INSTITUTIONAL TOOLKIT

Governance, Support and Continuity for Crisis-Affected Cloud, Hybrid and Disrupted Learning

A Self-Guided Institutional Toolkit for Sustainable Teaching and Student Support

CLOUD HED

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Toolkit at a glance

GOVERNANCE, SUPPORT AND CONTINUITY FOR CRISIS-AFFECTED LEARNING

INTENDED AUDIENCE	Higher education leadership, programme and department heads, administration, HR, quality assurance, teaching and learning, digital learning, student support, accessibility, safeguarding, international offices, communications, and business continuity teams.
PURPOSE	To make crisis-responsive higher education an explicit institutional responsibility: preventing avoidable harm and burnout, protecting sustainable workload, and ensuring accountable systems for learning continuity and support.
LEARNING GOALS	• Define institutional duty of care and organisational responsibility. • Identify and reduce workload, psychosocial, accessibility, and continuity risks. • Clarify responsibilities, authority, accountable owners, and backups. • Establish minimum standards for flexibility, availability, staffing, and recovery. • Create visible referral, escalation, and service-continuity pathways. • Monitor organisational indicators and require corrective action, rather than relying on individual coping.
USE AND CONNECTIONS	The toolkit functions independently and defines the organisational layer needed to support students, educators, and services. Cross-references illustrate how institutional decisions enable the Student and Educator Toolkits and how the Psychological Skills Library may be offered safely as an optional shared resource.

About this toolkit

This toolkit is intended for higher education leadership, programme directors, department heads, faculty administration, human resources, quality assurance, teaching and learning units, information technology and digital learning teams, student support and wellbeing services, accessibility services, safeguarding leads, international offices, communications teams and crisis-response, or business-continuity groups.

Its purpose is organisational and preventive. It helps institutions take responsibility for the conditions in which people teach, study, and provide support. This includes defining responsibilities, reducing avoidable overload and psychosocial risk, protecting sustainable workload and recovery, aligning academic policy with operational capacity, creating visible support pathways, and ensuring that crisis-responsive education does not depend on chronic overwork, personal resilience, or informal goodwill.

How to use the toolkit

Use the "Choose your starting point" guide below to identify the sections and tools most relevant to your current institutional situation. You do not need to read the toolkit from beginning to end before taking action.

CHOOSE YOUR STARTING POINT

Use the pathway that best reflects the institution's current situation. Each pathway points to the most relevant sections and Quick Tools and identifies the first practical output. The pathways support rapid use; they do not replace a fuller institutional review.

CURRENT SITUATION	START WITH	PRIORITY QUICK TOOLS	FIRST PRACTICAL OUTPUT
Planning or preparing	**Sections 1–3** and **10**	**Quick Tool 1**: Readiness Scan; **Quick Tool 2**: Risk Review; **Quick Tool 3**: Role and Responsibility Matrix; **Quick Tool 8**: Implementation Planner	Named owners, foreseeable risks, backups, and a dated preparedness action plan.
Concerned about emerging risks	**Sections 2**, **4**, **5** and **7**	**Quick Tool 2**: Risk Review; **Quick Tool 4**: Workload, Flexibility and Availability Template; **Quick Tool 5**: Referral and Service Continuity Map; **Quick Tool 7**: Wellbeing and Burnout Prevention Review	One immediate risk-reduction action, one accountable owner, and a review date.
Operating during disruption	**Sections 3–6** and **9**	**Quick Tool 3**: Role and Responsibility Matrix; **Quick Tool 4**: Workload and Availability Template; **Quick Tool 5**: Referral Map; **Quick Tool 6**: Leadership Communication Checklist	A minimum operational plan stating what continues, what changes or stops, who decides, and how urgent concerns are escalated.
Stabilising, recovering or reviewing	**Sections 7**, **8** and **10**	**Quick Tool 7**: Wellbeing and Burnout Prevention Review; **Quick Tool 8**: Localisation, Implementation and Review Planner	Recovery actions, unresolved gaps, responsible owners, deadlines, and lessons incorporated into policy or practice.

Relationship with the other CLOUD-HED toolkits

TOOLKIT	PRIMARY QUESTION	INSTITUTIONAL CONNECTION
EDUCATOR TOOLKIT	How can educators maintain learning, communicate, use professional boundaries and connect students to support?	The institution defines which course-level decisions educators are authorised to make, what flexibility they may offer, when concerns transfer to another service, and how additional work is resourced or reduced.
STUDENT TOOLKIT	How can students stay connected to learning, communicate needs and navigate support?	The institution ensures that academic demands, flexibility options, communication, and support routes are predictable, accessible, safe, and consistently applied.
PSYCHOLOGICAL SKILLS LIBRARY	What brief non-clinical tools may help a person stabilise and identify a next step?	The institution may offer these optional non-clinical tools, but must not use individual coping resources as a substitute for safe conditions, functioning services, adequate staffing, workload reform, or safeguarding.
INSTITUTIONAL TOOLKIT	What structures, policies and shared responsibilities make crisis-responsive higher education sustainable?	This document provides the organisational layer that connects and enables the other three toolkits.

BOUNDARY BETWEEN TOOLKITS

This toolkit supports changes to systems, expectations, decision authority and support routes. It does not train leaders or educators to diagnose, deliver therapy, assess private coping worksheets or manage emergencies outside approved procedures.

Safety and localisation statement

This toolkit does not replace national law, institutional safeguarding procedures, occupational health requirements, emergency protocols, collective agreements, academic regulations, data protection rules, or professional mental health services. Institutions should adapt all tools to their own context and identify the accountable office for every action, pathway and review.

Contents

A MODULAR INSTITUTIONAL RESOURCE THAT CAN BE USED SECTION BY SECTION

SECTION	PURPOSE
About This Toolkit	Purpose, audience, use, boundaries, and relationship with the wider CLOUD-HED package.
Section 1. Institutional Responsibility and Organisational Care	Define what the institution must prevent, provide, change, resource, and review.
Section 2. Organisational and Psychosocial Risk	Identify organisational causes of overload, burnout, inconsistency, and exclusion.
Section 3. Governance, Roles, and Decision Authority	Clarify ownership, authority, consultation, escalation, and backup.
Section 4. Sustainable Workload, Availability, and Academic Flexibility	Provide flexibility without transferring unlimited or invisible work to staff.
Section 5. Referral, Escalation, and Service Continuity	Create usable routes with response expectations, fallback, and follow-up.
Section 6. Leadership and Institutional Communication	Reduce uncertainty and connect messages to operational decisions.
Section 7. Staff Wellbeing, Burnout Prevention, and Organisational Response	Prevent and respond to work-related psychosocial risk through operational action and accountable support.
Section 8. Student Wellbeing, Accessibility, and Inclusive Participation	Design academic systems and support routes that reduce distress and exclusion.
Section 9. Privacy, Documentation, and Safeguarding	Define minimum necessary information, confidentiality limits, and urgent procedures.
Section 10. Monitoring, Accountability, and Institutional Learning	Track organisational indicators, require corrective action, and maintain version control.

PART I - INSTITUTIONAL FOUNDATIONS | SECTION 1

Institutional Responsibility and Organisational Care

MOVE FROM GOODWILL AND INDIVIDUAL COPING TO ACCOUNTABLE PREVENTION, PROTECTION, AND SUSTAINABLE ORGANISATIONAL SUPPORT

RELATED CLOUD-HED RESOURCES

Educator Toolkit: Professional Boundaries, Confidentiality, and Escalation clarifies educator-level responsibilities. **Student Toolkit: Communicate and Ask for Academic Support** and **Map Your Support Network and Find the Right Route** provides student-facing navigation. Psychological Skills Library tools are optional and must not substitute for institutional duty of care, safe conditions, or functioning services.

Crisis-affected higher education creates demands that extend beyond ordinary teaching and administration. Students and staff may be affected by conflict, displacement, loss, family separation, infrastructure disruption, unstable connectivity, financial pressure, changes in legal status, health concerns, or prolonged uncertainty. These conditions affect participation, concentration, communication and the practical ability to teach or study.

Institutions often respond by asking educators to be flexible, responsive, and compassionate. Those expectations become unsafe and unsustainable when the institution does not also clarify workload, decision authority, referral pathways, documentation, communication standards, and the limits of the teaching role. When systems are unclear, individual educators and students absorb institutional gaps.

A trauma-informed institutional approach does not assume that everyone is traumatised and does not turn the university into a treatment provider. It asks whether institutional practices increase or reduce threat, unpredictability, powerlessness, shame, and exclusion. The organisational emphasis is therefore on safety, transparency, choice, predictability, collaboration, inclusion, and meaningful access.

INSTITUTIONAL RESPONSIBILITY, POLICY COMMITMENTS, AND ORGANISATIONAL CARE

Institutions are responsible for organising teaching, administration, and support in ways that do not depend on chronic overwork, continuous availability, unpaid emotional labour, or the personal resilience of individual staff and students. These responsibilities may arise from applicable legal obligations, institutional policies, professional standards, and broader ethical commitments, depending on the national and organisational context. In practice, they include preventing foreseeable psychosocial and workload risks, establishing clear authority and functioning support systems, responding to evidence of overload, and reviewing policies or practices that repeatedly produce harm. Individual coping tools may complement these measures but must not replace organisational action.

A LAYERED RESPONSIBILITY MODEL	MAIN RESPONSIBILITY	EXAMPLES	MUST NOT BE EXPECTED TO REPLACE
INDIVIDUAL	Use available tools, communicate needs, and seek appropriate support.	Small next steps, use of academic options, and support information.	Inaccessible systems, impossible workload, or absent services.
EDUCATOR	Maintain learning structure, communicate clearly, offer permitted flexibility, and connect students to support.	Course-level decisions within policy, factual communication, and referral.	Therapy, emergency management, legal advice, or the whole support system.
PROGRAMME OR SERVICE	Coordinate academic decisions, provide specialised or practical support, and manage repeated or complex concerns.	Academic advising, accessibility, wellbeing, financial, international, or safeguarding functions.	Returning unresolved responsibility to individual educators without guidance.
INSTITUTION AND LEADERSHIP	Prevent foreseeable organisational and psychosocial risks; allocate resources; define roles and authority; protect workload and recovery; and ensure pathways remain functional.	Work design, staffing, workload decisions, communication standards, referral maps, service continuity, occupational support, monitoring, and corrective action.	Delegating institutional gaps to personal resilience, counselling, peer goodwill, or individual educators.

Seven institutional principles

PRINCIPLE	INSTITUTIONAL MEANING
Shared responsibility	Student and staff support cannot depend on a single educator, office, or informal contact.
Role clarity	People need to know what they may decide, what they should refer to, and who is accountable for the next step.
Predictability	Clear procedures, timelines, and communication reduce avoidable uncertainty during disruption.
Workload sustainability	Student flexibility often creates additional work for educators and support teams. Institutions must account for that work, simplify processes, protect recovery, and set realistic expectations.
Accessibility and inclusion	Support must be reachable across language, disability, connectivity, location, and financial and legal-status barriers.
Safety and privacy	Urgent concerns require clear escalation, while information should be collected and shared only as necessary and in accordance with the law.
Learning and adaptation	Institutions should review repeated gaps and improve systems rather than relying on individual improvisation.
Prevention before remediation	Institutions should change harmful work and learning conditions before relying on counselling, resilience training, or self-help resources.

Minimum institutional standards

- A named institutional owner for crisis-responsive teaching and support.
- A documented distinction between individual, educator, programme, service, and leadership responsibilities.
- A visible consultation route when responsibility is unclear.
- A process for reporting repeated gaps to leadership as institutional risks.
- A requirement that every urgent or high-risk pathway has an accountable owner and backup.
- A review process that checks whether responsibilities are functioning in practice, not only described in policy.
- Minimum standards for working-time boundaries, recovery, staffing backup, and crisis-related workload adjustment.
- A formal process for identifying and responding to repeated overload, burnout-related absence, service saturation, and other organisational psychosocial risks.

EXPECTED INSTITUTIONAL OUTPUT

A responsibility map that identifies one accountable owner, one operational route and one required decision for each critical institutional function.

APPLY THIS SECTION

Use the scan below to identify what is already formalised, what is still informal, and which institutional decisions need a named owner.

QUICK TOOL 1

Institutional Responsibility and Readiness Scan

IDENTIFY WHAT IS IN PLACE, WHAT IS INFORMAL, AND WHAT REQUIRES A NAMED DECISION.

Complete this scan with evidence rather than relying only on impressions. Use the final column to assign an owner and an immediate action.

READINESS ITEM	IN PLACE	PARTLY	ABSENT	EVIDENCE, OWNER, OR ACTION
Named owner for crisis-responsive teaching and support	☐	☐	☐	
Roles defined across leadership, programmes, educators, and services	☐	☐	☐	
Decision authority and escalation levels documented	☐	☐	☐	
Staff availability and response-time standards published	☐	☐	☐	
Shared academic flexibility principles in use	☐	☐	☐	
Workload process for high-disruption periods	☐	☐	☐	

READINESS ITEM	IN PLACE	PARTLY	ABSENT	EVIDENCE, OWNER, OR ACTION
Verified referral and fallback map	☐	☐	☐	
Consultation route for staff who are unsure	☐	☐	☐	
Accessible and low-bandwidth support information	☐	☐	☐	
Privacy, documentation, and safeguarding procedures approved	☐	☐	☐	
Leadership message-review process	☐	☐	☐	
After-action review and version-control process	☐	☐	☐	
Organisational psychosocial and burnout risks assessed	☐	☐	☐	
Crisis-related additional work counted in workload planning	☐	☐	☐	

READINESS ITEM	IN PLACE	PARTLY	ABSENT	EVIDENCE, OWNER, OR ACTION
Staff can raise workload concerns without penalty	☐	☐	☐	
Leave, recovery time, and non-working hours protected	☐	☐	☐	
Repeated overload triggers leadership review and corrective action	☐	☐	☐	

Top three priorities

1. Priority:

Owner: Review date:

2. Priority:

Owner: Review date:

3. Priority:

Owner: Review date:

PART I - INSTITUTIONAL FOUNDATIONS | SECTION 2

Organisational and Psychosocial Risk

IDENTIFY AND CHANGE ORGANISATIONAL CONDITIONS THAT CREATE OVERLOAD, BURNOUT, MORAL DISTRESS, INCONSISTENCY, OR EXCLUSION

RELATED CLOUD-HED RESOURCES

Educator Wellbeing, Stress and Burnout Prevention and **Peer Consultation and Collegial Support** can inform workload and staffing responses, while the Student Toolkit can help identify barriers related to access, routine disruption, and support networks.

Overload, burnout, fragmented support, and inconsistent student experiences are often described as individual problems. In practice, they are frequently produced by work design, staffing, policy, communication, and resource decisions. The purpose of institutional risk review is not to assess whether people are resilient enough. It is to identify what the institution must stop, reduce, resource, redesign, or take responsibility for.

RISK FACTOR	HOW IT APPEARS	PROTECTIVE CONDITION
Unclear availability expectations	Staff monitor multiple channels or respond outside working hours.	Official channels, response standards, protected non-working time, and management support when boundaries are breached.
Flexibility without workload adjustment	Individual alternatives are created repeatedly without time, templates, or administrative support.	Shared options, templates, time allocation, administrative support, and explicit reduction or redistribution of other work.
Emotional labour without backup	Staff receive high-intensity disclosures but lack guidance on consultation or referral.	Named consultation and referral routes, protected recovery, workload review, and transfer of responsibility when appropriate.
Hidden or outdated pathways	Contacts are difficult to find, overlap, or no longer function.	Verified service map with hours, response expectations, and fallback.
Role expansion	Educators become informal counsellors, case managers, translators, or emergency contacts.	Clear role limits, functioning services, and transfer of responsibility.

RISK FACTOR	HOW IT APPEARS	PROTECTIVE CONDITION
Platform and communication overload	The same message appears through several channels without coordination, producing repeated notifications, conflicting versions, or uncertainty about which instruction is current.	One clearly identified authoritative information source, coordinated secondary channels, and visible dates or version numbers.
Uncoordinated academic decisions	Departments apply different attendance, assessment, or flexibility rules.	Published decision levels and common institutional principles.
Invisible crisis-related work	Course redesign, communication, referral, and coordination are not recognised.	Workload-sensitive planning, simplification, redistribution, and time allocation.
Support dependent on informal relationships	Help is available mainly to people who know the right person.	Visible first-contact routes, triage, and accessible information.
Leadership messages without operational support	Staff are told to be flexible or prioritise wellbeing without reduced tasks or resources.	Messages that state priorities, capacity limits, and what may stop.
No review after disruption or significant incident	The institution returns to routine operations without analysing what failed, what worked, who was affected, or what should change.	A proportionate after-action review with named actions, owners, deadlines, and follow-up.
Chronic overload	Work repeatedly exceeds contracted time or cannot be completed within available staffing and resources.	Reduce, redistribute, postpone, simplify, or resource the work; review staffing and priorities.
Recovery deficit	Staff move directly from acute disruption or critical incidents back to normal expectations.	Protected leave and recovery, phased return where needed, and review of accumulated work.
Moral distress	Staff know what students need but lack authority, resources, or functioning services to respond safely.	Clear decision authority, escalation, transparent resource limits, and leadership action on repeated gaps.
Wellbeing without organisational change	Wellbeing workshops or self-help materials are offered while harmful workload and work conditions remain unchanged.	Operational changes to workload, staffing, priorities, and work design, alongside voluntary confidential support.

Decision questions

- Which risk is creating the greatest immediate pressure or safety concern?
- Which protective condition exists but remains informal, unverified, or unevenly applied?
- Which issue requires the institution to stop, reduce, resource, redesign, or formally decide something rather than asking individuals to cope or train harder?
- What can be simplified immediately without waiting for a full institutional reform?
- What evidence would demonstrate that the protective condition is operating in practice?

EXPECTED INSTITUTIONAL OUTPUT

A prioritised institutional risk register that links each identified risk to a protective condition, accountable owner, evidence source, and review date.

APPLY THIS SECTION

Use the review below to connect each risk to a protective condition, evidence and accountable action.

QUICK TOOL 2

Risk and Protective Conditions Review

CONNECT EACH CURRENT RISK TO A PROTECTIVE CONDITION, EVIDENCE AND ACCOUNTABLE ACTION.

INSTITUTIONAL AREA	CURRENT RISK OR GAP	PROTECTIVE CONDITION REQUIRED	EVIDENCE OR EXAMPLE	PRIORITY/ OWNER

INSTITUTIONAL AREA	CURRENT RISK OR GAP	PROTECTIVE CONDITION REQUIRED	EVIDENCE OR EXAMPLE	PRIORITY/ OWNER

USE OF THIS TOOL

Prioritise risks that affect safety, legal duties, service access, workload sustainability, repeated exclusion, or single points of failure. Avoid treating individual staff performance as the risk when the underlying condition is organisational.

PART II - GOVERNANCE AND OPERATIONAL CAPACITY | SECTION 3

Governance, Roles, and Decision Authority

CLARIFY WHO LEADS, WHO DECIDES, WHO ACTS, WHO IS CONSULTED, AND WHO ASSUMES THE NEXT STEP

RELATED CLOUD-HED RESOURCES

Professional Boundaries, Confidentiality, and Escalation and **Trauma-Informed Communication and Flexible Teaching** are useful companion resources when clarifying decision ownership, consultation routes and role limits.

Institutional response fails when everyone is expected to help, but no one is clearly accountable. Governance should identify who sets priorities, who owns academic and operational decisions, who provides specialist input, who communicates, who maintains services and who monitors implementation. The objective is not to create a large bureaucracy. It is to prevent concerns from circulating indefinitely or being repeatedly returned to individual educators.

ROLE OR GROUP	CORE RESPONSIBILITIES	DECISIONS THIS GROUP MAY MAKE
Executive or crisis leadership	Set priorities, approve institution-wide measures, allocate resources, and resolve unresolved risks.	Operational status, resource redeployment, institutional exceptions, and risk tolerance.
Programme and department leadership	Translate institutional policy into programme practice and coordinate teaching teams.	Programme-level flexibility, workload redistribution, and progression support.
Educators and academic advisers	Maintain learning structure, communicate, use approved academic options, and refer concerns.	Course-level adjustments within policy and academic next steps.
Student support and wellbeing services	Provide support in accordance with the remit and manage referrals within the professional scope.	Support planning, service referral, follow-up, and closure criteria.
Accessibility or disability services	Coordinate reasonable accommodation and accessible formats.	Formal accommodations and accessibility recommendations.
International or mobility office	Support displaced, international, or mobility-affected students and staff within the authorised remit.	Institutional information, mobility support, and referral to qualified legal services.

ROLE OR GROUP	CORE RESPONSIBILITIES	DECISIONS THIS GROUP MAY MAKE
Human resources and occupational support	Address staff workload, leave, occupational wellbeing, and employment support.	Temporary workload measures, staff support routes, and adjustments.
IT and digital learning	Maintain essential platforms, low-bandwidth access, and alternative delivery routes.	Platform priorities, outage communication, and minimum viable digital provision.
Safeguarding or emergency lead	Coordinate urgent safety concerns in accordance with local law and institutional policy.	Escalation, emergency contact, safeguarding action, and inter-agency coordination.
Communications and quality assurance	Maintain one authoritative information source, accessibility, review, and organisational learning.	Message approval, version control, indicators and after-action review.

A simple accountability test

- For every pathway, one role is accountable for ensuring that the next step happens, even when another service acts.
- Each service states what it accepts, how it is contacted, what information it requires and what response time can reasonably be expected.
- Educators are not expected to chase several offices without support when a concern is complex or urgent.
- When responsibility is unclear, there is a named consultation point rather than an informal search for the right person.
- Critical functions have a backup owner, an out-of-office arrangement, and an escalation route.
- Repeated gaps are reported to leadership as institutional risks, not as isolated staff difficulties.

Decision authority levels

DECISION LEVEL	EXAMPLES	ACCOUNTABLE AUTHORITY
Institution-wide	Temporary operational status, institution-wide assessment or attendance changes, emergency measures, resource redeployment.	Executive or crisis leadership
Programme or department	Programme-level flexibility, workload redistribution, progression support, and coordinated teaching adjustments.	Programme or department leadership
Specialist service	Formal accommodation, safeguarding, staff employment measures, specialist support, or case management within remit.	Named authorised service
Educator or adviser	Course-level adjustments are already permitted by policy and routine academic guidance.	Individual educator or adviser

EXPECTED INSTITUTIONAL OUTPUT

A role and decision matrix that names the accountable owner, responsible team, consulted roles, informed groups, backup owner and escalation route for each critical activity.

APPLY THIS SECTION

Use the matrix below to assign ownership, consultation routes, and escalation pathways before a crisis tests them.

QUICK TOOL 3

Role and Responsibility Matrix

ASSIGN ONE ACCOUNTABLE OWNER, IDENTIFY DELIVERY ROLES, AND DEFINE CONSULTATION, INFORMATION, AND BACKUP

ACTIVITY	ACCOUNTABLE OWNER	RESPONSIBLE TEAM	CONSULTED/ INFORMED	BACKUP OR ESCALATION
Institution-wide crisis decisions				
Programme-level academic flexibility				
Course-level academic adjustments				

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ACTIVITY	Staff consultation and support	Safeguarding or urgent escalation	Practical, access or mobility support	Student wellbeing or support referral
ACCOUNTABLE OWNER				
RESPONSIBLE TEAM				
CONSULTED/ INFORMED				
BACKUP OR ESCALATION				

ACTIVITY	ACCOUNTABLE OWNER	RESPONSIBLE TEAM	CONSULTED/ INFORMED	BACKUP OR ESCALATION
Digital continuity and low-bandwidth access				
Leadership communication				
Documentation, monitoring and after-action review				

CHECK BEFORE APPROVAL

Every critical activity should have one accountable owner, a backup, a route for unresolved decisions and a review date. Multiple contributors do not eliminate the need for a single accountable role.

Sustainable Workload, Availability, and Academic Flexibility

SUPPORT LEARNING CONTINUITY WITHOUT TRANSFERRING UNLIMITED, INCONSISTENT, OR INVISIBLE WORK TO STAFF

RELATED CLOUD-HED RESOURCES

Trauma-Informed Communication and Flexible Teaching in the **Educator Toolkit**, **Communicate and Ask for Academic Support** and **Learn with Disrupted Access** in the **Student Toolkit** can be used alongside this section. Student-facing guidance on communicating academic difficulty can help align flexibility with realistic expectations.

Academic flexibility can protect learning continuity, but it also creates additional work and may generate inequity when decisions depend on individual negotiation. No institutional policy should promise flexibility without identifying who will perform the additional work, how much time it requires, what authority is needed, and what other work will be reduced, reassigned, simplified, or resourced.

LEVEL	EXAMPLES	REQUIRED INSTITUTIONAL RESPONSE
Educator-managed	Short extensions, alternative participation, or minor adjustments are already permitted by policy.	Educator records the academic decision and uses standard options.
Programme-managed	Repeated extensions, temporary study plans, substantial assessment changes, or progression concerns.	Programme leadership coordinates consistency and workload.
Formal accommodation	Disability-related or other formally assessed access needs.	Authorised accessibility or equivalent service.
Safeguarding or emergency	Immediate safety, abuse, violence, or serious risk concerns.	Approved urgent procedure; not managed as routine academic flexibility.
Institution-wide disruption	Large-scale closure, outage, conflict, disaster, or system-wide interruption.	Institutional decision and coordinated communication.

Availability standards

- Define the official channels for course questions, support requests and urgent concerns, and state which channels should not be used.
- Publish realistic response-time expectations for normal periods and high-disruption periods.

- State clearly that educators are not 24/7 crisis contacts and are not substitutes for emergency or professional services.
- Provide an out-of-hours route where one exists; do not imply that a service is available when it is not.
- Use shared inboxes, duty rotas, central triage, or delayed-send practices when demand is high.
- Protect staff from being penalised for following approved availability boundaries.

Workload safeguards

- Recognise and account for additional work. Course redesign, repeated communication, referral, documentation, coordination, and emotional labour all require time and must be included in workload planning.
- **Simplify before adding**. Identify tasks, approvals or reporting requirements that can be paused, combined or removed.
- **Use standard options**. Provide a small set of approved alternatives rather than requiring a new solution for every case.
- **Redistribute capacity**. Use cover, administrative assistance, reduced duties, additional staffing, or shared responsibilities where available.
- **Set triggers**. Define when demand, absence, service failure, or repeated cases require programme or institutional intervention.
- **Review fairness**. Check whether flexibility is consistent, pedagogically purposeful, and accessible across courses and departments.

Minimum institutional standards

- Published flexibility principles and decision levels.
- Standard academic options for common disruption-related needs where pedagogically appropriate.
- A route for repeated, complex, formal-accommodation or progression-related cases.
- Response-time and communication-channel standards for staff and students.
- A process for temporary workload reduction, redistribution, or additional support.
- A non-punitive route for staff to raise workload and availability concerns.
- Defined triggers for reducing, reassigning, postponing, or suspending non-essential work.
- Protected leave, recovery time, and non-working hours during and after disruption.
- A requirement to review repeated overtime, service saturation, absence, turnover, and unresolved workload complaints as organisational indicators.
- A clear statement that compassion does not require unlimited availability or abandonment of academic structure.

EXPECTED INSTITUTIONAL OUTPUT

A published academic flexibility and availability standard that defines decision levels, approved options, workload safeguards, communication channels and escalation triggers.

APPLY THIS SECTION

Use the template below to turn flexibility, availability and workload protection into visible institutional standards.

QUICK TOOL 4

Workload, Flexibility, and Availability Template

MAKE ACADEMIC OPTIONS, COMMUNICATION EXPECTATIONS, AND CAPACITY PROTECTIONS VISIBLE

A. Official communication and availability

Enter a concrete, locally approved standard rather than a general intention. Where relevant, include the responsible office or role, a response time or threshold, and a fallback route. Example: "Course queries are answered through the LMS within two working days; the programme office is the fallback."

ITEM	AGREED INSTITUTIONAL STANDARD OR REQUIREMENT
Official course channel	
Official support-request channel	
Channels not monitored	
Normal response standard	
High-disruption response standard	
Out-of-hours route and limits	

B. Academic decision levels

List only options already authorised by policy. Name the decision owner and the minimum documentation required.

DECISION LEVEL	APPROVED OPTIONS	OWNER/REQUIRED DOCUMENTATION
Educator-managed options		
Programme-managed options		
Formal accommodation route		
Institution-wide disruption decisions		

C. Workload safeguards and triggers

State the trigger and the action it activates. Avoid vague wording such as “as needed”; name the review owner and date.

ITEM	INSTITUTIONAL DECISION
Tasks that may be paused or simplified	
Administrative, staffing or teaching support available	
Trigger for workload redistribution or reduced duties	
How will additional work be recognised	
Review owner and date	

PART II - GOVERNANCE AND OPERATIONAL CAPACITY | SECTION 5

Referral, Escalation, and Service Continuity

CREATE ROUTES THAT REMAIN VISIBLE, USABLE, AND FUNCTIONAL WHEN PEOPLE ARE UNDER PRESSURE.

RELATED CLOUD-HED RESOURCES

The **Prepare–Look–Listen–Link guidance** in the **Educator Toolkit** supports frontline decision-making. Student-facing help-seeking and crisis-planning materials can reinforce how and when learners should use the institutional route.

Referral is not a list of web links. A functional pathway tells people what type of concern belongs where, how to make contact, what information is required, how quickly a response may occur, what the referring person should do next, and what happens when the service is closed, overloaded, or unavailable. It should be easy to use without specialist knowledge of the institution.

CONCERN CATEGORY	EXAMPLES	LIKELY ROUTE
Academic	Attendance, deadlines, assessment, progression, or learning continuity.	Educator, programme leadership, academic advising, or registrar, according to the decision level.
Practical and accessible	Connectivity, devices, disability, language, finance, housing, mobility, or documentation.	Accessibility, IT, financial, international, or student support services.
Wellbeing and support	Distress, significant difficulty functioning, or a request for psychosocial support.	Approved wellbeing, counselling, health, or community service according to remit.
Urgent, safeguarding or immediate danger	Self-harm or suicide concern, abuse, violence, immediate danger, or other reportable risk.	Local safeguarding and emergency procedure: do not manage through routine referral.

LEVEL	EXAMPLES	INSTITUTIONAL ACTION
Routine	No immediate safety concern. Use the standard service route and published response expectations.	Provide the verified route and clarify the next academic or practical step.
Priority	The concern is escalating, significantly affecting participation, or is repeatedly unresolved.	Use the priority consultation or escalation route and identify a follow-up owner.
Immediate	There is immediate danger, a safeguarding duty, or another urgent risk under local procedure.	Use approved emergency or safeguarding action without delay. Do not investigate independently.

Minimum pathway information

- Concern category and examples in plain language.
- Primary service or responsible role, verified contact method, and operating hours.
- Eligibility, language, accessibility, geographic, or jurisdictional limitations.
- Whether students or staff may contact the service directly.
- Minimum information required and what should not be shared unnecessarily.
- Expected acknowledgement or response time and what to do while waiting.
- Out-of-hours, urgent and fallback route.
- The role that owns follow-up and how responsibility is transferred.
- The date the information was verified and the owner responsible for updates.

Service continuity and fallback

- Identify a secondary route for closure, absence, overload, platform failure, or out-of-hours periods.
- State what happens when a referral is not accepted or is returned without action.
- Provide alternative access for remote, displaced or cross-border students where possible, while stating jurisdictional limits.
- Use a single process for communicating service changes across staff and student channels.
- Review whether one person, one mailbox, or one platform creates an unacceptable single point of failure.

TRANSFER OF RESPONSIBILITY

A referral is not complete merely because a contact was sent. The institution must clarify who owns the next step, whether the receiving service acknowledges the referral, and what follow-up is expected.

EXPECTED INSTITUTIONAL OUTPUT

A verified referral, escalation and service-continuity map with service remit, access information, response expectations, fallback routes, follow-up ownership, and review dates.

APPLY THIS SECTION

Use the map below to verify routes, fallback options, and follow-up ownership with service leads before publication.

QUICK TOOL 5

Referral, Escalation, and Service Continuity Map

VERIFY EACH ROUTE WITH THE SERVICE OWNER BEFORE PUBLICATION

CONCERN/ SERVICE	PRIMARY ROUTE AND CONTACT	ACCESS, HOURS, AND EXPECTED RESPONSE	FALLBACK/ OUT-OF-HOURS	FOLLOW-UP OWNER/ REVIEW
Academic support				
Accessibility or disability				
Digital access or IT				

CLOUD HED

CONCERN/ SERVICE	Safeguarding or urgent concern	Wellbeing or counselling	International, mobility or legal-information support	Financial, housing or practical support
PRIMARY ROUTE AND CONTACT				
ACCESS, HOURS, AND EXPECTED RESPONSE				
FALLBACK/ OUT-OF-HOURS				
FOLLOW-UP OWNER/ REVIEW				

CONCERN/ SERVICE	PRIMARY ROUTE AND CONTACT	ACCESS, HOURS, AND EXPECTED RESPONSE	FALLBACK/ OUT-OF-HOURS	FOLLOW-UP OWNER/ REVIEW
Staff occupational or wellbeing support				

Verification questions

- Does the service accept this type of concern, and can the intended user contact it directly?
- What minimum information is required, and what information should not be shared?
- What happens when the service is closed, overloaded, unavailable, or outside its jurisdiction?
- How is receipt acknowledged, and who owns the next step?
- When was the route last verified, and who updates it?

PART II - GOVERNANCE AND OPERATIONAL CAPACITY | SECTION 6

Leadership and Institutional Communication

REDUCE UNCERTAINTY, CLARIFY PRIORITIES, AND CONNECT MESSAGES TO OPERATIONAL CAPACITY.

RELATED CLOUD-HED RESOURCES

Trauma-Informed Communication and Flexible Teaching offer practical wording that can be adapted for institutional updates, class-level messages and referral notices.

Leadership communication directly shapes workload, trust, and institutional safety. During disruption, staff and students need clear information about what has changed, what remains unchanged, what they are expected to do, what can wait, where help is available, and when the next update will come. Messages that emphasise care while ignoring workload, capacity, or decision authority can increase moral pressure and confusion.

SUPPORTIVE COMMUNICATION IS	INSTITUTIONAL MEANING
Clear	Uses plain language and distinguishes confirmed information from uncertainty.
Coordinated	Uses one clearly identified authoritative information source and avoids contradictory instructions from different offices.
Prioritised	Identifies the immediate priority rather than presenting every issue as equally urgent.
Operational	Connects the message to decisions, responsibilities, services, and available capacity.
Workload-aware	States what is paused, simplified, reduced, or postponed to protect capacity.
Accessible	Uses accessible formats, necessary languages, and low-bandwidth alternatives.
Time-bound	States when and where the next update will be issued.

Seven-part message structure

1. Acknowledge the situation and who may be affected.
2. State the decision or current operational status.
3. Identify the immediate priority.

4. Clarify what staff and students are expected to do.
5. Identify which activities, deadlines, reporting requirements, or services have been reduced, postponed, simplified, or temporarily suspended to protect staff workload and essential institutional capacity.
6. Provide support contacts, service limits and escalation routes.
7. State when and where the next update will be issued.

Communication across phases

PHASE	COMMUNICATION REQUIREMENT
Before disruption	Publish official channels, decision authority, service routes, availability standards, and update procedures.
During disruption	Provide concise operational updates, current priorities, changed services, required action, and next update time.
Transition or recovery	Explain what resumes, what is still adapted, which temporary measures end, and where unresolved needs go.
After action	Share system improvements, responsibility for follow-through, and the date of the next review without exposing personal information.

Message approval checklist

- Is there one accountable message owner and one clearly identified authoritative information source?
- Does the message distinguish decisions from recommendations and unresolved questions?
- Does it state what people must do, what they do not need to do and what can wait?
- Are support contacts verified and are service limits described accurately?
- Have accessibility, translation, and low-bandwidth access been considered?
- Does the message avoid promises the institution cannot operationally sustain?
- Are the next update date, channel, and responsible office clear?

EXPECTED INSTITUTIONAL OUTPUT

A message-review process and reusable template that connects every crisis communication to a decision owner, required action, capacity protection, verified support routes, and next update.

APPLY THIS SECTION

Use the checklist and template below before sending any crisis-related institutional message.

QUICK TOOL 6

Leadership Communication Checklist and Template

USE BEFORE SENDING A CRISIS-RELATED MESSAGE TO STAFF OR STUDENTS

- ☐ One accountable message owner and one clearly identified authoritative information source identified
- ☐ Situation and operational status described accurately
- ☐ Immediate priority stated
- ☐ Required action and audience clarified
- ☐ Tasks or expectations that are reduced, paused, or postponed stated
- ☐ Verified support contacts and service limits included
- ☐ Accessibility, language, and low-bandwidth format checked
- ☐ Next update date, channel, and responsible office stated

Draft message

MESSAGE ELEMENT	DRAFT WORDING
1. Acknowledge the situation	
2. State the decision or status	
3. Name the immediate priority	
4. Clarify required action	
5. State what is reduced or postponed	
6. Provide support and escalation routes	
7. State the next update	

Staff Wellbeing, Burnout Prevention, and Organisational Response

PREVENT AND RESPOND TO WORK-RELATED PSYCHOSOCIAL RISK THROUGH WORKLOAD ACTION, SAFE BOUNDARIES, CONSULTATION, AND LEADERSHIP ACCOUNTABILITY.

RELATED CLOUD-HED RESOURCES

Use **Educator Wellbeing, Stress and Burnout Prevention** and **Peer Consultation and Collegial Support** for individual recognition and educator-level practices. Use the Psychological Skills Library only as an optional complementary resource. Institutional action on workload, staffing, work design, and recovery remains mandatory and cannot be replaced by individual self-help.

Staff wellbeing is not sustained through personal resilience alone. In crisis-affected higher education, educators and support teams may face repeated course redesigns, infrastructure disruptions, increased communication demands, student distress, moral pressure, staff shortages, and expectations of continuous flexibility. When these demands continue without sufficient time, authority, staffing, recovery, or organisational support, the risk is institutional, not merely individual. Burnout prevention begins with the design of work.

INSTITUTIONAL DUTIES: PREVENT, MONITOR, ACT, SUPPORT, AND REVIEW

- **Prevent.** Assess foreseeable workload and psychosocial risks, including chronic overload, continuous availability, unclear roles, staffing gaps, unsupported emotional labour, and insufficient recovery.
- **Monitor.** Review aggregated organisational indicators such as overtime, unused leave, sickness absence, turnover, vacancies, service waiting times, repeated workload complaints, and work outside agreed hours.
- **Act.** Reduce, redistribute, postpone, simplify, or resource work when demand exceeds safe capacity; do not make counselling or resilience training the only response.
- **Support.** Provide voluntary confidential occupational, counselling, employee-assistance, professional consultation, and peer-support routes with clear boundaries.
- **Protect.** Establish working-time boundaries, leave protection, recovery after acute disruption, or critical incidents, and non-punitive routes for raising concerns.
- **Escalate.** Treat repeated overload, burnout-related absence, service saturation, and unsafe workload as institutional risks requiring leadership decisions.
- **Review.** Assign corrective actions, accountable owners, resources, deadlines, and follow-up; examine whether policy or work design must change.

NON-SUBSTITUTION PRINCIPLE

Access to counselling, wellbeing workshops, self-help resources, or peer support does not discharge the institution's responsibility to address workload, staffing, role clarity, unsafe availability expectations, or harmful organisational practices.

Match the need to the appropriate route

NEED	APPROPRIATE ROUTE
Uncertainty about role, referral, or documentation	Professional or case consultation with a named institutional contact.
Personal impact, distress, or health concern	Confidential occupational, employee support, or professional wellbeing service.
Repeated workload or system problem	Management and institutional escalation with evidence, an immediate workload decision, and a required corrective-action review.
Urgent safety or safeguarding concern	Approved safeguarding or emergency route, not an informal peer discussion.
Post-incident operational learning	Structured after-action review focused on systems, responsibilities, and improvement.

Brief consultation sequence

1. State the situation briefly and factually, removing unnecessary identifying details.
2. Identify whether the issue is primarily academic, practical, wellbeing-related, safeguarding-related, or urgent.
3. Clarify what has already been done and what remains uncertain.
4. Separate what belongs to the educator, programme, specialist service, or institution.
5. Agree on one immediate action, including what will be reduced, reassigned, delayed, simplified, supported, or escalated; name one owner and one timeframe.
6. Check whether workload adjustment, cover, leave, recovery, follow-up, or voluntary confidential wellbeing support is required.
7. Record only what policy requires and report repeated system gaps to leadership.

After a difficult or critical situation

Institutions should avoid compulsory psychological debriefing or the forced recounting of distressing details. A safer response is to offer practical follow-up, clear information, voluntary support, workload adjustment, access to professional services, and a structured operational review. The needs of the individual staff member should be distinguished from the need to improve institutional procedures.

INSTITUTIONAL WARNING SIGN

If staff repeatedly feel solely responsible for student safety, work outside approved hours, avoid contact because interactions feel overwhelming, or cannot find a service that accepts referrals, this is not only an individual wellbeing concern. It is evidence that the institutional system requires action.

EXPECTED INSTITUTIONAL OUTPUT

A staff consultation and support protocol that separates professional advice, confidential wellbeing support, workload action, urgent escalation, and organisational learning.

APPLY THIS SECTION

Use the protocol below for brief professional consultation and to separate system action from personal support.

QUICK TOOL 7

Organisational Wellbeing and Burnout Prevention Review

ASSESS WHETHER PREVENTION, WORKLOAD ACTION, SUPPORT, ESCALATION, AND FOLLOW-UP ARE OPERATING IN PRACTICE.

REVIEW ITEM	EVIDENCE, GAP, OR REQUIRED ACTION
Staff can raise workload concerns without penalty	
Crisis-related additional work is counted in workload planning	
Working-time and response boundaries are published and enforced	
Managers can reduce, reassign, simplify, or postpone duties	
Triggers for organisational workload review are defined	
Leave and recovery periods are protected	
Confidential occupational and professional support is available	

Support check

REQUIRED DECISION	OWNER / ACTION / DATE
What immediate workload action is required?	
What preventive system change is required?	
Does the issue require management, HR, safeguarding, legal, occupational health, or emergency escalation?	
What confidential support should be offered voluntarily?	
What aggregated organisational indicator should be reviewed?	

Student Wellbeing, Accessibility, and Inclusive Participation

DESIGN ACADEMIC SYSTEMS AND SUPPORT ROUTES THAT REDUCE DISTRESS AND EXCLUSION ACROSS DIFFERENT ACCESS CONDITIONS

RELATED CLOUD-HED RESOURCES

The **Student Toolkit** can support accessibility review by showing where learners need plain-language guidance, multiple formats and visible routes for help. Relevant educator resources include low-bandwidth teaching and inclusive communication prompts.

Student wellbeing is not only the responsibility of counselling services. Academic workload, assessment design, communication, administrative procedures, accessibility, and continuity arrangements can either reduce or intensify distress. A pathway is not accessible merely because it exists. Students and staff may be unable to use it because of disability, language, limited bandwidth, device constraints, electricity or network outages, damaged or inaccessible buildings, displacement, unsafe travel, checkpoints or movement restrictions, changing location, time-zone differences, caring responsibilities, financial barriers, uncertainty about legal or residency status, fear of stigma, or previous negative experiences with institutions.

DIMENSION	INSTITUTIONAL QUESTION	POSSIBLE RESPONSE
Connectivity and devices	Can essential information and support be accessed on a phone, or over a low-bandwidth connection?	Text-based pages, downloadable files, transcripts, asynchronous, phone, or offline alternatives.
Disability and access needs	Are documents, forms, videos, websites, and contact methods accessible?	Accessible structure, captions, alt text, keyboard access, plain language, and accessibility-service review.
Language	Can users understand policies, urgent information, and service limits?	Plain language, translation of essential information, and interpreter routes where available.
Time zones and disrupted routines	Do live-only services exclude people in other regions or with unstable schedules?	Asynchronous contact, clear response windows and alternative appointment routes.
Displacement and mobility	Can support be used outside the institution's normal jurisdiction or country?	Clear limits, verified external routes, international office coordination, and remote academic options.
Financial and practical barriers	Are recommendations realistic when transport, documents, housing, or funds are unavailable?	Practical support pathways, fee clarity, remote options, and coordination with financial or social support.

DIMENSION	INSTITUTIONAL QUESTION	POSSIBLE RESPONSE
Caring responsibilities	Do attendance, deadlines, and appointments assume uninterrupted time?	Flexible scheduling, staged work, recorded information, and programme-level planning.
Privacy and stigma	Can people seek information without immediately disclosing sensitive details?	Self-referral information, confidential routes, minimal initial data, and transparent privacy statements.
Cultural and institutional trust	Do services clearly explain what they are intended for, what they are not intended for, who may use them, and what happens after contact?	Transparent descriptions, meaningful choice where possible, and clear confidentiality limits.
Clear and intuitive navigation	Can users find and access support without prior knowledge of institutional structures, internal terminology, or administrative procedures?	Intuitive navigation, plain-language labels, one central support page, consistent terminology, and a human first-contact route.
Digital access and confidence	Can users access support with limited digital skills, older devices, or assistive technologies?	Simple interfaces, low-bandwidth alternatives, step-by-step instructions, accessible formats, and telephone or in-person alternatives where feasible.

Visibility standard

- Place the main support map in the LMS, student portal, programme handbook, and staff quick-reference materials.
- Use the same service names, categories, and urgency language across institutional pages.
- State who can use each service, how to contact it, operating hours, expected response, accessibility, and any costs or eligibility restrictions.
- Provide a low-bandwidth and printable version and translate essential information where required.
- Avoid requiring people to navigate several organisational structures before finding the correct contact.
- Include a clear urgent-help route while distinguishing it from routine academic or wellbeing support.
- Review information at a defined interval and after any staffing, service, platform or policy change.

DO NOT EXPECT USERS TO DIAGNOSE THE SYSTEM

Students and staff should not need to know whether their situation falls under counselling, academic advising, accessibility, safeguarding, financial aid, human resources, or another office before they can ask for help. A visible first-contact or triage route reduces wrong referrals and repeated retelling.

EXPECTED INSTITUTIONAL OUTPUT

An accessible institutional support page and review checklist that account for language, disability, connectivity, device, location, time zone, financial, privacy, and trust barriers.

APPLY THIS SECTION

Record the main access barriers, excluded user groups and urgent fixes now, then transfer them into the Localisation, Implementation and Review Planner in **Section 10**.

Privacy, Documentation, and Safeguarding

USE ONLY THE INFORMATION NECESSARY AND DEFINE LAWFUL LIMITS BEFORE CONCERNS ARISE.

RELATED CLOUD-HED RESOURCES

Professional Boundaries, Confidentiality, and Escalation, along with related safety or escalation materials, should be localised with this section so that documentation, confidentiality limits, and reporting duties are aligned.

Documentation can support continuity, accountability, and safety, but excessive or unclear documentation can create privacy risks, discourage help-seeking, and expose sensitive information to people who do not need it. Institutions should define what educators and services record, where it is stored, who can access it, when information may be shared and how long records are retained.

Minimum principles

- **Purpose limitation.** Record information only for a defined academic, support, safeguarding, or legal purpose.
- **Data minimisation.** Collect only what is necessary for the next step; avoid detailed trauma narratives in teaching records.
- **Transparency.** Explain how information will be used, who may receive it, and the limits of confidentiality.
- **Role-based access.** Sensitive information should be available only to authorised people who need it for their function.
- **Secure systems.** Do not store serious concerns in personal notes, private messaging apps, or unsecured shared documents.
- **Factual language.** Distinguish observations, the person's own words, actions taken, and professional interpretation.
- **Retention and deletion.** Follow institutional policy and applicable law rather than keeping records indefinitely.
- **Safeguarding and emergency exceptions.** Define when information may or must be shared without consent because of serious risk or legal duty.
- **Cross-border caution.** Remote or displaced learners may raise issues regarding jurisdiction, data transfer, and service coverage that require specialist advice.

Minimum factual record

INCLUDE WHEN REQUIRED	AVOID UNLESS SPECIFICALLY NECESSARY AND AUTHORISED
Date, time, contact method, and people involved.	Detailed descriptions of traumatic events are not needed for the next step.
The academic or support concern in neutral language.	Diagnostic labels or speculation by non-clinical staff.
The person's own relevant words when exact language affects safety meaning.	Personal opinions about credibility, motivation, or character.
Actions taken, contacts provided, and referrals made.	Sensitive messages are either distributed widely or stored on personal systems.
Any consultation or escalation required by policy.	Promises of complete secrecy or informal agreements outside policy.
The next responsible role and follow-up step.	Unclear notes that leave responsibility with the educator indefinitely.

Safeguarding preparation

- Name the safeguarding lead or equivalent function and specify how staff contact them.
- Define the urgent route during and outside normal operating hours.
- Clarify which concerns staff must report or consult under local policy and law.
- Provide wording for confidentiality limits so staff do not make promises they cannot keep.
- Explain what staff should do when the person is in another country or jurisdiction.
- Ensure staff know that uncertainty is a reason to consult, not a reason to investigate the concern themselves.
- Review pathways with legal, safeguarding, data protection, and relevant professional services before publication.

MANDATORY LOCAL REVIEW

Confidentiality, documentation, emergency, safeguarding, self-harm, suicide, violence, and abuse content must be adapted to local law, institutional policy, professional standards, and data-protection requirements. This toolkit provides an organisational structure, not legal or clinical advice.

EXPECTED INSTITUTIONAL OUTPUT

An approved minimum documentation standard, confidentiality statement, safeguarding route, cross-border procedure, and secure record-management process.

APPLY THIS SECTION

Review confidentiality limits, documentation rules, safeguarding responsibilities, and cross-border issues locally, then transfer the required changes to the Localisation, Implementation, and Review Planner in Section 10.

PART III - IMPLEMENTATION AND ACCOUNTABILITY | SECTION 10

Monitoring, Accountability, and Institutional Learning

MOVE FROM A STATIC DOCUMENT TO ACCOUNTABLE ACTION, ORGANISATIONAL INDICATORS, CORRECTION, AND INSTITUTIONAL LEARNING

Implementation should begin with a small number of high-impact actions, but accountability requires more than assigning owners. Institutions must track whether workload, staffing, support, accessibility, and continuity arrangements are functioning; identify repeated organisational risks; and require corrective action when evidence shows that current conditions are unsafe or unsustainable.

Prioritisation test

1. Is there an immediate safety, safeguarding, legal, or data-protection risk?
2. Is there a role or pathway gap that leaves one person carrying responsibility alone?
3. Is the current workload likely to make the response unsafe or unsustainable?
4. Does the gap affect many people or repeatedly exclude a particular group?
5. Can the institution make a visible improvement within 30 days?
6. Does the action require policy, budget, staffing, procurement, or an external partnership?

Implementation cycle

DIMENSION	MAIN TASK	OUTPUT	REVIEW POINT
1. Map	Identify risks, current services, informal practices, and missing routes.	Current-state risk and service map.	Validate with educators, students, and services.
2. Clarify	Assign owners, decision levels, communication, and escalation standards.	Role matrix, flexibility rules, and availability standards.	Check contradictions and single points of failure.
3. Build	Create referral maps, consultation routes, and accessible support information.	Localised quick tools and contact pages.	Test whether a new staff member can use them independently.
4. Protect capacity	Simplify processes, reduce non-essential work, and define workload responses.	Crisis workload plan and reduction options.	Check whether added tasks have owners and time allocation.

DIMENSION	MAIN TASK	OUTPUT	REVIEW POINT
5. Implement	Approve, communicate, and launch the minimum viable system.	Operational toolkit and named routes.	Collect practical feedback without over-surveying.
6. Review	Analyse access, service gaps, response times, workload, and unresolved ownership.	After-action review and improvement plan.	Assign actions, deadlines, and accountability.

0-30-60-90 day roadmap

PERIOD	INSTITUTIONAL FOCUS
0-30 days	Verify urgent and safeguarding routes; name accountable owners and backups; publish one authoritative information source; identify one task to stop or simplify; and establish a route for urgent workload concerns.
31-60 days	Approve flexibility, availability, workload, and recovery standards; create referral and consultation maps; and address accessibility and documentation gaps.
61-90 days	Review staffing, service capacity, psychosocial risk indicators, policy, data protection, and external partnerships; assign corrective actions and integrate version control.
Ongoing	Review after major disruption, service change, pathway failure, or repeated staff/student feedback; update contacts and tools.

Suggested institutional indicators

- Percentage of key services with verified contacts, operating hours, access information, and fallback routes.
- Time required for staff to obtain a non-urgent consultation when responsibility is unclear.
- Repeated wrong referrals, returned referrals, or pathways that failed to produce a next step.
- Staff-reported clarity of availability, flexibility, role, and escalation expectations.
- Volume of crisis-related academic adjustments and whether workload support was provided.
- Access barriers reported by students or staff, including language, disability, device, location, and time-zone barriers.
- Service interruptions, waiting times and capacity constraints that affect support continuity.
- Leadership messages that required correction because they were inconsistent, inaccessible, or operationally unrealistic.
- Actions completed from after-action reviews and whether owners met agreed timelines.
- Aggregated overtime, unused leave, sickness absence, turnover, vacancies, and work outside approved hours.

- Repeated workload concerns and the proportion that resulted in reduction, redistribution, staffing, or policy action.
- Burnout-related or recovery-related patterns reviewed as organisational risks without collecting unnecessary private health information.
- Time between identification of unsafe workload and an accountable institutional decision.

Do not monitor individual resilience or private mental health. Institutional monitoring should focus on whether systems, services, staffing, workload arrangements, working-time boundaries, and corrective actions are functioning. Use aggregated indicators and collect only information necessary for organisational improvement.

Version control

CONTROL	REQUIRED INFORMATION
Document owner	Office or role accountable for maintaining the toolkit and local contact information.
Approval authority	The body or role that approves institutional use and significant changes.
Publication and review dates	Current version date, next routine review and crisis-triggered review conditions.
Contact verification	Date services, hours, eligibility, emergency and fallback routes were last confirmed.
Change record	Summary of changes, reason, approving role and communication to affected users.
Archived versions	Secure location for superseded versions and retention requirements.

EXPECTED INSTITUTIONAL OUTPUT

A 0-30-60-90-day implementation plan with named owners, evidence, review dates, proportionate indicators, after-action learning, and controlled document updates.

APPLY THIS SECTION

Use the planner below to complete the mandatory localisation review, assign actions and establish document control.

QUICK TOOL 8

Localisation, Implementation and Review Planner

COMPLETE BEFORE INSTITUTIONAL ADOPTION AND AFTER SIGNIFICANT SERVICE OR POLICY CHANGE

A. Mandatory localisation review

AREA REQUIRING REVIEW	RESPONSIBLE OFFICE	STATUS/REQUIRED CHANGE	APPROVAL OR REVIEW DATE
Safeguarding, emergency, self-harm, suicide, violence and abuse procedures			
Legal duties, confidentiality limits, documentation and data protection			
Cross-border learners, jurisdiction, data transfer and service coverage			
Accessibility, disability, language and low-bandwidth requirements			
Service names, eligibility, hours, response times and fallback routes			
Academic regulations for flexibility, assessment, progression and accommodation			
Workload, HR, occupational health and staff-support arrangements			
Approval authority, communications process and version control			

B. 0-30-60-90 day action plan

PERIOD	PRIORITY ACTION	ACCOUNTABLE OWNER	EVIDENCE/ INDICATOR	REVIEW DATE
0-30 days				
31-60 days				
61-90 days				
Ongoing review				

C. Document control

CONTROL	INSTITUTIONAL INFORMATION
Document owner	
Approval authority	
Current version and publication date	
Date contacts were last verified	
Next routine review date	
Events that trigger an earlier review	
Location of archived versions and change record	

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