

Trinity College Dublin:  
**STUDENT MENTAL HEALTH  
POLICY AND GUIDELINES**





# CONTENTS

<b>1</b>	<b>INTRODUCTION</b>	<b>05</b>	<b>4</b>	<b>DEALING WITH STUDENTS EXPERIENCING MENTAL HEALTH DIFFICULTIES</b>	<b>13</b>
	1.1 Policy statement	05		4.1 Guidelines for staff	13
	1.2 Relationship to other College policies	05		4.2 Guidelines for students	15
	1.3 Scope of document	05		4.3 Confidentiality	15
<b>2</b>	<b>MENTAL HEALTH</b>	<b>07</b>		<b>APPENDICES</b>	
	2.1 What is mental health?	07		<b>Appendix A:</b> Common Mental Health Conditions in Young People	23
	2.2 Legislation relating to mental health	07		<b>Appendix B:</b> Support Services in College	27
<b>3</b>	<b>ACADEMIC AND ADMINISTRATIVE PROCEDURES</b>	<b>09</b>		<b>Appendix C:</b> General Advice and Guidance for Staff	31
	3.1 Admission	09		<b>Appendix D:</b> Some Practical Tips on Coping with Mental Health Emergencies	35
	3.2 Disclosure	09		<b>Appendix E:</b> New Mental Health Act 2001 - Involuntary Admission Procedure for Trinity College	37
	3.3 Fitness to Practise Issues	09			
	3.4 Disciplinary procedures	09			
	3.5 Going off-books, withdrawing and re-admission	10			
	3.6 Examination Arrangements	10			
	3.7 University Careers Service	10			

# 01

## INTRODUCTION

# INTRODUCTION

## 1.1 Policy statement

Trinity College Dublin 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 TCD student mental health policy:

- enables College to fulfil its caring, educational and legal responsibilities to students;
- heightens awareness and increases understanding across the college community about mental health issues;
- promotes informed and constructive attitudes to mental health issues;
- encourages a partnership approach, with shared responsibility, between College, its staff, the student body and individual students with respect to dealing with mental health issues;
- follows international best practice guidelines in the area of student mental health, including the provision of appropriate and timely support services for students;
- provides guidance and, where appropriate, promotes training to ensure College staff are aware of the emergency procedures, the support services available and know how to make appropriate referrals and interventions for students they encounter with mental health difficulties;
- facilitates communication and cooperation as appropriate between the relevant College departments and services on matters relating to mental health;
- respects the rights of each individual student and of the student body as a whole;
- defines the right to confidentiality within specified guidelines.

By articulating a written policy and providing guidelines on student mental health, College aims to promote student well-being, provide a safe and healthy work environment for all students and staff, ensure that appropriate intervention is taken where needed and encourage students with mental health difficulties to disclose them so that appropriate arrangements can be made to support them.

It is intended to review and update this policy on a regular basis.

## 1.2 Relationship to other College policies

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

- alcohol policy (<https://www.tcd.ie/media/tcd/about/policies/pdfs/CollegeAlcoholPolicy.pdf>);
- sexual harassment, racial discrimination and bullying policy (<https://www.tcd.ie/about/policies/hr-policies/>);
- disciplinary procedures: [www.tcd.ie/registrar/statutes/](http://www.tcd.ie/registrar/statutes/)

This policy and guidelines should also be read in conjunction with the College Calendar page H18 (Ill Conduct and College Regulations) ([www.tcd.ie/info/calendar](http://www.tcd.ie/info/calendar)); students applying to study or already studying in the Faculty of Health Sciences should take note of Calendar N3 §8.

## 1.3 Scope of document

Section 2 briefly outlines the meaning of the term 'mental health', and explains the distinction between mental health difficulties and mental illness. Relevant legislation is also listed. Section 3 covers College procedures concerning admissions, assessment, disciplinary matters and so forth, where these are relevant to students experiencing mental health problems. Section 4 aims to give guidance to members of College staff and students on how and where to seek help for students experiencing mental health problems. The important issue of confidentiality is also addressed in this section. This short document is supported by a number of appendices giving further information relating to Sections 2 to 4.

02

MENTAL HEALTH

# MENTAL HEALTH

## 2.1 What is mental health?

Mental health, mental health difficulties and mental illness lie on a continuous spectrum and are not distinct points.

### *Mental Health*

The term 'mental health' refers to how a person thinks, feels and acts when faced with life's situations. It describes a sense of well-being and it implies the capacity to live in a resourceful and fulfilling manner, having the resilience to deal with the challenges and obstacles that life and studying present.

### *Mental Health Difficulties*

Mental health difficulties are problems that affect a person's thoughts, body feelings, behaviour and ability to function. These may occur as a reaction to a painful event or external pressure. They may resolve of their own accord. A student experiencing mental health difficulties that interfere with his/her capacity to function, or which are persistent, may benefit from accessing a staff member attached to one of the College Support Services (Tutor, Counsellor, Chaplain or General Practitioner). If severe, mental health difficulties may signal the onset of mental illness.

### *Mental Illness*

Mental illness is the term used to refer to severe mental health difficulties. Mental illness includes conditions such as schizophrenia, bipolar disorder, depression, anxiety/panic disorders, obsessive compulsive disorders, eating disorders and attention-deficit / hyperactivity disorder (See Appendix A). Students who experience mental illness will require treatment and support from a health professional such as a Psychiatrist, Counsellor or General Practitioner.

Further information on common mental health illnesses affecting young people is contained in Appendix A

## 2.2 Legislation relating to mental health

There are several Acts relevant to mental health, including:

- Mental Health Act 2001
- Equal Status Act 2000 - 2004
- Disability Act 2005

Mental health legislation has little immediate relevance to the vast majority of individuals. College and its staff will always use their best endeavours in dealing with students with mental health difficulties or mental illness.

For further information on the Mental Health Act, 2001, see Appendix E.

**03**

**ACADEMIC AND  
ADMINISTRATIVE  
PROCEDURES**



# ACADEMIC AND ADMINISTRATIVE PROCEDURES

## 3.1 Admission

Irish and other EU students apply for admission to undergraduate courses in College via the Central Applications Office (CAO). Non-EU students apply to The International Office of College. Postgraduate applicants apply through the Graduate Studies Office.

Trinity has a supplementary application procedure in place for students from non-traditional learning backgrounds, including students with disabilities, from socio-economically disadvantaged backgrounds and mature students (age over 23). Further information is available from the Admissions Office [www.tcd.ie/Admissions/admissions\\_info/disability.html](http://www.tcd.ie/Admissions/admissions_info/disability.html)

The issue of re-admission to College of a student who is 'off-books' is referred to in Section 3.5.

## 3.2 Disclosure

Disclosure of a disability, including a mental health condition, is designed to enable College to prepare, in advance, the necessary supports that it may need to put in place to provide the student with full access to education. Duties under the Equal Status Act require the College to make reasonable accommodation for a person with a disability, provided that the cost is within the resources available.

If a student requires particular support or arrangements in College (for example, mental health support or examination support), it is important that the student contacts Disability Services well in advance of his/her application to discuss his/her needs. Applicants will then be in a better position to make an informed decision as to whether or not Trinity College can provide the support and environment they require.

## 3.3 Fitness to Practise Issues

Disclosure of mental health difficulties or mental illness will not adversely affect a person's application to College or legal rights in any way. However, certain physical and mental conditions may preclude the safe practice of a chosen profession. In particular, students intending to study in the faculty of Health Sciences and other professional courses should seek appropriate medical advice and advice from the head of School or the director of their chosen course before registration (Calendar N3, §8).

Students attending a course in Trinity College should:

- familiarise themselves with the course requirements;
- have the ability to cope with the demands and workloads of a third-level course as special arrangements and accommodations do not remove all difficulties;
- be aware of the demands of the course. They are advised to discuss the demands of each year of their course with the course director or other appropriate member of staff;
- not be a risk to themselves or to other students or staff.

Occasionally an issue may arise as to a student's ability or suitability to participate in a particular course. The college procedures for dealing with such issues are set out at H5, §19 of the Calendar.

## 3.4 Disciplinary procedures

All students are bound by the College disciplinary procedures as described in Schedule 2 of Chapter XII of the 1966 Consolidated Statutes of Trinity College Dublin as amended in 2006. If it becomes apparent during the procedures for major offences that the student may have a mental health difficulty, then Section 43 of Schedule II of the Statutes will apply, as follows:

*43: Cases of student mental ill-health should not normally be dealt with as matters of discipline under the foregoing provisions of this Schedule. Instead, in such cases, where a student constitutes a clear and reasonably imminent danger to himself or herself or to others, the Junior Dean may suspend such a student from the College; provided that:*

- (a) *the Junior Dean has first consulted with and obtained the agreement of the Director either of the College Health Service or of the Student Counselling Service;*
- (b) *the Junior Dean as soon as possible thereafter makes a full report on the matter to the Board; the student shall be given an opportunity to respond to that report; the Board shall decide whether to lift that suspension, and if so, upon what conditions;*

- (c) *if the suspension remains in place, the Board shall, until such time as it concludes that the matter has been satisfactorily resolved, from time to time consider the matter, afford the student the right to comment to it in advance of any such consideration, and decide whether to lift that suspension, and if so, upon what conditions; and*
- (d) *the Junior Dean, the Directors of the College Health and Student Counselling Services, and the Board, as the case may be, shall seek to act at all times in the best interests both of the student concerned and of every other member of College.*

### 3.5 Going off-books, withdrawing and re-admission

Students who are unable to continue their studies, or who need to interrupt them on health grounds (including mental health grounds), may be given permission by the Senior Lecturer to go 'off-books' or to withdraw from their course (see Calendar H12). Students should discuss their needs with their tutor and their medical advisor before seeking to go off-books. The tutor processes the application to the Senior Lecturer on behalf of the student, and supporting documentation from the health professional will also be required.

Students wishing to return to College after a period off-books on medical grounds need to apply for re-admission before they return (and by the 1st August in the case of JF students), using the re-admission form available from the Senior Lecturer's office. This re-admission form is a certificate of fitness completed by a medical referee who may be nominated by the Senior Lecturer.

Continuing care may, on occasion, be provided by the relevant Student Support Service whilst a student is 'off-books'.

Note: Students in good standing may choose to go off books for personal reasons rather than academic or medical reasons. In such cases, they do not need to apply for readmission or present a medical certificate of fitness. If there are mental health concerns, it would be

in the student's interest to encourage him or her to go off books on medical rather than personal grounds, as this procedure will ensure that the student's fitness to resume studies is assessed before s/he is permitted to return to College.

### 3.6 Examination arrangements

Alternative arrangements for examinations or assessments may be made for students with mental health difficulties that would affect their ability to undertake the examination or assessment as usually conducted. If the student is registered with the Disability Service, then the Service is responsible for making these arrangements in conjunction with the Examinations' Office. Details can be found on [www.tcd.ie/disability](http://www.tcd.ie/disability). In all other circumstances, students should approach their tutor (if the student is an undergraduate) or their supervisor or course director (if a postgraduate) to discuss special arrangements.

### 3.7 University Careers Service

Students who have experienced mental health difficulties, particularly where academic achievements have been adversely affected or have led to withdrawal, are advised to consult the Careers Advisory Service staff. Careers advisers have expertise in helping students to be realistic and to market themselves effectively, and in enabling them to decide on positive and constructive disclosure strategies.



# 04

## DEALING WITH STUDENTS EXPERIENCING MENTAL HEALTH DIFFICULTIES

# DEALING WITH STUDENTS EXPERIENCING MENTAL HEALTH DIFFICULTIES

The aim of this section is to provide College staff (Section 4.1) and students (Section 4.2) with information and advice on how to deal with students who are experiencing mental health difficulties and, in particular, on how and where to seek professional help. Issues surrounding confidentiality are discussed in Section 4.3.

## 4.1 Guidelines for staff

Guidance on how to respond to a student experiencing mental health difficulties is given in the flow diagram in Figure 1.

### 4.1.1 How urgent is the situation?

The first thing to try to establish is how urgent and serious the situation is:

- Is the student at risk of hurting her/himself or others?
- Is there a risk of suicide?
- Is the student out of touch with reality?
- Is the student behaving bizarrely?
- Is the student confused, drowsy or ill (possibility of overdose)?
- Has the student's behaviour, mood or personality suddenly changed (see Appendix D)?

If you are concerned about any of the above, please follow the *emergency guidelines* in Section 4.1.2 (daytime) or Section 4.1.3 (out of hours) below.

If the above questions do not apply, then you may be concerned about a student because of his or her:

- lack of interaction, isolation or withdrawal from staff or peers;
- difficulties with daily functioning (eating, sleeping, mood, physical activity, personal appearance);
- attendance problems;
- changed academic performance;

- missed deadlines;
- significant weight loss/gain.

Although these may be an indication of mental health difficulties sufficiently serious to require referral and support, there may not be an urgent crisis. In such cases, please follow *guidelines for referral and intervention* in Section 4.1.4.

### 4.1.2 Emergency guidelines (Daytime)

If you think there is potentially an emergency situation, as a staff member you must take immediate action on behalf of the College. Some guidelines on what to do and who to contact are given below - you should not try to deal with the emergency alone. If you are uncertain about what to do, consult with a member of the Student Counselling (01 896 1407) or the College Health Services' professional staff (01 896 1556). Outside of office hours, contact any of the following:

- the Junior Dean / Registrar of Chambers via ext. 1999;
- The Warden of Trinity Hall 487 1772
- the Chaplains (ext. 1260 & 1901) who may be available;
- another member of staff who may be able to support you

- a) Locate and talk to the student yourself or arrange for another member of staff to do so, e.g. a Tutor (the student's tutor's name is available on the Student Information System: ([www.tcd.ie/isservices](http://www.tcd.ie/isservices))), the Senior Tutor (01 896 2004/2551), the Head of School or the College Chaplains. (You should confirm subsequently that this person has in fact contacted the student)
- b) Clarify whether the student is already seeing a professional within College (counsellor, psychiatrist or GP):
  - **If yes** – contact this professional, explain your concerns and the level of the student's distress and arrange an urgent appointment.
  - **If no** – seek the student's consent to arrange an emergency appointment for them in the Health Centre (01 896 1556) or in the Counselling Service (01 896 1407). Emergency appointments are available in both services

on a daily basis. Contact either service and explain the seriousness of your concerns. Accompany the student to the Counselling Service (200 Pearse Street) or the Health Centre (House 47). See College maps: [www.tcd.ie/maps](http://www.tcd.ie/maps). (Note that physical force of any kind must not be used when accompanying a student to the Counselling Service or Health Centre).

- If the student is not prepared to attend the Health Service or the Counselling Service, explain to them gently that, as you have concerns for their welfare, or that of others, you will have to consult with the Counselling Service (ext. 1407) or Health Service (ext.1556) staff and/or talk to their family or next of kin. Give the student a choice as to who they would prefer you to contact in the first instance. For further advice and suggestions, see 'Tips for referring reluctant students' in Appendix C. However, it is a matter for the student to choose whether to accept a referral, and to avail of the supports offered. In exceptional circumstances, the College disciplinary procedures (see Section 3.4 of this document) and/or the provisions of the Mental Health Act 2001 regarding involuntary detentions may need to be implemented (see Appendix E).

c) Follow up your actions by:

- Liaising with the Service as to the outcome of the assessment.
- Arranging to see the student again if appropriate.

Some general advice on how to talk to, and cope with, students experiencing urgent (or acute) mental health difficulties is included in Appendix C.

#### 4.1.3 Emergency Guidelines (Out of hours)

It is again important to stress here that you should not deal with any emergency alone. You should for example contact:

- the Junior Dean / Registrar of Chambers via ext. 1999;
- The Warden of Trinity Hall 487 1772
- the Chaplains (ext. 1260 & 1901) who may be available;

- another member of staff who may be able to support you

If the student is distressed but there are no safety concerns, please:

- contact DUBDOC based in St James 's Hospital. Call ahead: 454 56 04 (6-10 pm weekdays, 10 am – 6 pm weekends and bank holidays). Outside of these hours, or if advised by DUBDOC, go directly to the Accident and Emergency (A & E) Department, St James Hospital, 01 4162774, 4162775 or 410 3000. If you and the other staff member are happy to do so, you may jointly accompany the student - it is not advisable to do so on your own. Otherwise, ask Security to call an ambulance;
- establish with the student if they wish you to contact their family/next of kin;
- inform the student's tutor, supervisor or course director of the situation at the first available opportunity.

If the student is aggressive or considered to be a risk to him or her self or others:

- seek assistance by contacting the College security staff (ext. 1999). They will contact emergency services (the ambulance and/or the Gardaí) to arrange transfer of the student to a place of safety. (If the student is unwilling to go to hospital or another place of safety, the College Security will ask the Gardaí to make an assessment of the situation, in the interest of safety of everybody involved). Take advice from the Gardaí as to whether it is appropriate to accompany the student;
- establish with the student if he or she wishes you to contact his or her family/next of kin;
- inform the student's tutor, supervisor or course director of the situation at the first available opportunity.

Other useful places to get help outside of College hours include: Samaritans (24 hours) 1850 609090 e-mail: [jo@samaritans.org](mailto:jo@samaritans.org) AWARE's Depression Line (10am–10pm) loCall 1890 303 302 Emergency services (fire brigade, Gardaí, ambulance): 999 or 112. Remember: if on campus, ring the College emergency number first: ext. 1999

#### 4.1.4 Guidelines for intervention and referral for non-urgent concerns

As with an emergency situation, if you are uncertain what to do you should consult with a member of the Student Counselling (01 896 1407) or the College Health Services' professional staff (01 896 1556). In this situation, you can consult without disclosing the student's name.

The normal steps would be:

- Arrange to talk to the student or for another member of staff known to the student (such as his or her Tutor - [www.tcd.ie/Senior\\_Tutor](http://www.tcd.ie/Senior_Tutor)) to do so.
- Explain your concerns to the student.
- If s/he agrees with your concerns, check if s/he is attending a professional source of help within College or outside:
  - If s/he is attending a professional, seek his or her permission to liaise with this person.
  - If s/he is not attending a professional, seek his or her permission to arrange an appointment for him or her with either the Student Counselling Service (ext. 1407) or the College Health Service (ext. 1556). Contact either Service and explain your concerns and make an appointment for the student.
- If appropriate, give the student handouts on College support and out of hours support (see Appendix B).
- Arrange a follow-up appointment with the student to keep the lines of communication open.
- If the student is reluctant to accept a referral, see tips for referring reluctant students in Appendix C.

#### 4.2 Guidelines for Students

Students concerned about the wellbeing of a friend should talk to a member of the college staff such as their own tutor or supervisor, their friend's tutor, a lecturer or a head of discipline or School, any of the Student Services staff (Chaplains [01 896 1260 & 1901], Counsellors [01 896 1407], or Doctors [01 896 1556]). Students may also choose to contact the Students' Union [normally the Welfare Officer – 01

646 8437] or the Graduate Students' Union [01 896 1169], who will then contact the appropriate Student Services staff. The Counselling Service provides an emergency slot daily at 3 pm that may be used on such occasions. The College Health Centre also offers emergency appointments, at 9.30am and 2pm.

It is important that students share and discuss their worries and concerns with a staff member (see above) and obtain appropriate professional advice – it is not advisable for students to take on too much responsibility for dealing with such concerns themselves. Liaison with the relevant professional services will also enable the student they are concerned about to get the necessary supports.

#### 4.3 Confidentiality

The purpose of this section is to inform students and staff of the principles guiding the flow of information about a student's mental health. Confidentiality is considered under the following subheadings:

- General principles regarding confidentiality
- Professional codes of ethics (Doctors, Counsellors, Chaplains, Disability Officers, Occupational Therapists)
- Basic principles on sharing information
- When consent is not given
- Case conferencing
- How to respond to general requests for information from third parties i.e. parents and external bodies
- Freedom of Information Acts.

##### 4.3.1 General principles regarding confidentiality

The important principles are:

- The University is committed to respecting the right to confidentiality of all students and all information disclosed by students relating to a person's mental health will be treated as confidential. Confidential information will only be disclosed with the person's consent. It will only be accessed and/or made available to others on a need-to-know basis for the purpose of the provision of, or access to, services, with the student's consent too.

- The principle that no confidential information will be passed on to third parties without the express permission of the student concerned applies unless (a) there is a serious concern that there may be a threat to the safety or life of the student or of others or (b) it involves the investigation of a crime or is otherwise required by operation of law.
- Information held by College complies with the requirements of the Data Protection Act and the Freedom of Information Act and relevant College policies.

In order to comply with the above principles, College staff must take all necessary precautions to ensure the safe-keeping and accuracy of all records containing personal information about students.

Where information is recorded or shared, the terminology used must be respectful of the student and should focus on his or her needs rather than on labelling.

#### 4.3.2 Professional codes of ethics

In addition to the above general College principles regarding confidentiality, Student Services staff (including doctors, counsellors, chaplains and disability officers) are bound by their respective professional codes of ethics. These codes are available on the services' websites as follows:

- Disability Service: [www.tcd.ie/disability/information/general/code\\_of\\_practice.php](http://www.tcd.ie/disability/information/general/code_of_practice.php)
- College Health Service: [www.tcd.ie/College\\_Health/healthservice/index.php](http://www.tcd.ie/College_Health/healthservice/index.php)
- Student Counselling: [www.tcd.ie/Student\\_Counselling/service\\_info.php](http://www.tcd.ie/Student_Counselling/service_info.php)

#### 4.3.3 Basic principles on sharing information

Information is shared with other services or third parties only with the student's consent (see exceptions above) and for a defined purpose, such as accessing additional supports and services for the student. Information is shared on a need-to-know basis; the level and nature of the information shared will vary according to who needs it and for what purpose.

In obtaining the student's consent for information to be shared, it is important that staff clarify what the purpose is, and who will be given particular information, so that students can give their informed consent.

#### 4.3.4 When consent is not given

Students are entitled to refuse consent and such a decision should be respected. In such cases, they should be made aware of the implications of their choice in terms of accessing supports. Students may review their decision at any stage during their time in College.

Once a person is over the age of sixteen, s/he may give an effective consent to surgical, medical or dental treatment and it is not necessary to obtain any consent from her/his parent or guardian.

In some very exceptional circumstances (risk to someone's life or criminal investigations), information may be given to the appropriate third parties without the student's consent. In such circumstances, members of staff should consult the Senior Tutor's Office (ext. 2551, 1095 & 2004), the Health Centre (ext. 1556), the Student Counselling Service (ext. 1407), their line manager or their Head of School. Where possible, staff should inform the student of their intended actions; however, protecting the student's safety or the safety of others takes precedence.

#### 4.3.5 Case Conferencing

When there are concerns for the safety of a student or of others, a Case Conference may be called for all staff involved (ie Senior Tutor/Dean of Graduate Studies, College Secretary, Heads of Health, Counselling and Disability, relevant academic staff, tutor, and relevant others) to identify the most appropriate way of assisting all concerned and ensuring their safety.

#### 4.3.6 How to respond to requests for information from third parties

The College does not disclose any information to third parties (including parents) unless explicit permission to do so has been given by the student or there is a serious concern that there may be a threat to the safety or life of the student or of others, or if it involves the investigation of a crime or is otherwise required by operation of law. Occasionally, staff may receive calls from worried and concerned parents, friends or landlords. While it is entirely appropriate to listen to their concerns and to act on them if there is an at-risk issue, it



is not generally appropriate to divulge any information. If unsure of what to do, staff should immediately consult the Senior Tutor's Office (896 2551/1095/2004), the Health Centre (896 1556), the Student Counselling Service (896 1407), their line manager or their Head of School. Out of hours advice may be sought from the Junior Dean / Registrar of Chambers via ext. 1999, the Warden of Trinity Hall 487 1772, or the Chaplains (ext. 1260 & 1901) who may be available.

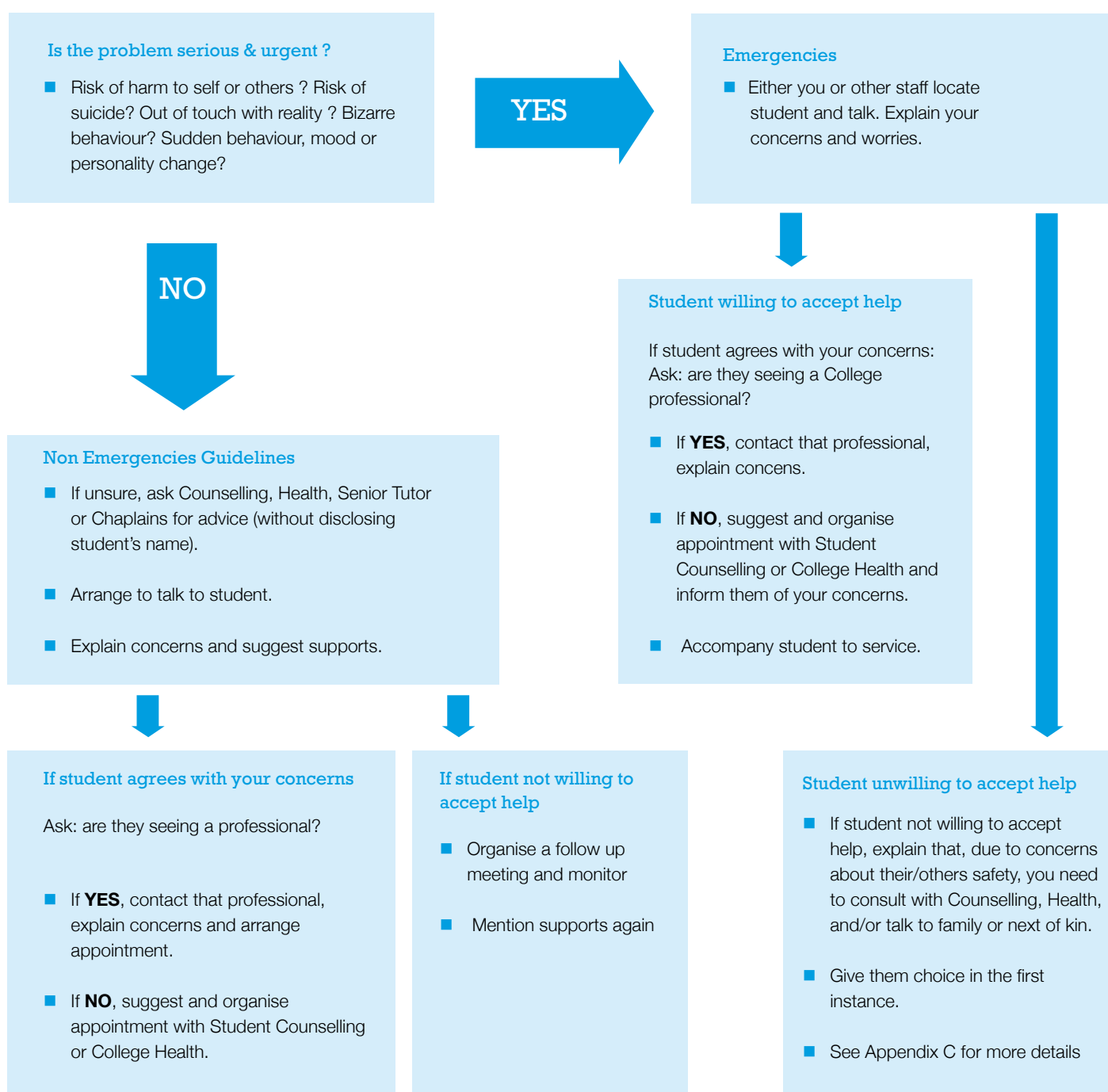
#### 4.3.7 Freedom of Information Acts

The College is a prescribed 'public body' subject to the terms of the Freedom of Information Acts, which provide: (a) a right for each person to access records held by public bodies; (b) a right for each person to have official information relating to himself or herself amended where it is incomplete, incorrect or misleading; (c) a right to obtain reasons for decisions affecting oneself made by a public body. There are also a number of exemptions from the right of access to information, such as the exemption applying to the personal information of other individuals.

Decisions on the exercise of one's rights under the FOI Acts are made by appointed decision-makers in the College, with provision for review by more senior College staff. In relation to a record of a medical or psychiatric nature relating to a requester, the FOI decision-maker is permitted to refuse access where disclosure to the requester might be prejudicial to his or her physical or mental health, well-being or emotional condition but in such a case the requester must be advised that, if he or she wishes, access will be offered to a relevant health professional specified by the requester.

It should be noted that College is not the final arbiter regarding access to information and requesters have the right to appeal to the Information Commissioner and to the Courts.

FIGURE 1: HOW TO RESPOND TO A STUDENT EXPERIENCING MENTAL HEALTH DIFFICULTIES





# APPENDICES



# Appendix A

COMMON MENTAL HEALTH  
ILLNESSES IN YOUNG PEOPLE

(The following resumé of diagnostic criteria is based on the *Diagnostic and Statistical Manual - DSM IV*)

### 1: DEPRESSION

Depression is a normal emotion that can affect a person at any stage of life. It can vary from short-lived feelings of sadness to severe depressive disorders that require medical treatment.

Major Depressive Disorder presents with a number of the following symptoms: low mood, loss of interest and pleasure in activities, weight loss, sleep difficulties, agitation, fatigue, feelings of worthlessness, diminished ability to think or concentrate and recurrent thoughts of death or suicidal ideation.

There are various subtypes of depression including:

- *Minor Depressive Disorder*: presents as a discrete episode of depressed mood lasting at least 2 weeks accompanied by some of the symptoms of Major Depressive Disorder.
- *Dysthymic Disorder*: a more long-standing condition characterised by subjective or observed low mood that lasts most of the day but not every day. It is accompanied by some of the symptoms of Major Depressive Disorder.

### 2: BIPOLAR MOOD DISORDER

The term Bipolar Disorder is sometimes referred to as Manic Depression. A person with Bipolar Disorder may experience extreme mood swings lasting days, weeks or months. These mood swings will vary between periods of high (mania or hypomania) and low (depression).

The term Mania applies to a distinct period of abnormally and persistently elevated, expansive, or irritable mood. In addition to the elevated mood, a sufferer may experience a significant degree of inflated self-esteem or grandiosity, decreased need for sleep, over-talkativeness, flight of ideas, distractibility, increased goal-directed activity and overspending.

*Dysphoric Elation*, a subtype of Mania, describes a combination of mania / hypomania occurring concurrently with symptoms of depression (See Section 1 above).

### 3: SCHIZOPHRENIA

Schizophrenia is a serious mental illness characterised by disturbances in a person's thoughts, perceptions, emotions and behaviour. The first onset of schizophrenia commonly occurs in adolescence or early adulthood. There are a number of signs and symptoms that are characteristic of schizophrenia. The expression of these symptoms varies greatly from one individual to another. No one symptom is common to all people, and not everyone who displays these symptoms has schizophrenia. Symptoms are divided into two groups:

- (a) *Active symptoms* (also referred to as 'positive' or psychotic symptoms) reflect new or unusual forms of thought and behaviour, e.g.
  - Delusions: false personal beliefs held with conviction in spite of what others believe and in spite of proof or evidence to the contrary.
  - Hallucinations: unusual or unexplained sensations, which are most commonly heard but can also be seen, touched, tasted or smelled.
  - Disorganised thinking and behaviour.
- (b) *Passive symptoms* (also referred to as 'negative' symptoms) reflect a loss of previous feelings and abilities, e.g. social withdrawal and loss of motivation, loss of feeling, poverty of speech and flat affect.

Cognitive impairments such as difficulty with attention, concentration and memory may also occur.

### 4: ANXIETY DISORDERS

Anxiety is a normal emotion. It is experienced by most people when faced with situations perceived as threatening. When anxiety becomes severe, pervasive or sustained, it is described as a disorder. The categories of Anxiety Disorders are:

- *Generalised Anxiety Disorder*: In this condition, a person experiences excessive worry which may be associated with restlessness, feeling 'keyed up' or 'on edge'; fatigue; concentration difficulties; irritability; muscle tension or sleep disturbance.

- *Panic Disorder*: describes the abrupt development of a discrete period of intense fear or discomfort in conjunction with uncomfortable symptoms such as: palpitations, sweating, trembling or shaking, sensations of shortness of breath, choking sensation, chest pain or discomfort, nausea, feeling of dizziness or unreality. Panic disorder may occur with or without agoraphobia. Agoraphobia describes anxiety about being in places or situations from which escape might be difficult.
- *Simple Phobia*: describes marked and persistent fear that is excessive or unreasonable, and prompted by the presence or anticipation of a specific object or situation e.g. flying, heights, etc. Exposure to the phobic stimulus provokes an immediate anxiety response. The phobic situation is avoided or endured with intense anxiety or distress.
- *Social Phobia (Social Anxiety Disorder)*: describes a marked and persistent fear of one or more social or performance situations where a person is exposed to (a) unfamiliar people or scrutiny and (b) fears that he/she will act in a way (or show anxiety symptoms) that will be humiliating.
- *Obsessive-Compulsive Disorder (OCD)*: this disorder is characterised by recurrent, unwanted thoughts, impulses or images (obsessions) and/or repetitive behaviours or mental acts (compulsions). The person recognizes that the obsessions and/or compulsions are excessive or unreasonable.

## 5: EATING DISORDERS

### (a) Anorexia Nervosa

This condition is manifest where a person is unable/unwilling to maintain body weight at or above a minimally normal weight for age and height. The following symptoms may be present: an intense fear of gaining weight or becoming fat; a disturbance in the perception of body weight or shape and a denial of the seriousness of the current low body weight. Two forms of Anorexia Nervosa are described:

- *Restricting Type*: where the person has not regularly engaged in binge-eating or purging behaviour;
- *Binge-Eating/Purging Type*: where the person has regularly engaged in binge-eating or purging behaviour.

### (b) Bulimia Nervosa

This is a disorder in which a person experiences recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following:

Eating in a discrete period of time an amount of food that is definitely larger than most people would eat during a similar period of time and under similar circumstances;  
a sense of lack of control over eating during the episode.

Recurrent inappropriate compensatory behaviour may occur to prevent weight gain, e.g. self-induced vomiting, misuse of laxatives, fasting or excessive exercise.

There are two types of Bulimia Nervosa:

- *Purging Type*: where the person has regularly engaged in self-induced vomiting or the misuse of laxatives, diuretics, or enemas.
- *Nonpurging Type*: where the person has used other inappropriate compensatory behaviours, e.g. fasting or excessive exercise, but has not regularly engaged in self-induced vomiting or the misuse of laxatives, diuretics, or enemas.

## 6: SUBSTANCE-RELATED DISORDERS

### (a) Substance Use Disorders

(i) *Substance Dependence*; describes a maladaptive pattern of substance use, leading to clinically significant impairment or distress involving:

- Tolerance: (i) a need for increased amounts of the substance to achieve intoxication or desired effect, (ii) diminished effect with continued use of the same amount of the substance.
- Withdrawal: (i) the characteristic withdrawal syndrome for the substance; (ii) the same substance is taken to relieve or avoid withdrawal symptoms.
- intake of larger amounts or over a longer period than was intended;



- persistent desire for or unsuccessful efforts to cut down on the substance;
- extraordinary efforts to obtain the substance.

(ii) *Substance Abuse*: A maladaptive pattern of substance use leading to clinically significant impairment or distress as manifested by at least one of the following:

- failure to fulfil major role obligations at work, school or home;
- use of substance in physically hazardous situations;
- recurrent substance-related legal problems.

#### (b) *Substance Induced Disorders*

The most common Substance Induced Disorders are:

- *Substance Intoxication*: the development of a reversible, substance-specific syndrome due to ingestion of a substance. In association, there are clinically significant maladaptive behavioural or psychological changes due to the effect of the substance on the central nervous system.
- *Substance Withdrawal*: the development of a substance-specific syndrome due to the cessation of substance use that has been heavy and prolonged. Clinically significant distress or impairment in functioning may occur, e.g. social or occupational.

## 7: ATTENTION DEFICIT AND HYPERACTIVITY DISORDER

This is a disorder of developmental impairment. AD/HD symptoms affect the brain's 'executive functions' which manage learning, perception, judgement etc. AD/HD may present with symptoms of either '*Inattention*' or '*Hyperactivity/Impulsivity*', or both. The following may occur with:

#### *Inattention*:

- Failure to give close attention to detail resulting in careless mistakes in schoolwork, work etc;
- Difficulty sustaining attention;

- Failure to listen when spoken to directly;
- Inability to follow through on instructions and failure in completing tasks;
- Difficulty organizing tasks and activities;
- Avoidance, dislike, or reluctance to engage in tasks that require sustained mental effort;
- Distraction by extraneous stimuli;
- Forgetful in daily activities.

#### *Hyperactivity*:

- Fidgeting;
- Difficulty remaining seated;
- Subjective or objective restlessness;
- Difficulty playing or engaging in leisure activities;
- Acts as if 'driven' or 'on the go';
- Excessive talking.

#### *Impulsivity*:

- Blurting out of answers before questions have been completed;
- Difficulty awaiting turn;
- Tendency towards interrupting.

Impairment of an Inattentive or Hyperactive/Impulsive type Disorder is (a) present from an early age and (b) in two or more life settings. There will be clear evidence of clinically significant impairment in social, academic or occupational functioning.

# Appendix B

STUDENT SUPPORT SERVICES  
IN COLLEGE

Details of student support services in College are given in this appendix. A diagram showing access paths for students to services is included below.

### Student Counselling Service

The Student Counselling Service (SCS) provides assessment for students with mental health difficulties. Following assessment and depending on the student's needs, the SCS provides counselling and, when necessary, arranges medical or psychiatric referral. The focus of the Service is short-term counselling and a maximum of 8 appointments per year per student. Exceptions can be made for students requiring additional support if this cannot be obtained elsewhere.

The SCS offers appointments to students within 2 weeks and also has a daily emergency appointment available, usually at 3 pm for those who need to be seen urgently. In cases of extreme urgency, staff are advised to contact the Counselling Service immediately.

Students can self-refer or be referred by a staff member. Referrals and liaison are undertaken with the student's consent. The SCS is bound by a professional code of ethics including confidentiality and duty of care.

The SCS provides web-based services to students including online advice, e-peer moderated discussion boards, and a range of information on mental health issues for students.

The service also participates in college activities aimed at promoting positive mental health on campus and amongst students.

Student Counselling may be contacted at: 200 Pearse Street, Phone: 896 1407. Further details are available on the website: [www.tcd.ie/student\\_counselling](http://www.tcd.ie/student_counselling)

### College Health Service

The College Health Service takes a holistic approach to student health: it provides on-campus, primary health care for all full-time students, and also focuses on the psychological and occupational aspects of student health and health education. It also offers psychiatric consultation on referral from a GP or a College Counsellor.

Absolute confidentiality is maintained. All medical records are retained in the Health Centre and do not form part of the University's student records. Information is only given to third parties with the patient's consent.

The Health Centre is open during normal office hours in and out of term- time. The hours of attendance for students are as follows: 10.30 am - 1.00 pm and 2.00 pm - 4.40 pm. Consultations are normally by prior appointment only.

Emergency appointments are available daily at 9:30 am and 2 pm and are accommodated through a system of nurse triage.

The College Health Centre may be contacted at House 47, telephone 896 1556. Further details are available on the website: [www.tcd.ie/college\\_health](http://www.tcd.ie/college_health).

### Disability Service

Students with mental health difficulties who have a confirmed diagnosis can register with the Disability Service and receive a number of specific supports that will enhance their participation in College. These include:

A needs assessment to ascertain support requirements, for example: additional time in examinations; academic support with coping in lectures and meeting deadlines; Assistive Technology supports (use of dictaphones in recording lectures is one example of a useful device); referral to Unilink – see below.

The Disability Service may be contacted at Room 2054, The Arts Building, Phone: 896 3111. Further details are available on the website: <http://www.tcd.ie/disability>

**Unilink** is a support service for students who may be experiencing mental issues, stress, health difficulties and other difficulties. It offers practical support with the day-to-day things that students do, such as managing studying, going to lectures, socialising, getting essays and project work done on time and doing exams. The service is offered in partnership with the discipline of Occupational Therapy and Disability Service in Trinity College. The service is accessed via referral from disability service, health service, counselling or the student's tutor. See [www.tcd.ie/disability/services/unilink.php](http://www.tcd.ie/disability/services/unilink.php).

### College Chaplains

College Chaplains can provide one-to-one support to students of all religious backgrounds who are in distress. They are able to offer possible interpretations of their struggles which are non-medical and non-diagnostic in nature, but are rooted in models of developing religious maturity and faith exploration.

College Chaplains also assist with student emergencies and can or may do home and/or hospital visits.

With the support of the Student Counselling Service, College Chaplains facilitate a Student Bereavement Support Group each year in Trinity Term.

The Chaplaincy may be contacted at House 27, 2nd and 3rd floors, 896 1260 & 1901. Further details are available on the website: <http://www.tcd.ie/chaplaincy>

#### **Tutorial Service and Senior Tutor's Office**

Tutors are often the first point of contact for students. They provide personal and academic advice and a 'safe place' to express concerns and worries. The relationship between tutor and tutee is confidential. Tutors are trained to know when to refer students to professional Health or Counselling Services and provide a crucial link between those Services and the academic departments. Through regular meetings with students, tutors can provide opportunities for follow-up and support.

The Senior Tutor's office provides advice to staff or students concerned about a student. Tutors should always be involved when care plans are being drafted for students with mental health difficulties.

The Senior Tutor's Office may be contacted at House 27, phone - 896 2551 / 1095 / 2004. Further details are available on the website: [www.tcd.ie/tutorial\\_service](http://www.tcd.ie/tutorial_service)

#### **Graduate Studies**

The Dean of Graduate Studies fulfils a role similar to that of the Senior Tutor for postgraduate students. Usually this involves dealing with the deferral of deadlines or with breakdown in the student/supervisor relationship.

The Graduate Studies Office may be contacted at Room 2020, The Arts Building, Phone - 896 2722 / 1166. Further details are available on the website: [www.tcd.ie/graduate\\_studies](http://www.tcd.ie/graduate_studies)

#### **Students' Union Welfare Officer**

The role of the Student Welfare Officer is to liaise with College and external support groups or services in the event of a student requiring non-academic assistance. The officer promotes mental health and well-being through campaigns throughout the year at a grass-roots level among students. The Student Welfare Officer offers recommendations and advice, but acts only with the full permission of any student in question, unless somebody is at risk. In the event of a crisis situation, the SU Welfare Officer allows the student to explain the situation in his or her own words, and will subsequently request the student's permission to investigate the best course of action for them with Support Services within the college or an external expert.

The SU Welfare Officer may be contacted at House 6, Phone: 01 646 8439. Further details are available on the website: [www.tcdsu.org](http://www.tcdsu.org)

#### **Graduate Students Union**

The Graduate Students' Union is the representative body for the graduate students of Trinity College. For students seeking advice, the GSU may be contacted at House 6, Phone: 01 896 1169. Further details are available on the website: [www.gsu.tcd.ie](http://www.gsu.tcd.ie)

#### **Security and Attendant Services**

Security Officers provide a 24-hour presence on campus. Their principal tasks, as they relate to the student population, include responding to emergencies. The attendant staff work in designated buildings both on and off campus during building opening hours. They also respond to emergencies. In Goldsmith Hall, the attendant staff are present on a 24-hour basis.

The security and attendant staff, by virtue of their 24-hour presence on campus and their role in responding to emergencies, are quite likely to be 'first on the scene' in situations where a student with mental health difficulties seeks assistance, or where assistance is sought on behalf of such a student by a staff member or friend. In such circumstances, the security and attendant staff will generally confine their intervention to calling for medical and/or counselling assistance and/or the Junior Dean and to ensure the safety of all members of the College community and visitors to campus.

The Security Service may be contacted at Front Gate, Phone: 896 1317, or College emergency number: 01 896 1999. Further details are available on the website: [www.tcd.ie/Buildings/security.php](http://www.tcd.ie/Buildings/security.php)

### **Junior Dean and Registrar of Chambers and assistants**

The Junior Dean is responsible for enquiring into alleged breaches of discipline by a student and for taking further action in accordance with College regulations and statutes.

The Registrar of Chambers, acting on behalf of the Provost, allocates residential accommodation on campus and provides communication regarding matters of pastoral care, discipline and inter-resident relations.

The Registrar of Chambers may be contacted at West Chapel, Phone - 896 1327

The Junior Dean may be contacted at East Theatre, Phone – 896 2770. Further details are available on the website: [www.tcd.ie/Junior\\_Dean/](http://www.tcd.ie/Junior_Dean/)

### **Warden of Trinity Hall**

At Trinity Hall, the Warden is responsible for the allocation of rooms as well as student disciplinary issues. The Warden and Assistant Wardens also hold a pastoral care role and seek to foster and maintain a sense of community. Many of the aspects of life at Trinity Hall are described more fully in the pages of the website: [www.wardentrinityhall.tcdlife.ie/index.php](http://www.wardentrinityhall.tcdlife.ie/index.php)

### **Careers Advisory Service**

The full range of services is available at [www.tcd.ie/careers](http://www.tcd.ie/careers). The Careers Service can provide confidential advice to students on issues such as disclosure to potential employers and work-experience/ placements options during a period off-books.

The Careers Advisory Service may be contacted at East Chapel. Phone: 896 2554.

# Appendix C

GENERAL ADVICE AND  
GUIDANCE FOR STAFF

- Promise support but not 'secrecy', as you will have to consult with and inform others if you have concerns for a student's safety or the safety of others.
- Note: when alerting the Tutor, Supervisor or Head of School (HoS) that you have concerns about a student's safety, all you need to say is that you are concerned about the student's safety or that of others. You do not need to inform them of the details of the student's story if the student has requested that some of the details are kept confidential i.e. abuse. What is important is that staff are informed of what they need to know so as to discharge their responsibilities and duty of care.
- Do not take on a student's problem when it is outside your own level of competence and requires professional support. Your role is to support appropriately and to refer to professional services. If this is not possible, your role is to inform appropriate personnel i.e. HoS and/or Tutor or Supervisor of your concerns if you have concerns about the student's safety or someone else's.
- If a student has refused to avail of any of the professional supports, do not be tempted to act beyond your expertise. Boundaries are important for your own well-being and the student's. Your role is to support and refer, not to diagnose or treat.
- Do not undervalue the support you are offering by just listening and being available.
- Do not be afraid to ask a student if s/he is so low that s/he has contemplated ending his or her life. You cannot put the idea of suicide into someone's head.
- Get support for yourself
  - Senior Tutor's Office (ext. 2551/1095/2004)
  - Student Counselling Service (ext 1407)
  - Chaplaincy (1260/1901)
- Employee Assistance Programme: see Staff Office website: [www.tcd.ie/Staff\\_Office/](http://www.tcd.ie/Staff_Office/)
- College Health Centre (ext 1556)

#### ADDITIONAL TIPS ON REFERRING RELUCTANT STUDENTS

- When you believe that a student might benefit from professional help, it is best to be honest about your reasons and express your concern about his or her well-being. Sometimes students may be reluctant or shy in accepting a referral, so here are some suggestions.
- Second opinion needed: Present the referral as a help to you. Explain that the student's problem is outside of your area of expertise and that you require a second opinion.
- Dispel myths about seeking help from professionals: Dispel myths that surround seeking help, as this age group dislikes being anything but self-reliant. Encourage the student to schedule 'just one' appointment with a professional. Suggest that to get help is a positive sign of personal strength.
- Suggest all options: Some students may not feel comfortable about seeing a counsellor, but will agree to visit a G.P. Others may choose to talk with a chaplain or contact a local support group. Therefore, it is very helpful and often enlightening to present all of the student's options when discussing support services.
- Explore the student's reluctance: If the student is reluctant to seek help, ask why s/he is not keen on seeing a professional. Possibly it relates to a previous negative experience. Or maybe there is a misconception that, if s/he sees a psychiatrist or counsellor in College, the information will be passed on to his or her lecturers and family. If you explore the reluctance, you may be able to resolve the concerns.

- Get out the telephone book: If he or she is unsure about seeking help, it may be useful to provide the student with names and contact numbers that can be used at a later date. Ask if the student would like you to arrange an appointment for him or her with a professional. This is especially helpful if s/he is depressed and lacks the energy to negotiate details. If you arrange the appointment, inform the professional of your specific concerns regarding the student. You can also give students a print-out of Appendix B: Student Support Services in College or refer them to their Trinity College Academic Diary which contains a description of student supports.
- Honesty about involving others: If you feel the situation is an emergency (you believe there is the possibility of harm to the student or others) and the student will not see a professional, you may need to speak to someone on his or her behalf. If possible, before doing so, gently explain that you will need to speak with a professional and/or the student's family. Give the student the choice about whom you will contact.
- What if the student still refuses? A student has the right to refuse support. S/he may just need time to think about a referral. Make a follow-up appointment with the student or offer an open invitation to come back to you. When you see the student again, ask how s/he is and reiterate that support is available if s/he wants it. However, refusal to seek professional help does not mean that you must provide help that is outside your area of expertise. It is a matter for the student to choose whether to accept a referral, and to avail of the supports offered. In emergency situations, the College disciplinary procedures (see Section 3.4 of this document) and/or the provisions of the Mental Health Act 2001 regarding involuntary detentions may need to be implemented (see Appendix E).

Source: Based on *The Mental Health Initiative (2003)*





# Appendix D

SOME TIPS ON COPING WITH  
MENTAL HEALTH EMERGENCIES

SITUATION	MANAGEMENT
<p><b>Self-Harm (e.g. cutting)</b></p> <ul style="list-style-type: none"> <li>■ Acute distress</li> <li>■ Cry for help</li> </ul>	<ul style="list-style-type: none"> <li>■ Do not criticise or judge</li> <li>■ Ask if wants to talk</li> <li>■ Call for medical help if necessary (heavy bleeding). Not always an emergency but</li> <li>■ Refer to Counselling (ext. 1407) or Health Centre (ext. 1556)</li> </ul>
<p><b>Suicide Attempt (e.g. overdose)</b></p> <ul style="list-style-type: none"> <li>■ May have a previous history</li> </ul>	<ul style="list-style-type: none"> <li>■ Call security (ext. 1999) and ask for ambulance</li> <li>■ Ring Health Centre (ext. 1556) for advice while waiting</li> <li>■ Keep pills, bottles to show ambulance crew and ask student what has been taken</li> <li>■ Ask if student wants family or friends contacted</li> </ul>
<p><b>Suicide Ideation</b></p> <ul style="list-style-type: none"> <li>■ Ask student if they have made any specific plans</li> </ul>	<ul style="list-style-type: none"> <li>■ Refer to Counselling (ext. 1407) or Health (ext. 1556) and accompany the student to the service. If you can't do this, ask another member of staff to do so</li> </ul>
<p><b>Panic</b></p> <ul style="list-style-type: none"> <li>■ Incapacity to act</li> <li>■ Intense apprehension/fear</li> <li>■ Oral breathing, gasping</li> <li>■ Feeling dizzy</li> </ul>	<ul style="list-style-type: none"> <li>■ Firm reassurance</li> <li>■ Breathe from cupped hands or paper bag</li> <li>■ Breathe in to count of 4 and out to count of 8</li> <li>■ Refer/Accompany to Health or Counselling</li> </ul>
<p><b>Confusion</b></p> <ul style="list-style-type: none"> <li>■ Muddled, restless, irritable</li> <li>■ May not co-operate</li> <li>■ May be disorientated and fearful</li> <li>■ May experience hallucinations</li> <li>■ May not be in touch with reality</li> </ul>	<ul style="list-style-type: none"> <li>■ Speak simply and clearly</li> <li>■ Have adequate lighting</li> <li>■ Constantly reassure in friendly manner</li> <li>■ Call Health Centre (ext. 1556) or Counselling Service (ext. 1407)</li> </ul>
<p><b>Drowsiness</b></p> <ul style="list-style-type: none"> <li>■ Complete slowing down of mental/physical function</li> <li>■ No spontaneity</li> <li>■ Not able to interact</li> <li>■ May be a sign of over-dose, alcohol or drug use</li> </ul>	<ul style="list-style-type: none"> <li>■ Ascertain if the student has taken any substances</li> <li>■ Do not leave student unattended</li> <li>■ Student may hear what is being said, so reassure</li> <li>■ Call Health Centre (ext 1556)</li> <li>■ Call Security (ext. 1999) and ask for ambulance</li> </ul>
<p><b>Memory Loss</b></p> <ul style="list-style-type: none"> <li>■ May be due to illness</li> <li>■ If sudden, likely to be shock</li> </ul>	<ul style="list-style-type: none"> <li>■ Speak simply &amp; clearly</li> <li>■ Reassure student</li> <li>■ Call or take to Health Centre (01 896 1556)</li> </ul>

The above guidance has been adapted from the *Code of Practice on Supporting Students with Mental Health Problems*, Westminster University (2001) and the *Mental Health Code of Practice*, Loughborough University (2002).

# Appendix E

MENTAL HEALTH ACT 2001:  
INVOLUNTARY ADMISSION PROCEDURE  
FOR TRINITY COLLEGE

Included in the matters addressed in the new Mental Health Act 2001 is the involuntary detention of persons to psychiatric centres. In cases of severe mental illness, a person may be admitted to a psychiatric hospital (an “approved centre” within the meaning of the Act) either on a voluntary or involuntary basis. The majority of people who are so admitted, do so by choice, and are therefore voluntary patients. However, in some cases, a person may be admitted for mental health treatment on an involuntary basis. The Act sets out regulations for the involuntary detention of persons to psychiatric hospitals.

Before a person may be involuntarily detained, the Mental Health Act 2001 requires that:

- (S)He is suffering from a “mental disorder” within the meaning of the Act. For all practical purposes, that means “mental illness” as defined in the College Mental Health Policy and Guidelines;
- In addition, one of the following two conditions must also be met, as set out in section 3(1) of the Act, as follows:
  - a. because of the illness, there is a serious likelihood of the person concerned causing immediate and serious harm to himself or herself or to other persons; or
  - b. because of the severity of the illness the judgement of the person concerned is so impaired that failure to admit the person to an approved centre would be likely to lead to a serious deterioration in his or her condition or would prevent the administration of appropriate treatment that could be given only by such admission, and the reception, detention and treatment of the person concerned in an approved centre would be likely to benefit or alleviate the condition of that person to a material extent.

Where a student of the College develops a mental disorder (as defined in Section 3 of the Mental Health Act 2001), he/she will be encouraged to accept treatment in a Psychiatric Unit/Hospital (an ‘approved centre’). The College’s professional staff involved with the student will facilitate a voluntary admission for such treatment. Where a student of the College develops a mental disorder (as defined in Section 3 of the Mental Health Act 2001) and where the student is deemed by a Registered Medical Practitioner (GP) to require treatment for this disorder but is unwilling to accept voluntary hospitalisation, the procedures of the Mental Health Act 2001 will be followed:

- Step 1: An application will be made on one of the statutory forms 1 or 4 (available from the College Health Centre). The application will be made either by a spouse / relative or by one of the following designated College Officers: Senior Tutor, Dean of Postgraduate Studies, Registrar of Chambers or Warden of Trinity Hall or their deputies.
- Step 2: A Registered Medical Practitioner (GP) will assess the person within 24 hours of the receipt of the application.
- Step 3: If the GP makes a recommendation that the person should be admitted to a Psychiatric Unit/Hospital under the Mental Health Act, 2001, arrangements will be made to transfer the person to an appropriate hospital.

Note: it is not lawful to detain a person as an involuntary patient in an approved centre solely because that person is: a) suffering from a personality disorder, b) socially deviant or c) addicted to drugs or intoxicants. Further information is at <http://mhc.thelearningcentre.ie/>, and at [www.mhcirl.ie/refmaterial.htm](http://www.mhcirl.ie/refmaterial.htm).





Trinity College Dublin, College Green, Dublin 1.

[https://www.tcd.ie/media/tcd/about/policies/pdfs/policy\\_mentalhealth.pdf](https://www.tcd.ie/media/tcd/about/policies/pdfs/policy_mentalhealth.pdf)