

Ref: IQAC/GCTE/2026-27/Activity/-I

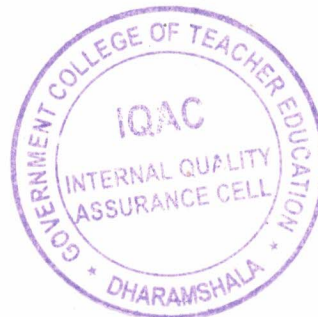
Date: 13 July 2026

Institutional Policy on Mental Health Promotion, Support, and Crisis Management

Effective Date: 2026-27

Review Cycle: Annual

Approved By: Academic Council / IQAC



1. PREAMBLE

Mental health is a fundamental component of holistic education, student success, personal development, and institutional well-being. Colleges and universities are increasingly witnessing challenges related to stress, anxiety, depression, adjustment difficulties, academic pressure, substance misuse, social isolation, and other psychosocial concerns that affect learning and overall quality of life.

In alignment with the National Education Policy (NEP) 2020, Mental Healthcare Act 2017, University Grants Commission (UGC) guidelines, and National Assessment and Accreditation Council (NAAC) quality benchmarks, this policy establishes a comprehensive institutional framework for promoting mental well-being, providing support services, ensuring timely intervention, and managing mental health crises.

2. LEGAL AND POLICY FRAMEWORK

This policy is guided by:

Constitutional Provisions

- Article 21 – Right to Life and Dignity
- Article 21A – Right to Education
- Article 41 – Public Assistance and Welfare
- Article 47 – Promotion of Public Health



Coordinator
Internal Quality Assurance Cell
Govt. College of Teacher Education
Dharamshala-176215 (H.P.)



Principal,
Govt. College of Teacher Education
Dharamshala, Distt. Kangra (H.P.)
DDO Code: 203

National Legislation

- Mental Healthcare Act, 2017
- Rights of Persons with Disabilities Act, 2016
- Protection of Children from Sexual Offences (POCSO) Act, 2012 (where applicable)
- Information Technology Act (Confidentiality and Digital Records)

National Policies and Guidelines

- National Education Policy (NEP) 2020
- UGC Guidelines on Student Counselling Systems
- UGC Anti-Ragging Regulations
- UGC Quality Mandate
- National Mental Health Programme (NMHP)

NAAC Alignment

- Criterion II: Teaching-Learning and Student Development
- Criterion V: Student Support and Progression
- Criterion VI: Governance, Leadership and Management
- Criterion VII: Institutional Values and Best Practices

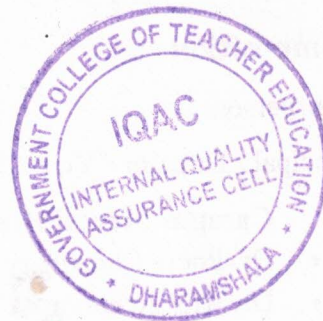
3. VISION

To create a mentally healthy, safe, inclusive, compassionate, and supportive campus that promotes psychological well-being, resilience, emotional growth, and academic success.

4. MISSION

The institution shall:

- Promote mental health literacy.
- Foster emotional well-being and resilience.
- Provide accessible counseling and support services.
- Strengthen early identification and intervention systems.
- Build a supportive campus culture.
- Ensure effective crisis management and recovery support.



5. POLICY OBJECTIVES

The institution aims to:

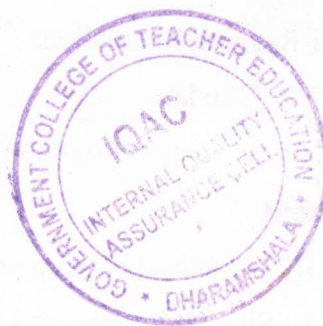
1. Promote positive mental health among students and staff.
2. Strengthen help-seeking behavior.
3. Provide accessible counseling services.

4. Establish referral and crisis response systems.
5. Develop faculty and student support networks.
6. Integrate mental health into institutional planning.
7. Strengthen resilience, coping skills, and help-seeking behaviour.
8. Ensure compliance with UGC and NAAC requirements.

6. SCOPE

Applicable to:

- Pre-service Trainee Teachers
- In-service Teachers
- Faculty members
- Administrative staff
- Hostel residents
- Contractual employees
- Visitors participating in college activities
- Student Volunteers



7. GOVERNANCE STRUCTURE

Institutional Mental Health and Well-being Committee (IMHWC)

Composition

Chairperson:

Principal / Director / Vice-Chancellor

Campus Mental Health Services

- Dr. Pooja Chaudhary
- Dr. Atul Acharya
- Dr. Atul Thakur
- Dr. Anup Kumar
- Dr. Madhubala
- Dr. Jyoti
- Student Representatives

Committee

Convenor
Member
Member
Member
Member
Counsellor/Psychologist

Functions

- Policy implementation
- Annual planning
- Monitoring and review

- Capacity building
- Crisis oversight
- Documentation and reporting

8. Student support services

The institution shall establish:

Counselling Centre

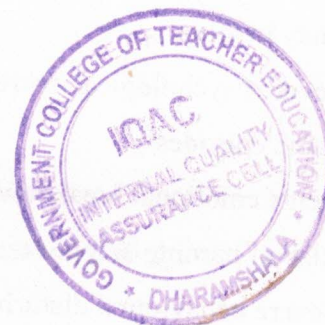
Services:

- Personal counselling
- Academic counselling
- Career counselling
- Crisis counselling
- Referral services

Student Wellness Cell

Functions:

- Awareness activities
- Wellness campaigns
- Peer support initiatives



9. Early Identification and Referral

Indicators may include:

Academic Indicators

- Declining academic performance
- Frequent absenteeism
- Lack of classroom participation

Emotional Indicators

- Persistent sadness
- Anxiety
- Emotional withdrawal

Behavioural Indicators

- Isolation
- Aggressive behaviour
- Significant personality changes

Physical Indicators

- Sleep disturbances
- Chronic fatigue
- Neglect of personal care

Referral Sources:

- Self-referral
- Faculty referral
- Peer referral
- Parent referral
- Hostel referral

10. Crisis Management System

A crisis may involve:

- Severe psychological distress
- Panic episodes
- Acute emotional breakdown
- Risk of harm to self or others
- Severe behavioural disturbances

Crisis Response Team

- Principal
- Counsellor
- Medical Officer
- Dean Student Welfare
- Chief Warden
- Security Representative

Crisis Response Steps

1. Immediate safety assessment.
2. Provide supportive supervision.
3. Contact counsellor.
4. Arrange medical evaluation if required.
5. Notify designated authorities.
6. Prepare support and follow-up plan.



11. Confidentiality and Ethical Practices

The institution shall:

- Protect privacy and confidentiality.
- Secure counselling records.
- Maintain informed consent procedures.
- Share information only on a need-to-know basis.
- Follow applicable legal requirements.

12. Monitoring and Review

The Institutional Mental Health and Well-being Committee shall:

- Conduct quarterly reviews.
- Review counselling utilization trends.
- Assess effectiveness of programmes.
- Recommend improvements.

Annual review report shall be submitted to IQAC and the Head of Institution.

13. Annexures

Annexure I

Faculty Mental Health Referral Form

Annexure II

Student Self-Referral Form

Annexure III

Mental Health Observation Checklist

Annexure IV

Wellness Support Plan Template

Annexure V

Parent/Guardian Communication Format

Annexure VI

Mental Health Crisis Response Flowchart

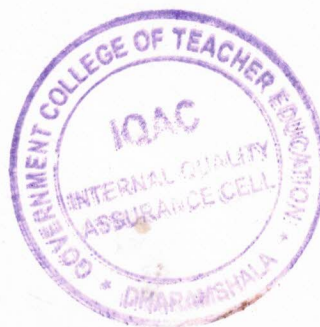
Annexure VII

Campus Mental Health Survey Tool

Annexure VIII

Annual Mental Health Action Plan Format

Annexure IX



Annexure X

NAAC Evidence Collection Template

Annexure XI

Faculty Quick Reference Guide

Annexure XII

Mental Health Awareness Calendar

14. Policy Approval

Approved by:

Principal

Date: _____

Resolution Number: _____

Review Due Date: _____

Institution Seal



Suggested Attachments to the SOP:

1. Annual Mental Health Action Plan
2. Annual Mental Health Report Format
3. Annual Review and Audit Checklist
4. Counselling Centre Operational Guidelines
5. Counselling Consent Form
6. Crisis Management Protocol
7. Crisis Response Flowchart
8. Faculty Handbook on Student Support
9. Faculty Quick Reference Guide
10. Internal Audit Toolkit
11. IQAC Monitoring Dashboard
12. Mental Health Awareness Calendar
13. Mental Health Observation Checklist
14. Mental Health Referral Form
15. Mental Health SOP Manual
16. Mental Health Training Modules
17. NAAC Evidence Portfolio Format
18. Student Self-Help Request Form
19. Student Wellness Handbook
20. Student Wellness Survey



FACULTY MENTAL HEALTH REFERRAL FORM**A. Faculty Information**

Name: _____

Department: _____

Designation: _____

Date of Referral: _____

Contact Number: _____

B. Student Information

Name: _____

Roll Number: _____

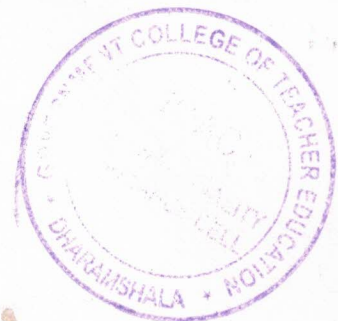
Programme/Class: _____

Semester: _____

Hosteller / Day Scholar: _____

C. Reason for Referral (✓)

- ☐ Frequent absenteeism
- ☐ Academic decline
- ☐ Emotional distress
- ☐ Anxiety symptoms
- ☐ Social withdrawal
- ☐ Sleep difficulties
- ☐ Family concerns
- ☐ Financial stress
- ☐ Relationship issues
- ☐ Behavioural changes
- ☐ Substance use concerns
- ☐ Other _____



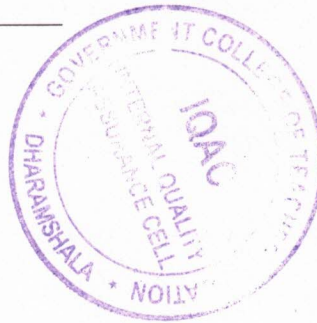
D. Observations

E. Urgency Level

- ☐ Routine
- ☐ Priority
- ☐ Immediate Attention Required

Faculty Signature: _____

Date: _____



STUDENT SELF-REFERRAL FORM**Student Details**

Name: _____

Roll Number: _____

Programme: _____

Semester: _____

Contact Number: _____

Email: _____

Reason for Seeking Support (✓)

- ☐ Academic Stress
- ☐ Anxiety
- ☐ Low Mood
- ☐ Family Concerns
- ☐ Relationship Issues
- ☐ Adjustment Difficulties
- ☐ Financial Concerns
- ☐ Sleep Problems
- ☐ Career Uncertainty
- ☐ Loneliness
- ☐ Other _____

**Brief Description**

Preferred Mode:

☐ Face-to-Face

☐ Online

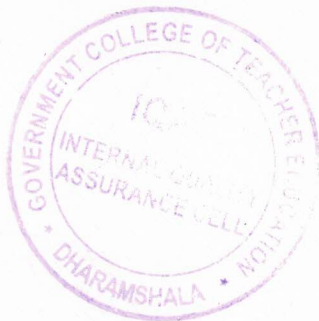
☐ Telephone

Emergency Contact:

Name _____

Phone _____

Student Signature _____



MENTAL HEALTH OBSERVATION CHECKLIST

Student Name: _____

Class/Semester: _____

Date: _____

Academic Indicators

- ☐ Declining performance
- ☐ Frequent absenteeism
- ☐ Incomplete assignments
- ☐ Reduced classroom participation

Emotional Indicators

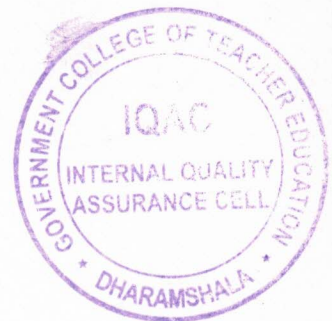
- ☐ Persistent sadness
- ☐ Excessive worry
- ☐ Irritability
- ☐ Mood fluctuations
- ☐ Emotional withdrawal

Behavioural Indicators

- ☐ Social isolation
- ☐ Aggressive behaviour
- ☐ Noticeable personality change
- ☐ Poor concentration
- ☐ Risk-taking behaviour.

Physical Indicators

- ☐ Fatigue
- ☐ Sleep disturbances
- ☐ Appetite changes
- ☐ Poor self-care



Immediate Action Needed

☐ No

☐ Yes

Remarks:

Observer Signature _____



PARENT/GUARDIAN COMMUNICATION FORMAT

Date: _____

Dear Parent/Guardian,

This is to inform you that your ward, _____, may benefit from additional wellness and support services available through the institution.

As part of our student well-being initiatives, we would like to discuss supportive measures that may assist the student's academic and personal development.

You are requested to contact:

Name: _____

Designation: _____

Phone: _____

Email: _____

Meeting Date: _____

Venue/Mode: _____

Thank you for your cooperation.

Principal/Director

Institution Seal



MENTAL HEALTH CRISIS RESPONSE FLOWCHART

STUDENT IN DISTRESS IDENTIFIED

↓
Faculty / Peer / Warden / Staff Observation↓
Immediate Safety Assessment↓
Urgent Risk Present?

→ NO

↓
Refer to Counsellor↓
Assessment and Support↓
Follow-Up Monitoring↓
Case Review

→ YES↓
Ensure Immediate Safety↓
Contact Counsellor / Crisis Team↓
Medical Assessment↓
Parent/Guardian Communication (as appropriate)↓
Specialized Referral↓
Support Plan↓
Follow-Up and Recovery Monitoring

CAMPUS MENTAL HEALTH SURVEY TOOL**Student Wellness Survey****Section A: General Well-being**

1. I feel supported by my institution.

☐ Strongly Agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly Disagree

2. I know where to seek help if needed.

☐ Strongly Agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly Disagree

3. I feel connected to my peers.

☐ Strongly Agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly Disagree

Section B: Stress and Coping

4. Academic stress affects me significantly.

5. I am able to manage stress effectively.

6. I have access to emotional support.

(Response Scale Same as Above)

Section C: Institutional Services

7. Counselling services are accessible.

8. Faculty members are approachable.

9. Wellness programmes are useful.

Suggestions

ANNUAL MENTAL HEALTH ACTION PLAN FORMAT

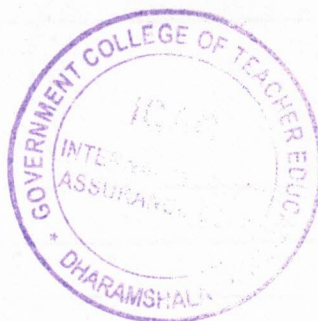
Institution: _____

Academic Session: _____

Objective	Activity	Responsibility	Timeline	KPI	Status
Awareness	Orientation Programme	Student Welfare Cell	July	90% Coverage	
Capacity Building	Faculty Training	IQAC	August	100% Faculty	
Wellness Promotion	Mental Health Week	Wellness Cell	October	500 Participants	
Monitoring	Student Survey	Counsellor	November	80% Response Rate	

Budget Allocation: _____

Review Date: _____



CONFIDENTIAL COUNSELLING DOCUMENTATION FORMAT

STRICTLY CONFIDENTIAL

Case Number: _____

Date Opened: _____

Student Name: _____

Programme: _____

Referral Source:

- ☐ Self
- ☐ Faculty
- ☐ Parent
- ☐ Peer
- ☐ Warden

Presenting Concern

Assessment Summary

Interventions Provided

- ☐ Counselling
- ☐ Academic Support
- ☐ Wellness Planning
- ☐ Referral

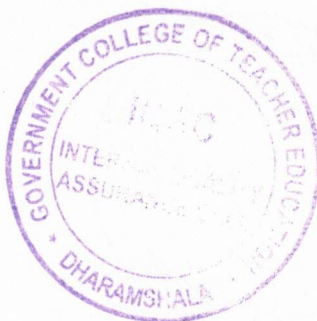


☐ Parent Consultation

Follow-Up Plan

Case Closure Date: _____

Counsellor Signature _____



NAAC EVIDENCE COLLECTION TEMPLATE

Academic Year: _____

Institution: _____

Policy and Governance

- ☐ Mental Health Policy
- ☐ Committee Constitution
- ☐ Meeting Minutes
- ☐ Annual Action Plan

Awareness and Outreach

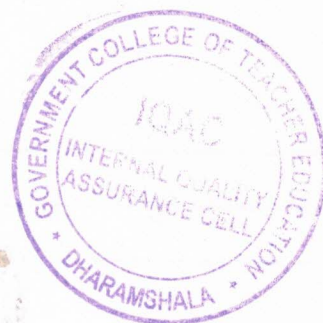
Activity	Date	Participants	Evidence
Orientation			
Workshop			
Wellness Week			

Training

- ☐ Faculty Training Records
- ☐ Student Leader Training Records
- ☐ Staff Training Records

Student Support

- ☐ Counselling Statistics
- ☐ Referral Records
- ☐ Survey Reports
- ☐ Feedback Reports



Prepared By: _____

Verified By (IQAC): _____

FACULTY QUICK REFERENCE GUIDE

Recognize

Watch for:

- ✓ Academic decline
- ✓ Persistent absenteeism
- ✓ Emotional distress
- ✓ Social withdrawal
- ✓ Behavioural changes
- ✓ Expressions of hopelessness

Respond

- ✓ Listen calmly
- ✓ Show empathy
- ✓ Maintain privacy
- ✓ Encourage professional support
- ✓ Refer appropriately

Avoid

- X Judging
- X Dismissing concerns
- X Making promises of secrecy
- X Acting beyond professional competence

Refer To

- Counsellor
- Student Welfare Cell
- Medical Officer
- Designated Institutional Support Team



NAAC EVIDENCE COLLECTION TEMPLATE

Academic Year: _____

Institution: _____

Policy and Governance

- ☐ Mental Health Policy
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- ☐ Annual Action Plan

Awareness and Outreach

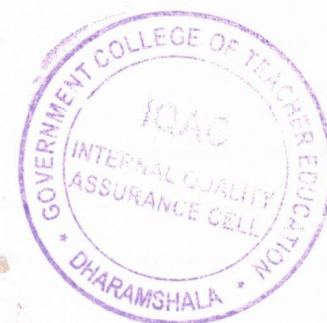
Activity	Date	Participants	Evidence
Orientation			
Workshop			
Wellness Week			

Training

- ☐ Faculty Training Records
- ☐ Student Leader Training Records
- ☐ Staff Training Records

Student Support

- ☐ Counselling Statistics
- ☐ Referral Records
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- ☐ Feedback Reports



Prepared By: _____

Verified By (IQAC): _____

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Refer To

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- Student Welfare Cell
- Medical Officer
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PROPOSED MENTAL HEALTH AWARENESS ACTIVITIES (2026-2027)

Sr. No.	Activities
1	Student Orientation on Well-being
2	Faculty Mental Health Training
3	World Mental Health Day Activities
4	Examination Wellness Campaign
5	Emotional Well-being Sessions
6	Student Wellness Survey
7	Mindfulness and Relaxation Activities
8	Annual Review and Planning Meeting

Prepared By: Institutional Mental Health Committee

