeing issues have appropriate supervision and debrief				
<b>Employee awareness and development average</b>				

**Relationships**

	1	2	3	4
Relationships with student wellbeing teams at each of our partner universities are strong, up to date and active				
Protocols for making referrals to university services and for sharing data are clear and well understood for each university partner				
We know how best to work with each of our university partners in a crisis situation				
Where residential assistant (or equivalent) teams are in place we are clear about their roles, boundaries and ways of working when it comes to student wellbeing issues				
<b>Relationships average</b>				

**Crisis management**

	1	2	3	4
We have comprehensive and active general crisis management procedures				
Crisis management procedures explicitly include student wellbeing, both as a potential trigger and in relation to the management of any crisis affecting the wellbeing of students				
We have a standard de-escalation process that is routinely followed after a student wellbeing crisis				
Relevant staff in communications and accommodation management have an awareness of suicide postvention guidance				
We know how to effectively interface with the university case management processes while respecting students' data protection rights				
<b>Crisis management average</b>				

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