UNIVERSITY OF CAPE TOWN STUDENT MENTAL HEALTH POLICY

1. AIMS AND PRINCIPLES

The University is committed to an inclusive education for all, which welcomes diversity and promotes equal opportunities for students to develop to their full potential. To this end, the Student Mental Health Policy aims to:

a) enable the University to fulfil its educational responsibilities to students with diverse mental health needs;

b) promote student well-being and destigmatisation by providing a supportive environment for students with mental health difficulties;

c) inform all members of the University community about resources, policies and procedures for addressing students’ mental health needs;

d) facilitate communication, cooperation and consistency between relevant University stakeholders on matters relating to student mental health;

e) comply with international best practice guidelines for student mental health, while accommodating the specific contextual needs of the University’s student body.

The policy is guided by the following basic principles:

a) the University recognises that persons with mental health disabilities have been subject to multiple forms of marginalisation and exclusion and that it is imperative that higher education puts measures in place to redress the inequalities and disadvantages created by prejudice and discrimination against persons with mental health disabilities;

b) the University commits to complying with legislation governing the rights of persons with mental health disabilities;

c) student mental health is an integral part of student health and students’ acute or chronic mental health difficulties should be accommodated in a manner equitable with acute and chronic physical health conditions;

d) students have diverse cultural meaning and belief systems about mental health and wellness which should be treated inclusively and equitably by the University;

e) students with mental health difficulties have the right to confidentiality within the guidelines specified in Section 6 of this policy.
2. DEFINITION OF MENTAL HEALTH DIFFICULTIES

Many students experience periods of emotional distress or anxiety, often arising from personal stressors, academic or adjustment stressors at university, as well as broader contextual, institutional, and structural stressors related to inequality and historical oppression. Sometimes distress or anxiety goes away on its own or can be resolved by seeking support from family members, friends or other existing support networks, by addressing sources of stress where possible, and by using appropriate coping strategies and self-care. However, some students may experience emotional or psychological difficulties that are more severe and/or persistent and that significantly affect their ability to participate in academic activities and social relationships. These difficulties can be categorised into two tiers:

a) Mental health disability. This refers to a mental health condition that:
   - has been diagnosed by a registered mental health practitioner using a recognised psychiatric classification system;
   - is of long duration (at least 12 months);
   - substantially limits the student’s ability to perform academically.

   For some students this might be a pre-existing condition while for others it may begin after admission to UCT.

b) Acute mental health difficulty. This refers to mental health symptoms that are:
   - short-term or temporary in duration (less than 12 months);
   - may or may not meet a full psychiatric diagnosis;
   - significantly interfere with academic functioning.

3. RESPONSIBILITIES

This policy encourages a partnership approach with shared responsibility between the University, its staff, and individual students with respect to addressing student mental health issues. The responsibilities of each partner are described below.

The University will ensure that:

a) University staff and students are informed about their respective responsibilities arising under this policy;

b) all students have access to information about how to apply for reasonable accommodations for mental health disabilities and acute mental health difficulties and about how to seek psychological support from campus providers;

c) structures and processes are developed to monitor and review this policy;

d) resourcing is available to implement this policy.

The Disability Service will:

a) assess applications for registration with the Disability Service on grounds of a mental health disability;
b) discuss options for reasonable accommodations with students who meet the criteria for a mental health disability and provide written confirmation of the student’s eligibility for reasonable accommodations;
c) where requested, offer advice and guidance to University staff on supporting students with mental health disabilities.

The Student Wellness Service will:

a) offer psychotherapeutic, social work, medical and psychiatric assessment and intervention to students with mental health difficulties where appropriate, in line with its limitations of operating as a primary health care facility and in accordance with its capacity and resources;
b) provide motivations for reasonable accommodations for students with mental health disabilities or acute mental health difficulties, where such motivations are deemed by the treating practitioner to be clinically warranted and where the student has provided consent for information to be disclosed.

Faculties will ensure that:

a) reasonable accommodations in teaching and learning are provided for students who are registered with the Disability Service for a mental health disability;
b) procedures for temporary reasonable accommodations for students with acute mental health difficulties are applied in the same way as procedures for students with acute physical health difficulties;
c) information about procedures for applying for reasonable accommodations on mental health grounds are made available to students.

Where faculties employ faculty-based mental health practitioners, these practitioners will:

a) offer mental health promotion initiatives in the faculty;
b) offer psychological assessment and limited counselling to students in accordance with capacity and resources;
c) facilitate referrals to the UCT Student Wellness Service and to other external services as needed;
d) offer staff consultation regarding how to support students appropriately.

Individual academic and administrative staff members are responsible for:

a) familiarising themselves with the University’s Student Mental Health Policy and complying with it;
b) handling written, electronic or verbal information which relates to a student’s mental health in a secure and confidential manner (see Section 6).

Individual students and prospective students should:
a) consider declaring an existing mental health disability (see Section 2 above) on their application form so that the University can prepare to offer the student reasonable accommodations;  
b) make an appointment with the Disability Service if they think they may meet the criteria for a mental health disability but have not indicated this on their application form;  
c) ensure that they have a clear idea of what will be expected of them in their course of study and, where possible, apply for reasonable accommodations prospectively (before due dates) rather than retrospectively (after due dates);  
d) contact campus support services (see Appendix 2) if experiencing mental health symptoms that are persistent and/or that interfere with academic or social functioning.

4. REASONABLE ACCOMMODATIONS ON MENTAL HEALTH GROUNDS

According to the United Nations Convention on the Rights of Persons with Disability, South Africa’s Employment Equity Act and the University of Cape Town’s Disability Policy, persons with mental health disabilities are entitled to reasonable accommodations. The University’s Student Mental Health Policy further recognises that students with acute mental health difficulties should be considered for temporary reasonable accommodations in the same way as students with acute health conditions.

4.1. Definition of reasonable accommodations

4.1.1 For the purposes of the Student Mental Health Policy, the phrase ‘reasonable accommodations’ refers to appropriate adjustments to teaching and learning activities to ensure that students with mental health disabilities or acute mental health difficulties are not placed at a substantial disadvantage compared to other students.

4.1.2 Reasonable accommodations do not mean that the student is exempt from meeting course or degree requirements; rather, reasonable accommodations should aim to remove barriers to completion of course or degree requirements due to a mental health disability or an acute mental health difficulty.

4.1.3 Reasonable accommodations are dependent on course administration requirements (such as faculty or university deadlines for finalising coursework) and should not place an unjustifiable hardship on departments.

4.1.4 Reasonable accommodations may vary across students, depending on their specific needs and on the specific nature of course requirements. Within the considerations of 4.1.3. above, reasonable accommodations by academic departments may include flexible assignment deadlines or the use of equivalent make-up assignments, adjustments to lecture and tutorial attendance requirements, the use of lecture recordings to facilitate access to missed lectures, adjustments to group work requirements, and allowing students to sit for deferred class tests. Accommodations offered at University level are described in 4.5. – 4.11. below.
4.2. Application to the university

4.2.1. The University’s application form contains a section that enquires whether the student has a disability. Psychological disability is one of the options that can be checked here. If students either know or suspect that they have a mental health disability (see definition in Section 2), they are encouraged to indicate ‘psychological disability’ on the application form. This alerts the University that the student may have support needs, such as for reasonable accommodations, which can then be assessed by the Disability Service.

4.2.2. This information will be treated confidentially and will in no way count against the student in their application to the University. The University aims to welcome a diverse student body and does not discriminate against persons with any disabilities in its application process.

4.3. Registration with the Disability Service

4.3.1. Students who indicate a mental health disability on their application form will be contacted by the Disability Service before the start of the academic year. They will be offered an appointment to discuss their accommodation needs and assist them with the process of verifying their disability status.

4.3.2. Students who did not indicate a mental health disability on their application form, but believe that they may have such a disability, can themselves make an appointment with the Disability Service.

4.3.3. When students apply for reasonable accommodations on the grounds of a mental health disability, they are required to submit supporting documentation from a registered mental health practitioner. The mental health practitioner will need the student’s signed consent to submit this information to Disability Services.

4.3.4. All information provided to Disability Services will be treated confidentially (see Section 6).

4.3.5. The Disability Service will make the final decision about whether the student qualifies for reasonable accommodations.

4.3.6. Students who qualify for reasonable accommodations on the grounds of a mental health disability will be provided with a signed letter to this effect from the Disability Service. A letter from the Disability Service confirming that a student is eligible for reasonable accommodations places a requirement on departments to provide reasonable accommodations to that student as needed.

4.3.7. The letter from the Disability Services may recommend a range of possible accommodations based on the student’s specific mental health needs, however the exact accommodations to be offered to the student should be decided by each department.
4.3.8. The student’s diagnosis, or any other personal information about the student, will not be disclosed in the letter from the Disability Service and students are not required to disclose such information to academic or administrative staff in order to access reasonable accommodations.

4.3.9. Students who are registered with the Disability Service for a mental health disability should seek advice from the Disability Service if they have not been able to obtain reasonable accommodations from academic departments.

4.3.10. The Disability Service may review the student’s need for reasonable accommodations annually, depending on the nature of the mental health condition and the availability of treatment.

4.3.11. The Disability Service will not assess applications for temporary reasonable accommodations based on acute mental health conditions.

4.4. Provision of temporary reasonable accommodations for acute mental health difficulties by academic departments

4.4.1. Students may apply to academic departments for temporary reasonable accommodations due to acute mental health difficulties following the same internal departmental procedures as for acute physical health conditions.

4.4.2. Where supporting documentation is required, students and staff should consult the guidelines in Appendix 1.

4.4.3. Students can appeal decisions about temporary reasonable accommodations for acute mental health difficulties using departmental or faculty appeal procedures.

4.5. Curriculum concessions

4.5.1. As per rule G31.1 in the University’s General Rules and Policies, Senate may, on the recommendation of the dean of the faculty after consultation with the head of the department concerned, permit a deviation from the rules governing the curriculum of a student. Students with diagnosed mental health conditions may benefit from a lighter curriculum load over a longer period of time, and may wish to motivate for a curriculum concession.

4.5.2. Students should consult with the designated faculty academic advisor in this regard.

4.6. Deferred exams

4.6.1. Students may apply for a deferred exam on mental health grounds.

4.6.2. Sufficient evidence must be provided to allow the Deferred Exams Committee to assess whether a deferment on mental health grounds is warranted, without unfairly prejudicing
other students who have to write the exams as scheduled. Therefore, as with deferment applications on medical grounds, a letter documenting diagnosis, duration and severity must be submitted by a registered mental health practitioner who has assessed and/or treated the student, with the students’ signed consent to release this information to the Deferred Exams Committee;

4.6.3. There should be evidence that an appointment with a mental health practitioner was sought by the student at least three weeks prior to the exam period. If a waiting list prevented the student from being seen at least three weeks prior to the exam period, proof of being placed on a waiting list should be submitted.

4.6.4. A deferment application on the grounds of a panic/anxiety attack will only be considered if the student has a documented history of suffering from panic/anxiety attacks.

4.6.5. All information submitted to the Deferred Exams Committee is treated in the strictest confidence (see Section 6).

4.6.6. The granting of permission for deferred exams is entirely at the discretion of Senate, irrespective of the grounds on which the application is made.

4.7. Exam accommodations

4.7.1. Students with a mental health disability or acute mental health difficulty may apply to the Disability Service for access to a secluded writing venue for exams.

4.7.2. This exam accommodation is not retroactive and will apply only to exams written subsequent to the accommodation being approved.

4.8. Leave of Absence from studies

4.8.1. The University recognises that there may be occasions when a student feels unable to study due to mental health difficulties. Withdrawing temporarily from the University may offer the best chance of making a full recovery, and students may therefore decide to take a Leave of Absence from their studies on mental health grounds.

4.8.2. As per rule G16.3. in the University’s General Rules and Policies handbook, Senate may grant Leave of Absence to a student for a specified period, usually to the end of the semester or end of year, for reasons including mental health difficulties. Please refer to the general rules for Leave of Absence in the above handbook, noting that Leave of Absence cannot be granted retrospectively and that application should be made prior to the last quarter (last three weeks) of the semester.

4.8.3. There may be circumstances in which academic or residence staff are concerned that a student’s mental health difficulty is causing serious disruption to others or posing a serious risk of harm to themselves or to others. If all reasonable attempts to support the student have been exhausted by University staff, and the student does not wish to take a
voluntary Leave of Absence, the student may be referred by a third party to the Fit for Study panel to be assessed for an involuntary Leave of Absence.

4.9. Returning from Leave of Absence

4.9.1. Leave of Absence for mental health reasons is granted on condition that the student’s capacity to resume studies should be assessed upon applying to return to the University. This is to ensure that optimal conditions for the student’s successful reintegration into the University have or can be established.

4.9.2. A Fit for Study panel including health and mental health practitioners employed by the University will review the student’s application to resume studies after Leave of Absence.

4.9.3. Students applying to return to the University after taking Leave of Absence on mental health grounds must include in their application a) a confidential report completed by a mental health practitioner who has assessed or treated the student during the Leave of Absence and who has the student’s consent to disclose this information, and b) a confidential form completed by the student. If the student has not had access to mental health services, they may submit a written self-motivation for re-admission. Only health and mental practitioners on the Fit for Study Panel will have access to these confidential documents.

4.9.4. The Fit for Study panel will consider the student’s support needs (including the need for academic accommodations, residence accommodations, and psychological or psychiatric support), offer recommendations for reducing barriers to reintegration and for enhancing academic progress, and facilitate the student’s access to these support mechanisms where possible.

4.9.5. The University has a custodial duty of care to protect the health and safety of all students. In cases where there is a substantial risk of harm to the student or to others resulting from the student’s mental health difficulty, and adequate supports cannot reasonably be established, the Fit for Study panel may choose not to grant permission for re-admission.

4.10. Re-admission appeals on mental health grounds for non-LOA students

4.10.1. Students who are denied permission to re-register in the subsequent year due to academic failure may appeal to be re-admitted through their faculty’s RAC (Readmissions Appeals Committee). Mental health difficulties are widely recognised by the RACs as a cause of poor academic performance, and can be grounds for a re-admission appeal.

4.10.2. There will be a Student Wellness Services practitioner on each RAC to assist with assessing these applications.

4.10.3. In cases where a mental health difficulty resulted in poor academic performance:
a) RACs would like to see evidence that the condition is being managed, and that the student is getting or has access to the necessary support to succeed academically if allowed back;
b) students who have been receiving mental health support are able to provide evidence from the health or mental health practitioner concerned;
c) students who have not had professional support are required to provide a first person narrative, describing how their studies were affected by their mental health condition but also how they plan to manage their studies if they are readmitted;
d) the RAC may recommend what support services the student should access (faculty or SWS based) if re-admission is granted and, where necessary, may liaise with the support service to expedite the first appointment.

4.11. Student residences

4.11.1. When applying to live in student residence, students can inform Student Housing Admissions & Advocacy Services (SHAAS) if they have special accommodation needs related to a mental health condition, or communicate this to the warden of their assigned residence.

4.11.2. Supporting documentation from a mental health practitioner may be required in order to be considered for reasonable accommodations in student residences. This documentation should explain the nature of the student’s accommodation needs, however the student’s diagnosis need not be disclosed unless the student gives consent for this. All information related to the student’s application for reasonable accommodation in residence on mental health grounds will be treated strictly confidentially by SHAAS or by the warden to whom the request is made.

4.11.3. Reasonable accommodations for mental health conditions will be offered within the available resources of University student residences.

5. DISCIPLINARY ISSUES

All students are bound by the University’s rules for student conduct as described in the Student Code in the UCT General Rules and Policies handbook. Where there is a breach of the Student Code, disciplinary procedures may be activated - see Disciplinary Jurisdiction and Procedures in the UCT General Rules and Policies handbook. If information becomes available to suggest that the student’s mental health may have been a contributory factor in their behaviour, careful consideration should be given to the way in which the incident or behaviour is treated. It may be that the student is not currently receiving any help and that their behaviour is beyond their own control. In such cases disciplinary procedures may not be appropriate and may be harmful to the student’s mental health. If disciplinary action is considered, the student should also be given the opportunity to raise issues around his or her support needs.
6. DISCLOSURE AND CONFIDENTIALITY

6.1. Confidentiality obligations of campus health and mental health practitioners

6.1.1. Information shared by students with a University health or mental health practitioner is confidential and may not normally be conveyed to others without the student’s signed consent.

6.1.2. University health or mental health practitioners may provide supporting documentation for students who are applying for any of the reasonable accommodations in Section 4 above, but only with the student’s signed consent and full awareness of what is being disclosed.

6.1.3. Confidentiality may only be breached without the student’s consent when:
- the life or safety of the student or someone else is seriously threatened due to the student's state of mind or the student's stated or implied intent;
- disclosure of information is required by the law.

6.1.4. Practitioners are bound by the ethical guidelines of their regulatory body regarding disclosure of information to third parties.

6.2. Confidentiality obligations of other University staff

6.2.1. All academic, administrative and tutoring staff are required to treat information about a student’s mental health in the strictest confidence.

6.2.2. All documents pertaining to student mental health (such as applications for reasonable accommodations, or emails from students to staff) must be stored in a secure manner.

6.2.3. If a staff member is approached by a student for advice regarding a mental health issue, the staff member should obtain emailed consent from the student for the onward disclosure of relevant mental health information to those with a clear need to know.

6.2.4. University staff may not disclose information about a specific student’s mental health on University websites or external social media sites.

6.2.5. Where a student with a mental health difficulty has disclosed an intention to harm themselves or someone else, the University must weigh confidentiality obligations against its legal duty of care to students and staff. If University employees such as academic staff, administrative staff, tutors or residence sub-wardens are concerned that a specific student poses a serious risk to themselves or others due to mental health difficulties, the student should be strongly encouraged to seek support urgently, and provided with information about how to seek support (see Appendix 2). Where the student refuses, or is unable, to seek support, the employee should confidentially inform their Head of Department and the Faculty Manager, or a Warden in the case of a residence student, who will then confidentially liaise with the Executive Director of
Student Affairs. Where there is an immediate psychiatric emergency, see Section 7 below.

6.3. **Student disclosure when applying for reasonable accommodations**

6.3.1. The University recognises that disclosure of a mental health difficulty is a personal choice of the student and students are not required to disclose their mental health status to the University. However, disclosure of mental health difficulties can be beneficial as it enables students to have access to the reasonable accommodations described in Section 4 above, in order to support the student’s academic progress.

6.3.3. As described in 4.3 above, students who wish to apply to register with the Disability Service on the basis of a mental health difficulty will need to discuss the nature of their mental health difficulty and its impact on their academic functioning with the clinical psychologist based at the Disability Service. They will also need to give their signed consent for a mental health practitioner who has assessed and/or treated them to submit a short confidential report to the Disability Service. These disclosures are necessary to assess the student’s eligibility for registration with the Disability Unit, and the specific accommodations that may be appropriate for them, as well as to advise students about other supports that may be available to them. These disclosures will be treated confidentially by the Disability Service and no information will be disclosed to others without the student’s written consent.

6.3.4. Students with an acute mental health difficulty who apply for temporary reasonable accommodations from academic departments may be required to submit a letter from a health or mental health practitioner confirming the need for temporary accommodations. See disclosure guidelines for this documentation in Appendix 1.

6.3.5. Students who apply for curriculum concessions (see Section 4.5), a deferred exam (see Section 4.6), a secluded exam venue (see Section 4.7), a return from Leave of Absence (Section 4.9) or re-admission to a faculty (see Section 4.10) on mental health grounds are usually required to submit a motivating letter from a mental health practitioner. The treating practitioner must obtain the student’s signed consent to submit this letter. This documentation is required in order for the University to make an informed and fair decision about the student’s eligibility to access these academic accommodations. The information in the application pertaining to the student’s mental health will be treated confidentially and will not be disclosed outside of the panel immediately responsible for each of these academic accommodations (the Deferred Exams Committee, the Fit for Study panel and the faculty RACs).

7. **PROCEDURES FOR DEALING WITH A STUDENT IN CRISIS**

There are established University procedures for psychiatric emergencies on campus - see Appendix 3.
8.  PROCEDURE FOR CHANNELLING AND MONITORING COMPLAINTS OF DISCRIMINATION ON GROUNDS OF A MENTAL HEALTH DISABILITY

As per the University’s Disability Policy, complaints regarding discrimination on the grounds of a mental health disability should be lodged with the Discrimination and Harassment Office. The Office will institute the standard procedure for investigating complaints of equivalent forms of discrimination as, for instance, on the grounds of race, gender or sexual orientation. The Relevant Office (RO) will seek advice from the Disability Service, except in cases where (a) the Disability Service itself is the subject of the grievance, in which case the RO will consult an independent recognised authority on disability discrimination; or (b) the Disability Service has agreed to represent the individual bringing the complaint.
APPENDIX 1
GUIDELINES FOR SUPPORTING DOCUMENTATION FOR TEMPORARY REASONABLE ACCOMMODATIONS DUE TO ACUTE MENTAL HEALTH DIFFICULTIES

As noted in Section 2 of the policy, some students may experience periods of acute psychological symptoms that temporarily affect their capacity to meet academic demands. As with acute health conditions, in such cases students may apply to departments for temporary academic accommodations. Where departments require supporting documentation for such applications, the following guidelines should be noted:

Who is qualified to provide supporting documentation?

- Documentation does not necessarily have to be provided by a mental health practitioner. Some students may not be able to access a mental health practitioner timeously due to financial constraints or long waiting lists, and may instead consult a medical health practitioner. Others may prefer to consult with a traditional health practitioner. Supporting documentation may be submitted by any of these practitioners.
- ‘Mental health practitioner’ refers to a psychologist, psychiatrist, registered psychological counselor, clinical social worker or mental health nurse registered with a South African regulatory council.
- ‘Medical health practitioner’ refers to a medical doctor registered with the Health Professions Council of South Africa.
- ‘Traditional health practitioner’ refers to practitioners in any category recognised by the Traditional Health Practitioners Act of 2007.
- The practitioner submitting the documentation may not be a family relative of the student.

What information should the documentation provide?

- Practitioners should provide their registration number and qualifications on the letter, except for traditional health practitioners who may not be registered with a regulatory body or have formal qualifications with an accredited educational body.
- The practitioner must date and sign the letter.
- The letter should state the date of the most recent consultation with the student.
- The letter should state that a reduced workload is recommended for the student and the period of time for which this is being requested.
- Details of the mental health difficulty, the circumstances that contributed to the development of the mental health difficulties, and details of the student’s history, should not be included as these are confidential and the student is not required to disclose this information.
- In cases where students have not been able to obtain an appointment with SWS or a government health clinic service due to a waiting list, departments may also consider accepting signed and dated documentation on an official letterhead confirming that the student sought an appointment and was placed on the waiting list.
APPENDIX 2
MENTAL HEALTH SUPPORT ON CAMPUS

There are a number of services offering mental health support to UCT students on campus:

1) Student Wellness Service (SWS)

SWS is a primary health care service that provides medical and psychological services to students between 08h30 to 16h30 on weekdays. All registered UCT students can access SWS services by appointment. The SWS health service has medical practitioners who can assess students’ mental health needs and offer medication where indicated. For students needing psychological support, SWS provides a confidential counselling service. SWS is neither mandated nor resourced to offer crisis services on other parts of campus - see the protocol for psychiatric emergencies in Appendix 3 for information on how to respond to a student with a mental health crisis.

SWS contact details:
28 Rhodes Ave, Mowbray (can be accessed on foot or with the Forest Hill Jammie Shuttle service).
Tel. 021 650 1017 / 1020
Website: https://www.uct.ac.za/students/health/wellness/counselling/overview/

2) SADAG UCT Student Careline

The SADAG UCT Student Careline offers free telephonic counselling, advice, referral facilities and general support to students facing any mental health challenges or contemplating suicide. The line is also available to offer support and advice to anyone who is concerned about a student who might be in distress. The line is able to advise and refer callers to both internal UCT resources and external (NGO, public and private) mental health resources.

The Careline can be called on 0800 24 25 26 free from a Telkom line or send an SMS to 31393 for a call-me-back. The line is open 24 hours a day, seven days a week. Students should make use of the SADAG UCT Student Careline if they are placed on a waiting list by reception at the Student Wellness Service and require emotional support while waiting for an appointment, or if they prefer to use a more anonymous counselling service. The SADAG website http://www.sadag.org/ contains useful information about mental health issues as well as details of their national helplines.

3) Faculty-based practitioners

Some, but not all, faculties have mental health practitioners located in the faculty. These practitioners aim to enhance student success by supporting students in a proactive developmental manner in ways that are suited to the respective faculties. Their role includes mental health promotion initiatives, mentoring programmes, psychological assessments, limited counseling that is free of charge, referrals to other sources of support, and staff consultation aimed at assisting staff to support students appropriately. Please see faculty websites or contact faculty administration for further details.
APPENDIX 3

PROCEDURE FOR STUDENT PSYCHIATRIC EMERGENCIES IN RESIDENCES OR ON CAMPUS AT UCT

Preamble:
A small number of students experience emotional or psychiatric breakdowns in residences or on campus every year. While the ideal is to identify students at risk before they reach this critical point, this is not always possible.

The Student Wellness Service (SWS) is a primary health care service which provides medical and psychological care from a clinic base at 28 Rhodes Avenue, Mowbray from 08:30 to 16:30 on weekdays. However SWS is neither mandated nor resourced to attend to medical/psychiatric emergencies that occur on other parts of our campuses.

The following procedure for dealing with specifically psychiatric emergencies (which falls under the broader university protocol dealing with medical emergencies) should therefore be followed by staff or students in such cases:

Procedure:
In situations where the warden, academic or PASS staff member, or fellow student identifies another student in crisis, for example: is losing touch with reality (psychosis), is expressing suicidal or homicidal intentions or thoughts, or appears to be a danger to themselves or others, then the following steps should be followed immediately in an attempt to minimise risk and contain the situation as soon as possible:

- Contact Campus Protection Services (CPS) at 021 650 2222/3 who will contact ER24.
- If CPS cannot be reached for any reason then contact ER24 directly at 084124. ER24 will transport the student to Groote Schuur Hospital (GSH) for a voluntary admission (i.e. the student agrees to be transported to the hospital for assessment and treatment).
- If, in your personal observation, the student is considered to be a danger to him/herself or others, but she/he refuses a health intervention, then CPS as well as SAPS (South African Police Services) should be contacted to effect an involuntary admission and transportation of the patient to GSH usually by SAPS.
  i) Mowbray Police Station - (021) 680 9580
  ii) Rondebosch Police Station - (021) 685 7345
- The ER 24 paramedic/s or SAPS representative/s will hand over the patient to the medical officer on duty in Casualty in GSH who will assess the student.
- While you wait for these service providers, you could contact the UCT Student Careline for guidance and support at 0800 24 25 26.

If the student is in a UCT Residence, then the personal details on the ‘White card’ in the residence office, should be sent with the student to the hospital.

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1 see http://www.uct.ac.za/students/health/campussafety/#health or http://www.uct.ac.za/services/properties/emergencies/medical/
**Follow-up information:**
The Warden or delegate facilitating the admission or referral to Groote Schuur Hospital should notify the emergency contact person specified on the student record. In the case of a legal minor, a parent or legal guardian should be informed.

Groote Schuur Hospital will refer the student to Student Wellness Services or the treating private professional upon discharge from the hospital to facilitate after care.

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<td>UCT Student Careline</td>
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*You can also sms 31393 for a call-me-back.*
APPENDIX 4:

LEGAL AND POLICY FRAMEWORK FOR THE UNIVERSITY’S STUDENT MENTAL HEALTH POLICY

The following Acts and Conventions have been consulted in developing the Student Mental Health Policy:

- National Health Act 2004 (http://www.chr.up.ac.za/undp/domestic/docs/legislation_55.pdf)

UCT has a number of other policies, codes and procedures that should be read in conjunction with this policy:

- UCT Student Equity Policy (https://www.uct.ac.za/downloads/uct.ac.za/about/policies/student_equity.pdf)

Mental health policies at other South African and international universities have also been consulted in the development of this policy to ensure that the policy is in line with current best practice recommendations for student mental health while also being appropriate to the specific needs of students at UCT.

*Draft policy prepared by Mental Health Task Team April 2017*