

TAFE QUEENSLAND

Managing complex and challenging mental health situations



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MAKE
GREAT
HAPPEN



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Concerning behaviour:
enquiry, start of study and
in conversation with the
student

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The context of tertiary training and study

Across the tertiary sector there are many students who will experience mental ill health at some time during their studies.

In the vast majority of cases, despite the personal impacts, students can receive treatment and support that enables them to maintain their studies (e.g. GP, MH practitioner, treatment plan, medication, counselling, etc). Some may require reasonable adjustment/s in their course.

However, the context of today's session focuses on the small number of instances where a student's ill health is so disruptive to their thinking, thoughts and/or behaviours that they are unable to engage and participate in their chosen program.





”

“a state of wellbeing in which the individual realises his or her own abilities, *can cope with the normal stresses of life, can work productively and fruitfully*, and is able to make a contribution to his or her community.”

World Health Organisation 2007

TAFE QUEENSLAND BRISBANE – Managing complex and challenging mental ill health situations

What do we mean by Mental Health?

The focus here is on *‘ability to cope with the normal stresses and be productive (in VET training and/or Higher Education)*

What do you typically see?

- anxiety, depression, bi-polar
- personality disorder, schizophrenia, PTSD

What do we mean – challenging behaviour?

- Beyond or outside the 'norms' of mental ill health that is commonly seen in the student population

Despite reasonable adjustment/s and inclusive teaching there is an inability to conform...

...to expected behaviour, participation and engagement that is required to be successful in the program



Observations – enquiry / enrolment stage

Repeated phone, email and/or admin counter / contact centre enquiries / demands

Multiple enrolments / meeting requests

Repeated enrolment & withdraw

A history of enrolment with very little attendance/ completion

Can often be contradictory in requests

Submits an application in the morning and phones several times that day to know if the application has been accepted



Observations - during study

Attends sporadically but doesn't participate

Disruptive in-class behaviour or behaviour that becomes a 'performance'

Little awareness as to the impacts of their behaviour

Minimal attendance but numerous emails

Lengthy late night emails (demanding / aggressive / fixated on a historical issue)

Demanding behaviour – *why won't you help me or re-visit content (challenges to your integrity)*

Lack of reasoning or ability to engage in rational discussion

Intense or heightened emotions

Impulsive and appear to lead chaotic lives

Rigid / inflexible

Observations - informal / formal intervention

Little insight or recognition of the concerns being raised

Denial of any issues or concerns, e.g. you haven't attended any of the classes – *yes I have*

Dismissive of the teachers concerns – *that was dealt with, I did that, it was resolved, why do you keep bringing that back up?*

May state they will continue with the course (or re-enrol) despite all the concerns presented to them

Can appear angry towards the organisation or individual staff



Observations – abilities and limitations

Often able to:

Live independently / participate in activities of daily living

Travel and access services in the local community

Make appointments / navigate short processes / including enrolment / registration / interviews



Can appear confused and frustrated or have difficulty understanding straightforward information / instruction

Can be articulate, intelligent, factual

Remember: Mental ill health does not discriminate

Observations – limitations in study

Often fall down when personal application is required:

- Unable to apply themselves to the activities of study
- Unable to commence, let alone, maintain focus and attention
- Unable to follow through on instructions
- Unable to engage with others and ‘conform’

High levels of stamina and persistence for complaints / grievances (historic) but very little ability, if any, to apply themselves to study.



Context - reminders for ourselves

We are not here to address, correct or right the wrongs in peoples lives

We are not here to endure on-going unacceptable behaviour

We are not here to diagnose mental ill health

We will likely never know the full-story about a person or their challenges

Based on our experience, it is understandable, to fully expect the person to fail



What we need to do

- ✓ Be consistent and calm
- ✗ Do not become dragged into irrelevant side issues
- ✓ Keep the message on track – study tasks and goals
- ✓ Address the concerns sooner rather than later
 - *behaviour that is unacceptable will not go away, it will continue and impact more people*
- ✓ All normal Reasonable Adjustment should be applied as per any other student with support needs or difficulty participating
- ✓ Maintain clear boundaries individually and as a team – be aware of ‘splitting behaviours’
- ✓ Do advise that behaviour is unacceptable – when it occurs



The student perspective – What it can feel like?

Think of a time when you have felt particularly aggrieved. Perhaps you were treated unfairly, were ripped-off or had a complaint that was handled badly or ignored.

What were your emotions?



Just get on with it / OMG what's the problem!

Why don't they understand this?

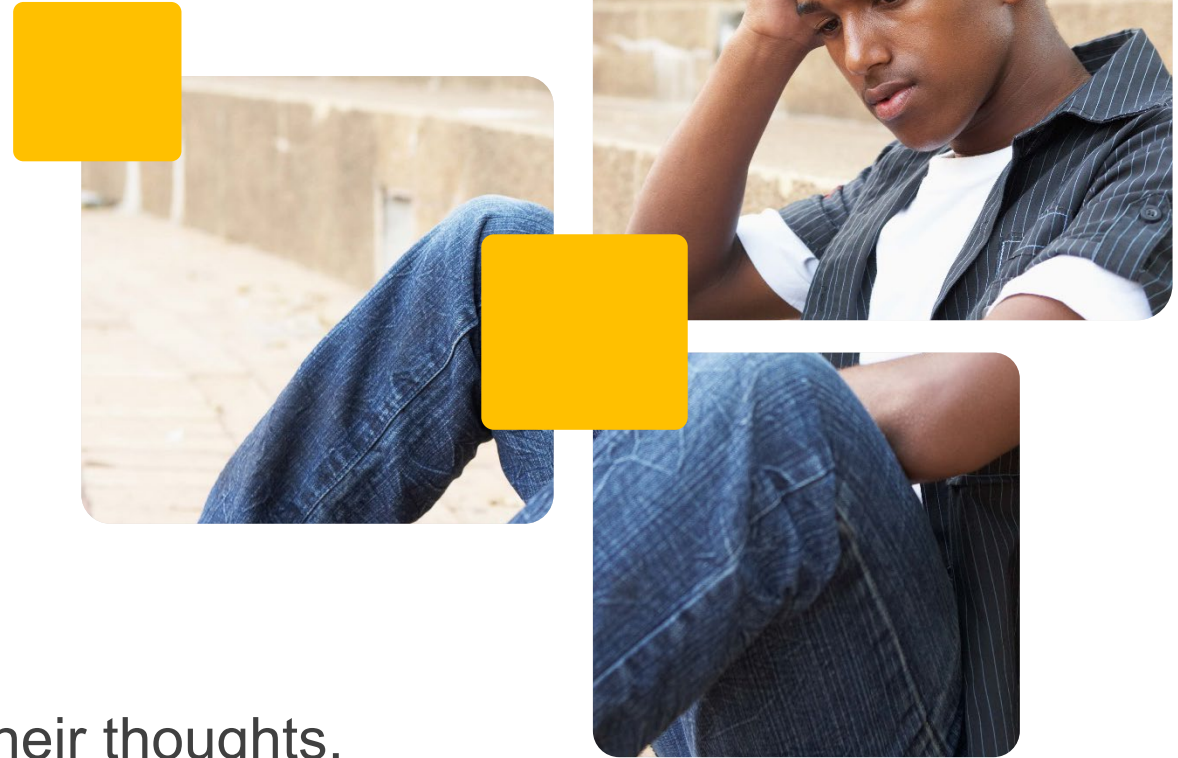
Why is everything / everyone so difficult?

This is not difficult!

Why can't they just get on with it?

The student perspective - continued

- Often the individual is not in a position to see the reasoning
- They may have very black and white thinking
- Difficulty compromising
- Desire to do what everyone else is doing – their peers are studying, getting jobs, having relationships
- Not able to influence their mental ill health
 - It disrupt a person's life, interferes with their thoughts, emotions, behaviours, relationships, and day-to-day functioning
- Exhausting – physically and mentally
- Often results in confusion, fear, causes additional anxiety and wider health impacts



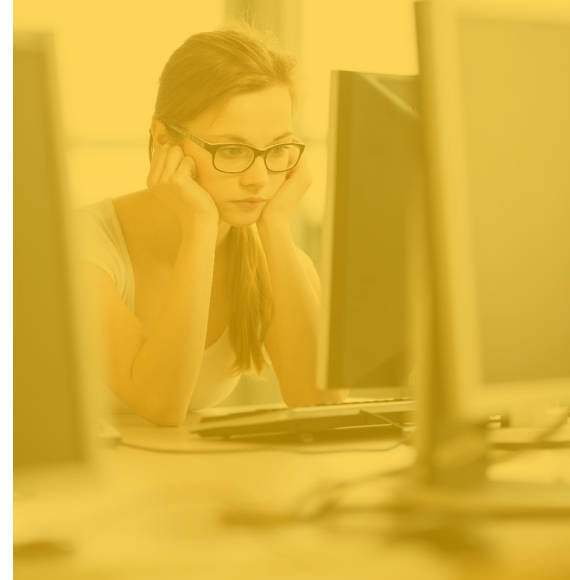
How do we manage informal conversations?

- 1 Be explicit with instructions / actions required and stipulate a timeframe
- 2 Bring the conversation back to the here and now
- 3 Avoid statements that are not required
- 4 Trying to demonstrate that you see things from their perspective can fail (and be interpreted differently)
 - *I can understand how you feel*
 - *I'm sorry this is causing you stress*
- 5 Keep copies / notes of all communication, incidents, concerns raised



How do we manage emails?

- We do not have to respond to rants / or outpouring of emotions
 - except where a threat is implied or explicit, or
 - there is a request for information / action
- Keep copies of all communication received
- Do not get pulled into justifying the teaching and learning process
- Written communication needs to be brief and factual



How do we manage meetings?

Before the meeting:

- Be prepared, have copies of emails, incidents, reports, attendance records, assessment results
- Have a documented timeline to talk to
- Set an agreed time (with a colleague)
- Controlling – I can't attend that day/ time



At the meeting:

- Set the scene – reason for the meeting
- Be prepared for deflection / deviation and keep bringing the conversation back to the issue (firm but fair)
- Address false or inaccurate statements
- Clearly state expectations re behaviour – clarify what it is that is not acceptable
- Clearly state the actions / outcomes from the meeting and follow this up in writing

Post-meeting



- Discharge your own stress
- De-brief with a colleague / manager
- ‘Step back from the students storm’
- Give yourself some credit for managing the situation
- Action the outcomes ASAP

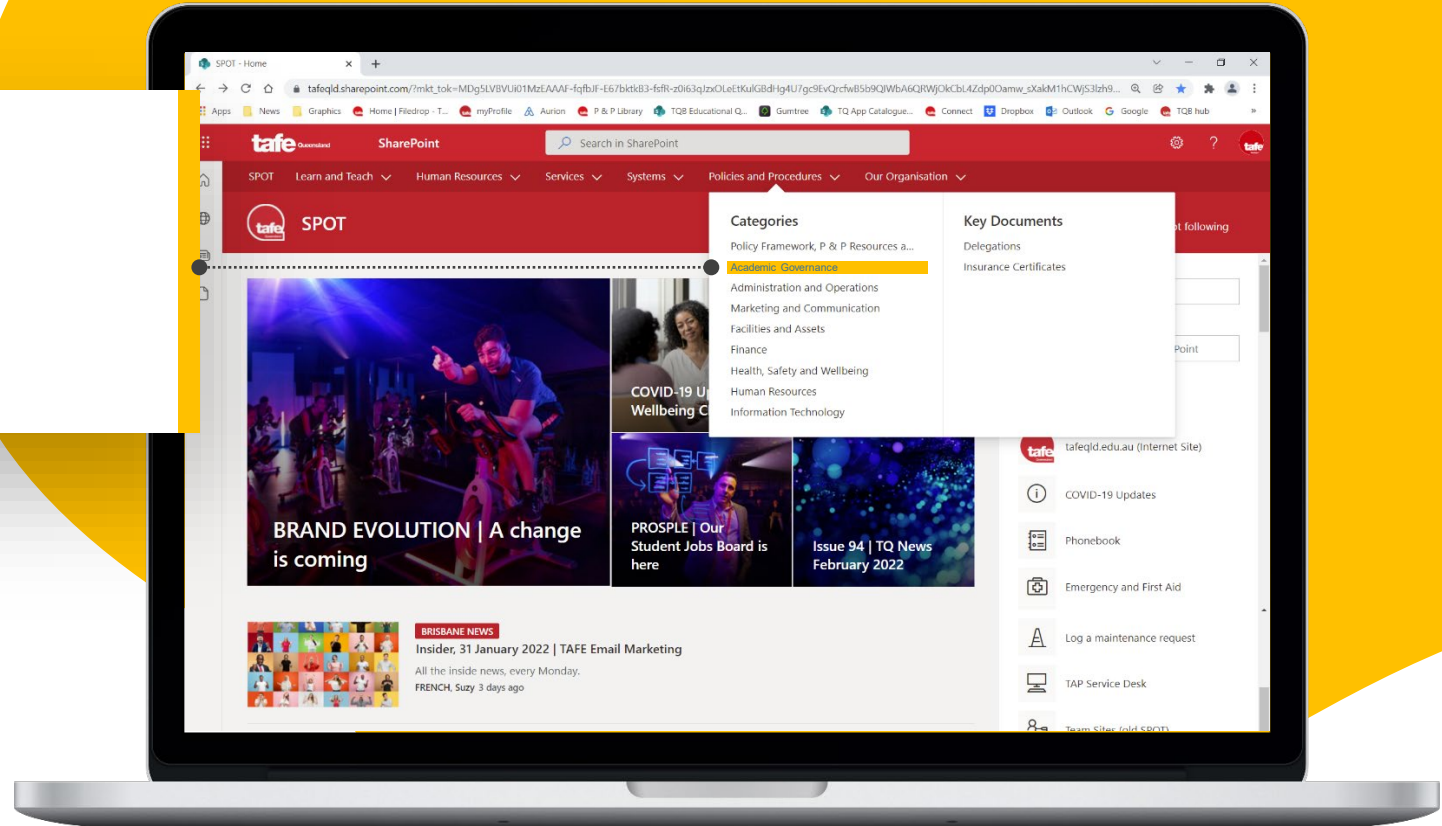


Reflect - were you fair?

1. Have adjustments been provided?
2. Has the student had ample opportunity to be successful?
3. Are there any relevant unaddressed concerns?

Policies, procedures and resources

- How do staff locate them?
- Policies and Procedures
- Academic Governance
- Student Intervention Plan (SIP)
- Student Misconduct



Resources

Student Misconduct Procedure



1. Purpose

Provides a fair, equitable, and consistent process for the management of student academic, behavioural, and research misconduct.

2. Overview

TAFE Queensland is committed to ensuring a fair and equitable learning environment by ensuring that students have access to processes that allow for allegations of student misconduct to be recorded, managed, and resolved in a consistent manner.

TAFE Queensland defines student misconduct as occurring in the following areas:

- Academic misconduct: inappropriate conduct and/or low proficiency in undertaking education and training activities;
- Behavioural misconduct: inappropriate personal conduct and behaviour; and
- Research misconduct: inappropriate conduct and behaviour in undertaking research.

The provisions for student misconduct outlined in this procedure apply to all students, including:

- All domestic and international students enrolled in Vocational Education and Training, Higher Education, Senior Studies, and non-accredited education and training, including students undertaking their training and/or assessment with another organisation on behalf of TAFE Queensland;
- At any location where approved training and/or assessment occurs, including on-campus, online, specific approved sites, off-campus (such as work experience, vocational placement, professional practice, live work sites, and off campus activities or events), or in close proximity to TAFE Queensland campuses; and
- In any other way deemed to seriously impact the interests or reputation of TAFE Queensland.

Any student misconduct breach will be subject to management by TAFE Queensland, including informally in cases of minor misconduct, and formal review and disciplinary action for major misconduct. Student misconduct may also be unlawful behaviour under Queensland or Australian law, and result in further action being taken.

Out of Scope

Australia Pacific Training Coalition (APTC) student misconduct will be managed under the provisions of APTC policy and procedure instruments.

Higher Education academic misconduct will be managed under the Higher Education Academic Integrity Procedure (under development) and Higher Education Plagiarism Procedure (under development).

Accountability:

The Chief Academic Officer is accountable for ensuring the management and maintenance of this procedure, including ensuring its continued appropriateness to the business, compliance with legislation

Student Misconduct Report



Part 1: Recording of Student Misconduct Incident

To be completed by the staff member in accordance with the Student Misconduct Procedure.

Student Details

Student name	Student number
Program studying	<input type="checkbox"/> Current student <input type="checkbox"/> Past student
Location of incident	Date of incident
	Time of incident

Alleged Misconduct (refer to definitions and examples within PR105 Student Misconduct Procedure)

Type	Minor	Major
Behavioural Misconduct - inappropriate personal conduct and behaviour that breaches Student Rules and Policies or detrimental to the conduct of an education activity e.g. bullying, harassment, aggressive or abusive behaviour, inappropriate use of technology.	<input type="checkbox"/>	<input type="checkbox"/>
Academic Misconduct - inappropriate conduct and/or low proficiency in undertaking education and training activities e.g. cheating, plagiarism, collusion, outsourcing assessment writing (contract cheating), sharing own or TAFE Queensland assessment materials, providing fraudulent certification etc.	<input type="checkbox"/>	<input type="checkbox"/>
Research Misconduct - inappropriate conduct and behaviour in undertaking research e.g. breach of the Australian Code for the Responsible Conduct of Research	<input type="checkbox"/>	<input type="checkbox"/>

Description of alleged misconduct (attach further documentation if necessary)

Minor Misconduct (Informal Disciplinary Action)

The extent or impact of the student's behaviour was NOT substantial (if substantial, treat as major misconduct).	Yes <input type="checkbox"/> No <input type="checkbox"/>
Incident was the first instance of alleged misconduct (NOTE: Repeated instances are reported as major misconduct).	Yes <input type="checkbox"/> No <input type="checkbox"/>
Immediate action taken by staff member:	
Incident was resolved and no further action required.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Behaviour was dealt with promptly and relevant action undertaken: <input type="checkbox"/> Educative conversation and informed / reminded of student rules <input type="checkbox"/> Reprimand / warning	Yes <input type="checkbox"/> No <input type="checkbox"/>
Student referred to a counsellor or student support.	Yes <input type="checkbox"/> No <input type="checkbox"/>
If incident was not resolved and further action was required	
Student Intervention Plan created.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Student Intervention Plan

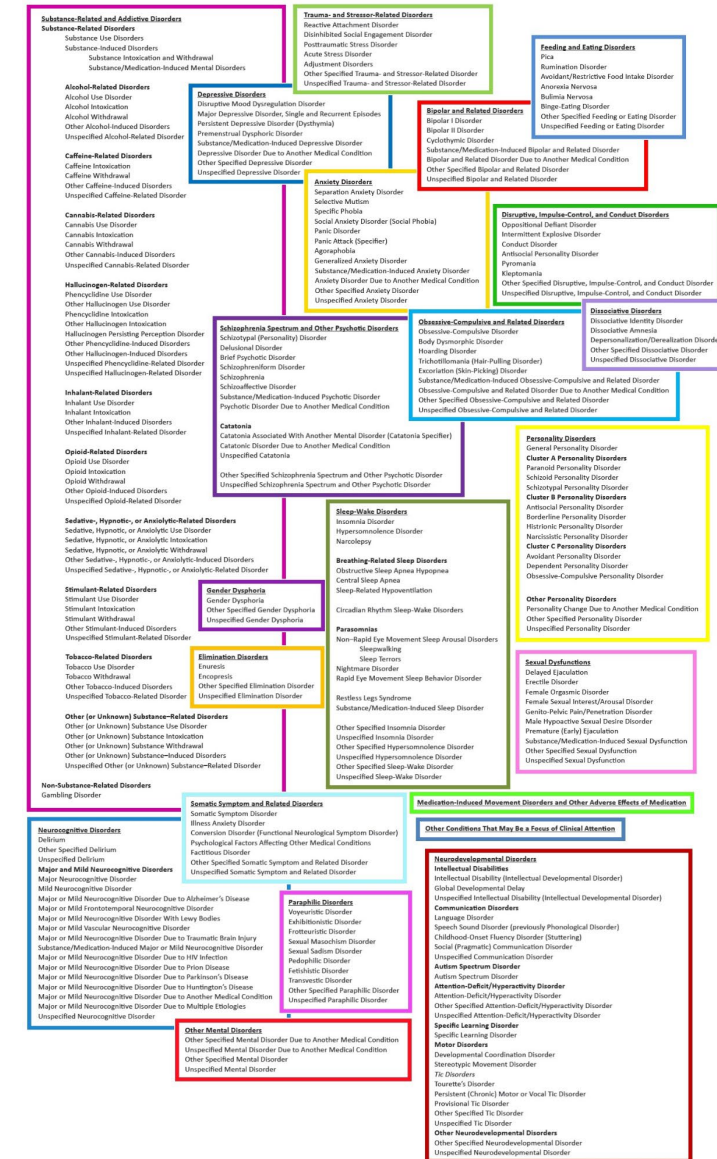


Complete for students identified as at risk of not progressing, for student misconduct or for requesting additional support.

Student Details	
Student Name	Student Number
Program	
Program Start Date	Program End Date
Under 18 years <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, notify parent	Senior Studies Student <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Apprentice/Trainee <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, notify employer	International Student <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, notify TQI
High Ed Student <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, on probation	VET Student <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, notify school
Reason for Intervention	
Misconduct (attach copy of Misconduct Record)	<input type="checkbox"/> Minor Misconduct <input type="checkbox"/> Academic <input type="checkbox"/> Behavioural <input type="checkbox"/> Major Misconduct <input type="checkbox"/> Academic <input type="checkbox"/> Behavioural <input type="checkbox"/> Research <input type="checkbox"/> Student excluded or suspended If yes, Start date: End date:
Not Progressing	<input type="checkbox"/> Non-attendance <input type="checkbox"/> Non-participation in course activities <input type="checkbox"/> Failure to submit assessment <input type="checkbox"/> Unsuccessful assessment attempt <input type="checkbox"/> Non-completion of Training Record or Training Plan <input type="checkbox"/> Non-participation in VPC or Professional Practice Placement or Work Based Project <input type="checkbox"/> Failure to achieve a Grade point Average of 3.0 (or higher) in any given study period
Is this a repeat instance of misconduct or non-progression	<input type="checkbox"/> Yes <input type="checkbox"/> No Date of last instance:
Additional Support (refer to Student Support Services)	<input type="checkbox"/> Learning support required <input type="checkbox"/> Accessibility support required <input type="checkbox"/> Counseling or Career Guidance Support <input type="checkbox"/> Indigenous support required
Details (include a summary of the issues, misconduct and/or any warnings or instructions given)	
Improvement Goals (include any specific agreed strategies to improve behaviour or performance)	
Prevention (include any intervention strategies to prevent re-occurrence)	

The Range of Mental Disorders

- Neurodevelopmental Disorders
- Schizophrenia Spectrum and Other Psychotic Disorders
- Bipolar and Related Disorders
- Depressive Disorders
- Anxiety Disorders
- Obsessive-Compulsive and Related Disorders
- Trauma and Stressor-Related Disorders
- Dissociative Disorders
- Somatic Symptom Disorders
- Feeding and Eating Disorders
- Elimination Disorders
- Sleep-Wake Disorders
- Sexual Dysfunctions
- Gender Dysphoria
- Disruptive, Impulse Control and Conduct Disorders
- Substance Use and Addictive Disorders
- Neurocognitive Disorders
- Personality Disorders
- Paraphilic Disorders
- Other Disorders



Moving forward

- Reduce the number of people involved
- Likely options:
 - is able to maintain reduced study load in same or alternative course
 - defer / withdraws
 - is withdrawn due to lack of attendance / participation
- Records /notes must be maintained



In a very small number of cases an indicator can be applied to the students account to stop the processing of further applications* requiring them to meet with the Faculty Director or Student Support Manager to assess enrolment options

*Requires GM approval and only where all fair and applicable processes have been followed.

Facts and urban myths.....



1

People experiencing chronic mental ill health are more likely to be victims of crime

2

The lead factor in violence in Australia is alcohol

3

Media headlines are often dramatic, sensational and unhelpful

4

Some of these behaviours can occur in all people not just those experiencing mental ill health

Further reading:

- Fact vs myth: mental health issues & violence
<https://www.sane.org/information-stories/facts-and-guides/fvm-mental-illness-and-violence>
- Mental illness and violence: Debunking myths, addressing realities
<https://www.apa.org/monitor/2021/04/ce-mental-illness>
- Mental illness and violence – article
<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/mental-illness-and-violence#bhc-content>



Training and support for teachers and TAFE Services staff

- Mindarma - an award winning evidence-based e-learning program, proven to enhance psychological resilience and protect mental health
- Accidental Counsellor
- MHFA (Mental Health First Aid)
- Benestar – support services
- Colleagues / Manager

Q&A

