

Department of Veterinary Medicine

Wellbeing and Mental Health Oversight Group

Notes from meeting: 5th April 2023, 1.00pm Hammond Seminar Room

1. Present:

Sarah Voss, Julian Parkhill, Katie McCallum, Bethany Guy, Sharon Chandler, Nick Bexfield, Jane Dobson, Dan Tucker (Chair). Anna Hollis in attendance.

2. Apologies:

Julie Ingham, Katheryn Ayres.

3. Conflicts of interest: None declared.

4. Matters arising from previous meeting (not addressed elsewhere in the agenda): These were captured in the main business.

5. Main business:

5.1. Update on provision of mental health and wellbeing support for clinical training scholars

Nick Bexfield reported that a formal arrangement is now in place whereby Clinical Scholars are able to freely access the University Staff Counselling Service. The service is confidential and costs are covered in full by the Hospital. The service has been communicated to all Clinical Scholars. The group welcomed this development.

5.2. Wellbeing advocacy roles for staff (including staff buddying schemes, training needs to maximise early signposting and support).

At the previous meeting it was agreed that the Oversight Group should explore staff wellbeing support and signposting across the 2 HR divisions (Departmental staff / Clinical Services staff).

- **Departmental provision:** Julie Ingham (HR lead for the Dept.) is the Departmental Wellbeing Advocate and a trained Mental Health First Aider (MHFA); she also coordinates a popular buddying scheme for new employees. The system works well although new volunteer buddies are always welcome.
- **Hospital / Clinical Services:** Nicola Bull (HR lead for the Hospital) is a trained MHFA but the Group was not sure if she is also the University designated Wellbeing Advocate for the Hospital. Group members who work in the Hospital were not aware of an active buddying scheme for new employees. Sarah Voss (Equine Division) is MHFA trained and offers (and provides) ad hoc advice and signposting mainly through her RCVS GDP supervisor role. There is scope to better define and communicate pathways for staff wellbeing support and signposting in the Hospital, including identification of a Wellbeing Advocate within HR, a buddying scheme, and the final publication of a draft guidance booklet that exists in draft form.

Recommendation: NB and JD will raise the issue of staff wellbeing advocacy and signposting at the next Clinical Services Advisory Group meeting, with the goal of making this more accessible.

- Mental Health First Aiders for staff: There is no available list of MHFAs for staff but only a few are believed to exist. Effort should be made to determine the number and distribution of MHFAs. Subject to the outcome of this exercise there could be scope to enhance the availability, training and visibility of trained MHFAs in both the Department and Hospital.

Recommendation: DT will survey the Vet School staff to determine number and location of current MHFAs. Also, explore availability/cost of MHFA training through University and or RCVS MMI.

5.3. Final year student end-of-rotation feedback – support for students and pathway for staff to flag concerns.

Some cases of bad reactions among students to negative feedback from final year rotations were outlined. These highlighted the value of (a) a review of the procedure for support of students receiving negative feedback, and (b) a review of existing preventive approaches such as preparatory resilience training and preparing students for negative (constructive) feedback.

- (a) Procedure for delivering final year rotation feedback, and support / signposting where needed: The Group recommended that this was best addressed between the Tutorial Office (Mark Phillips / Alun Williams) and final year rotation leaders – ensuring that negative feedback was presented in a way that objectively identified practical steps required to achieve a pass. Also, to ensure timely wellbeing signposting and support (the VSCS being the most likely available provider); and a means for VSCS to be advised as early as possible of emerging concerns especially where issues arise in multiple rotations.

Recommendation: DT to ask Tutorial Office (Mark P) to review rotation feedback system with rotation leads.

- (b) Resilience training for students: The group recommended that the Tutorial Office might review existing provision of wellbeing / self-preservation / resilience training to students during the 4th year induction week and final year induction week. RCVS MMI may be able to assist.

Recommendation: DT to ask Tutorial Office to review wellbeing/resilience training opportunities in student induction weeks.

The group also discussed the issue of VSCSs and their increasing role in student pastoral support. Although student pastoral support sits clearly with Colleges and not historically with VSCSs, VSCSs are increasingly put in wellbeing/MH situations because of the stronger and more frequent connection between student and VSCS versus their College Tutor. The particular vulnerabilities of the profession were also noted as important context. Appropriate preparation is therefore needed. DT had provided Anna Hollis (VSCS Coordinator) with a draft Welfare Assessment Tool supplied by the University Mental Health Advice Service for review and possible discussion and uptake with VSCSs – originally intended for College Tutors. The group also recommended that VSCSs should be supported in obtaining MHFA training through the University or other providers (some felt this should be a requirement),

and also with listening skills training. It would be important to update Colleges via the Senior Tutors' Committee once tangible plans were in place.

Recommendation: AH (and DT if needed) to explore wellbeing supporter training opportunities for VSCSs ahead of next academic year.

5.4. Identification of other arising concerns arising / gaps / or issues with uptake of support

No matters raised.

6. Oversight group initiatives:

6.1. Webpage

Information on Vet School MHFAs should be included once this is available.

6.2. Feedback on the annual Departmental W+MHOG event, Feb 2023.

Although generally positive, valuable feedback had been received including: aiming for a shorter talk to enable more time for mixing and discussion afterwards, and better prior communication over content of the talk. Our speaker focused on self-reflection, personal experience while one attendee had expected a talk that focused on a 'tool-kit' for resilience. Group agreed to take feedback into account for future events.

6.3. Upcoming events to bring to attention of Dept members

April : [Stress Awareness Month](#)
15 – 21 May : [Mental Health Awareness Week](#)
12 – 16 June : [Healthy Eating Week](#)
12 – 18 June : [Men's Health Week](#)
10 September : [World Suicide Prevention Day](#)
10 October : [World Mental Health Day](#)
2 – 6 October : [National Work Life Week](#)
18 October : [World Menopause Day](#)
Movember : [Men's Health Awareness Month](#)
2 November : [National Stress Awareness Day](#)
13 November : [World Kindness Day](#)

7. Any other business

- Senior Clinical Training Scholar stipends: BG relayed concerns over cost of living pressures among SCTSs. NB explained that these are currently pegged to the stipend for BBSRC Doctoral Training Programme students with a veterinary degree, but this would be discussed by Hospital management – there were other benchmarks for example SPVS new graduate means, University salary points, and other vet school approaches (all noting the unique tax position of the SCTS category). Currently SCTS receive additional support for CPD and also towards costs of examinations.
- SCTS out of hours call triage: BG will discuss in more detail with NB and then if appropriate NB will raise this at a Clinical Services Advisory Group meeting.

Notes prepared by DT