



THE UNIVERSITY
of EDINBURGH

Student Counselling Service

Annual Report 2016-2017

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Service

The Report

This annual report was produced in December 2017 and cover the academic session from August 2016 to July 2017.

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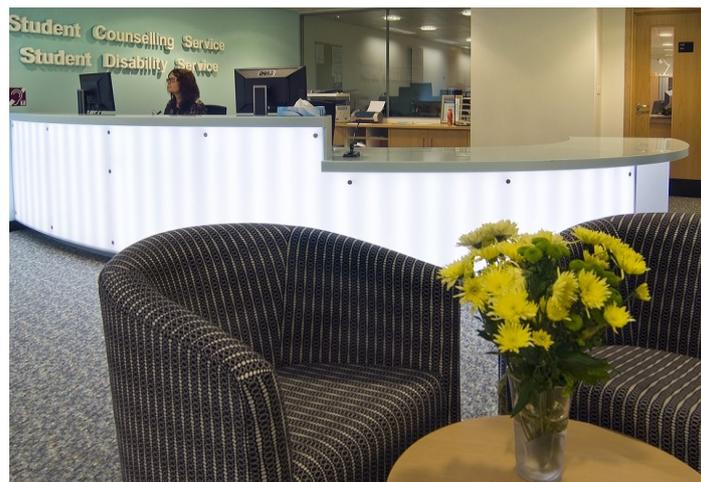
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This report can be provided in alternative formats on request.

Student Counselling Service, Third Floor Main Library

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“People here were very understanding including everyone I crossed paths. And the counselling process was the only reason why I am still here.” (Student feedback)

1. Summary of impact of service activities from the previous academic year

Service priorities for 2016-17 were:

1.1 To fully implement the new service model ensuring the delivery of effective, timely and professional support appropriate for student needs within a brief therapeutic modality.

The current 'Service upon Need' model was fully implemented during 2016-17.

1.2 To deliver the Student Mental Health training programme to PTs and SSTs.

Having been commissioned to develop and deliver the training systematically, the programme was delivered across 15 schools/institutes in all three colleges, Attendance varied from school to school, but 294 academic and student support team staff received the training.

1.3 To reflect on the commendations and recommendations of the 2016 Thematic Review of University mental health services to students

Thematic Review Commendations:

- the progress to date in developing a range of approaches to student wellbeing, including the resources developed to encourage self-management of wellbeing. Self-help, peer support and the promotion of health and wellbeing are clearly receiving high prominence.
- Commendation of those services who deliver mental health services as a core part or as a subset of their remit. The Review Team heard excellent feedback from students and staff.
- Commendation of the Student Counselling Service for the support provided to online distance learning students. The Review Team heard excellent feedback about email counselling and the self-help material provided by the service.
- Commendation of the Helping Distressed Students guide (produced jointly by Student Counselling and Student Disability Services and reviewed/updated annually).

Thematic Review Recommendations:

- To continue to raise awareness of the purpose of SCS among staff and students. Efforts to raise awareness of the purpose of SCS among staff and students are continuing through (a) talks to students at welcome events and staff at induction events (b) through the Student Mental Health Training programme for PTs and SSOs and (c) planned redevelopment of the Service website.

- University mental health services to consider the perceived barriers to students accessing services, and consideration given to ways in which these barriers can be mitigated or removed.

Consideration of perceived barriers to students accessing the Service is already an ongoing part of the Service's work, as is the mitigation of barriers.

(a) Reluctance to seek out support is a complex issue. Although stigma is one barrier, research evidence suggests other, often more common, barriers:

- self-sufficiency i.e. wanting to handle the problem on one's own; a student simply feeling they didn't need 'treatment' or experiencing mild enough problems and finding methods of coping elsewhere

- lack of accessibility including gaining access to treatment in a timely manner
 - confidentiality issues; fear/stress about the act of help-seeking
 - low knowledge about mental health services or scepticism about treatment effectiveness
- (b) The following has already been achieved mitigate or remove barriers e.g.
- Service operates out of six sites across campus, all accessible, with enhanced publicity
 - Extended opening hours
 - Clear online information about Service confidentiality
 - Increased resources aimed at reducing waiting times
- (c) SCS already demonstrates examples of current best practice in overcoming barriers to accessing the service e.g.
- Tiered support (multiple ways of accessing support online/self-help group/workshop/counselling)
 - Response times quicker than NHS services or third sector agencies
 - Partnerships with external agencies
- (d) The Institute for Public Policy Research (IPPR) Report *“Not by Degrees – Improving Student mental health in the UK’s Universities”* (September 2017) comments that the gradual erosion of stigma and improving public attitudes towards mental health, as well as a complex array of societal and economic factors, are contributing to the increasing demand for mental health support among students. Referrals to the Student Counselling Service have increased by 213% over 6 years.

1.4 Ongoing enhancement of online provision via BigWhite Wall and SilverCloud

The Director took the lead, with the support of Legal Services, in renegotiating the contract with Big White Wall, moving to a ‘population model’, significantly reducing the cost and extending the service on an annual basis to the entire student and staff population, and secured the resources to fund this. A pilot of SilverCloud is being reconsidered in view of contract/data protection issues and the experience of lower student uptake in other Russell Group universities.

“I can’t thank the service enough for supporting me at a time where I really needed the help and was not able to care for myself. It provided a safe space where I felt that I could talk about my problems without any judgement,” (Student feedback)

2. Fit with the University’s Strategic Plans

In all that the Service delivers, through brief therapy, psychoeducation, online support and support for staff, it increases student performance, improves retention, promotes resilience, reduces stress, builds employability skills and above all helps keep students safe.

Our activities are intimately linked with Student Experience Services and University Secretary's Group strategic priorities:

- Responding to students as individuals, meeting needs, reaching goals, enhancing skills through developments having most impact on improving student experience. exceptional value for money, a talent for continual improvement and efficiently meeting budget targets
- Providing a high-quality service to the University community
- Further developing and sustaining a responsive service culture
- Pursuing continuous improvement of the Service.

3. Service usage figures

3.1 Summary of key trends:

- Overall Service usage increased marginally to 3,713. This does not include students using online self-help.
- The number of individual referrals for counselling increased by 4.8% to 3002.
- There were 265 attendances at the SLL presentation/workshops, and 448 attendances at the Paws Against Stress therapet events.
- Additional resources allowed for counselling to be delivered from Moray House Lodge two days per week.
- 20 students used email counselling.

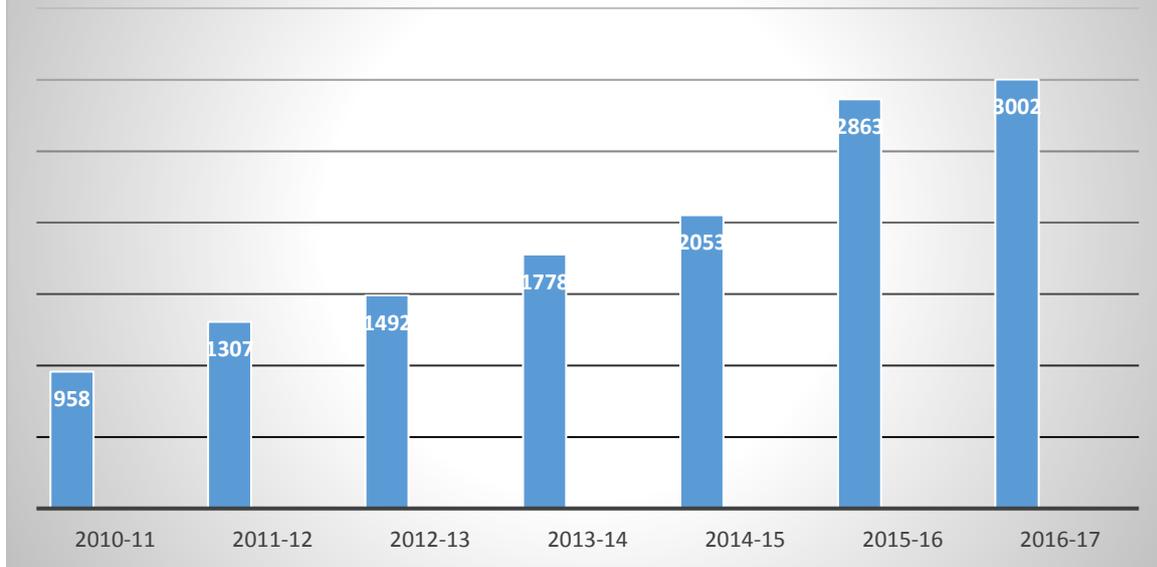
3.2 Overall user population is relatively stable:

- Gender balance male/female 28%/72% - no change
- UG/PG 66%/34% (-2%/+2% from 2015-16)
- 5% change PGT/PGR 69%/31% (3% increase in the University PGT population)
- Slight decrease in proportion of UK students 58% (-2%) EU 17% (+1%) and overseas 25% (+1%) though the balance changes for attendance at SLL events - 33% UK; EU 28%; Overseas 39%

581 students with disabilities referred for counselling (a 5.25% increase on 2015-16, and 19.5% of all service users) i.e. 14% of the all students declaring a disability to the University. 7% of service users declared a learning difficulty and 7% declared a mental health condition as a disability.

“It is a great comfort to be able to turn to someone professional who can understand and help you understand your problems and get to know yourself better. It has been a life changing experience.” (Student feedback)

Individual referrals 2010-11 -2015-16



The main issues students presented with remained the same: anxiety 28% (-1%); depression 18.5% (-1.5%); self and identity 12% (-1%); relationships 10%; academic 9% (+1%).

The top five sources of referrals remain consistent: website 32%, School/PT/SSO 26%, GPs 15% (-1%), friends 14% (+1%) and Advice Place 5% (-1%).

3.3 Student Mental Health Coordinator (SMHC)

SMHC activity	2016-17	2015-16
Students assessed	53	60
Support sessions provided	199	198
Students seen urgently without appointments	4	13

3.4 Failed Appointments

As a result of concerted action there was a reduction in the number of failed appointments from 14% to 8.8%. This is well below the sector average of 24%. 1172 appointments failed i.e. could not be used because students did not attend appointments that they had confirmed, or cancelled so late that the appointment could not be offered to another student. This cost in resource is equivalent to the loss of one full time counsellor, or an additional 235 students could have been assessed and had counselling completed. We hope to reduce the failed appointment rate by pursuing a 'nudge approach' in our communications with students: "Help us to help you, and help other students".

4. Innovations and successes

Following the outcome of the change in the model of delivery from March 2016, and in view of the likelihood that demand would continue to increase, these changes were further developed into a 'Service Upon Need' model for 2016-17. The emphasis is on offering students timely, evidence based support through (a) immediate access online self-help (b) guided self-help support via SLL programme and online tools (e.g. Big White Wall) and (c) brief therapy (normally up to four sessions, with a maximum of 10). Options (a) and (b) need to be seen as valid in themselves, and not merely to fill the gap until individual counselling can be arranged. The model aims to address what students need rather than necessarily what students want. After assessment students are given a note of the outcome including recommendations for other accessible supports, so that no student needs to be without support even if they are waiting for a counselling appointment. This note can also be used for 'lesser weight' evidence for the Special Circumstances Policy. The developments to the Skills for Life and Learning programme were extended into the revision and exam period.

"This has been the best counselling I have ever received. I am more equipped to deal with any issues after 4 sessions that I have ben from 9 prior years of counselling elsewhere."
(Student feedback)

5. Business process developments/new ways of working

Website Development – in collaboration with Student Systems, our website is being redesigned to help managing expectation, encouraging appropriate use of immediate access online self-help, guided self-help/psychoeducation as well as one to one therapy.

Big White Wall Resource was secured to provide the service into 2017-18, and extend its use to unlimited access on an annual basis for all students and staff of the University.

During 2016-17, the Student Mental Health Coordinator undertook training in **Interpersonal Psychotherapy for Acute Crisis** (a four session model of therapeutic intervention for students who are actively suicidal) to be offered 2017-18 and also added to our capacity to deliver CBT over the summer vacation period.

6. User communications & feedback

During 2016-17 our primary focus was on addressing our priorities in the context of a continual rise in demand. We focussed our evaluations on Service and SLL programme evaluation, as well as reflecting on the feedback from ESES and ISB. At reducing waiting times while maintaining or improving satisfaction outcomes, and clinical outcomes.

Service Evaluation summary	2016-17	2015-16
Satisfaction with service (reception, waiting areas, interaction with staff, accessibility and discreetness)	99%	99%
Satisfaction with service publicity	97%	98%
Percentage of students reporting waiting time for initial appointment as “too long”	16%	15%
Percentage of students reporting waiting time for counselling as “too long”	28%	43%

There is consistently high satisfaction rate with accessing the Service, contact with staff, and publicity, with only 3% of users considering the service is not well publicised. The dissatisfaction with waiting times demonstrates the importance of addressing response times, although the detail often reveals unrealistic expectation of some students.

SLL programme evaluation There were 265 student attendances, 97.5% rated the content and style as good; 96% would recommend the workshops to other students. The feedback from students on the PAWS events remains very positive.

International Student Barometer

ISB Survey wave	Autumn 2014	Autumn 2015	Autumn 2016
Support satisfaction Student Counselling	91%	81%	80%

There was little by way of open text comments on the ISB that gives clear feedback as to the declining level of satisfaction, other than the perception of waiting times, in the context of a 61% increase in demand between 2014 and 2016.

“I think that the Service is a really important part of what the University does and without it I don’t know if I would have come back after summer.” (Student feedback)

7. Service reputation/esteem measures

The Service has been a BACP Accredited Service since March 2006. Our application for reaccreditation was submitted in March 2016 and was successful. Our Accreditation now runs until March 2021. BACP service accreditation is a recognised quality standard for organisations providing counselling and psychotherapy services, demonstrating that they offer an accountable, ethical, professional and responsive service to clients, staff and stakeholders. The scheme sets the benchmark for high quality service delivery.

The Director serves on the Heads of University Counselling Service (HUCS) Executive, is now Chair of HUCS Scotland, and is a member of the Association for University and College Counseling Center Directors.

8. Analysis of service monitoring and achievement of service levels

The Service KPIs are related to the student experience and are common in the sector. They are based on (1) Student evaluations: Service Evaluation and ISB (see above) (2) Response times (3) Effectiveness/impact – CORE outcomes and (4) Effectiveness/impact - CIAO survey.

Response times: offer of appointments	Referral to Assessment		Assessment to counselling	
	2016-17	2015-16	2016-17	2015-16
1 week	63%	70%	33%	31%
2 weeks	20%	22%	20%	18%
3 weeks	13%	6%	9%	6%
4 weeks	3%	1%	9%	3%
4+ weeks	1%	1%	29%	42%

Although 83% of students were offered a 50 minute assessment appointment within 2 weeks (-9%) of referral, 71% were offered a counselling appointment within 4 weeks of assessment (+13%), and of these 53% within two weeks. The factors influencing these response times were:

- Individual referrals increased by 4.8% (average number of referrals during semester time was 90 per week c.f. 75 in 2015-16).
- Student availability – limited by timetable or personal choice
- Winter vacation - most students away for three to four weeks
- Flexible Learning Week – many students do not make themselves available
- Failed appointments – see above
- Recruitment lag – during 2016-17 we had to recruit 11 new p/t counselling staff

“Fast, efficient and effective. In the best possible way it has made feel like I don’t need to come back” (Student feedback)

CORE (Clinical Outcomes Routine Evaluation)

Year	2014-15	2015-16	2016-17
Overall Recovery and improvement	68%	68%	66%

A similar statistical variation occurred in 2012-13. The recovery and improvement rate for students in the clinical population was 70%. The IPPR report indicates a general recovery and improvement rate of students using university counselling of 63%, 49% of those in the clinical population, based on academic studies.

CIAO (Clinical Impact on Academic Outcomes)

"To what extent would you say that counselling..."	2016-17	2015-16
helped you stay at University?	78%	76%
helped you do better in your academic work?	74%	77%
improved your overall experience of University?	85%	87.4%
helped you develop skills that might be useful in obtaining future employment	85%	87.6%

9. Income Generation

Income generated during 2016-17 was as follows:

Vet School	£7,121
Supervision (all)	£1,570
Net income from Training Day	£ 190
Donations	<u>£ 176</u>
	<u>£9,057</u>

10. Partnerships/shared services particularly working with Schools and Colleges (include any other relevant external partnerships).

10.1 Internal collaboration supporting service delivery:

- Activities raising awareness of the Service with Schools and Induction team at induction and welcome week events
- Collaboration in general, consultation and referral with other SES services, Residence Life and the Advice Place
- Specific input to the Study Abroad team, informing and promoting support for students continued into 2016-17
- Input to specific programmes in the School of Education, the Dental Institute and Edinburgh Centre for Professional Legal Studies, and the Moving On Course with COL
- Service level agreement with the Royal (Dick) Vet School for counselling at EBVC and non-managerial supervision
- Delivering the Student Mental Health Training programme
- Input to EUSA's Peer Support training and the Mental Health and Wellbeing week
- Contributing both to the planning of the Mental Health and Wellbeing week with EUSA and delivering specific events during the week.
- Presenting to CSE Heads of Schools and Directors of Professional Services
- College Support for Study panels
- Student Mental Health Strategy Implementation Group
- Mental Health Sub Group, Student Disability Committee
- Consultation and advice for staff through the Duty Manager system

10.2 External collaboration

- Liaison with Senior GPs at University Health Centre
- Facilitating the NHS Stress Course to be on campus
- Communication, information sharing and referral pathways with NHS Lothian

- Lead service for the University with BigWhiteWall
- Collaboration with Canine Concern Scotland Trust for therapy events
- Liaison with the Ten for Ten network of counsellors in Edinburgh (offering low cost counselling to students)

11. External reference points/benchmarking (for example best practice outside the sector)

The Service works to the BACP's *Ethical Framework for the Counselling Professions*, and the BACP Universities and Colleges *Good Practice Guidelines*. Attendance during the year at the UUK Mental Health and Wellbeing in Higher Education Conference, the AMOSSHE conference and meetings of HUCS and HUCSS, allows for reflection on and contribution to best practice in the sector. The HUCSS June meeting included a delegation of Heads of Counselling services from four Irish HEIs. Participation in the AUCCCD international conference has informed developments in relation to building resilience. There were no HUCS or Russell Group benchmarking activities during 2016-17.

12. Staff Development Activity

The Service's Training and Development policy meets our BACP Service Accreditation criteria, and is applicable to all our staff. In addition to on-going training opportunities offered by the University to staff in general, the service undertakes to arrange training for both counselling and administrative staff. BACP Accredited Counsellors are required to undertake 30 hours CPD per year, and our training policy supports this. Training activities for 2016-17 included the Service Training Day on ***Assessment for Short Term Counselling in Higher Education***. This was very successful with over 40 participants from our own service and counsellors from 10 other Scottish HEIs.

Once a month counsellors have an opportunity to meet in small groups to discuss clinical issues. All counsellors have clinical supervision to a minimum of 1.5 hours per month as a professional requirement, and regular case load management support. The Service held two half-day review meetings (September and January) and a review day in May. These provide an opportunity for staff to reflect on the work of the service, consider policy and procedures and share best practice. The support offered to our counsellors in training is an example of best practice as recommended by BACP. We had three counsellors in training during 2016-17.

"I really can't thank the service highly enough. My experience has been brilliant from start to finish and I have felt looked after and cared for during a very difficult time." (Student feedback)

13. Risk Analysis (risk of under/non-performance, over delivery)

The most significant risk to achieving service goals remains that demand continues to rise over our capacity and resources to meet the demand. If Service goals were not achieved then ultimately the risks for both users and the University are: risk to students' safety; risk to students' academic failure/retention; risk of students' deteriorating mental health which could ultimately lead to both of the above; risk of diminishing the student experience and student satisfaction and the consequent reputational, compliance and financial risk to the University.

The Service's triage approach pre and post initial assessment ensures that students in crisis or at risk are seen promptly. The Service liaises with SSTs, Residence Life, GPs, MHAS, and NHS Primary and Secondary Care Services as appropriate. Referral forms are reviewed daily by the clinical management team who take into account additional information concerning risk or concern from staff, parents or others. The initial assessment is an assessment of the student's mental health needs, explores the suitability of brief therapy, and the outcome may be a range of supports, whether counselling and/or other supports or services. Students at risk are prioritised for ongoing counselling appointments. The Service does not offer drop in sessions as such. However, the Duty manager system, with one of the clinical management team on duty each day, and the SMHC, mean that students who present without appointments but needing to be seen as a matter of urgency can be responded to quickly, sometimes immediately, usually on the same day.

From the CIAO survey for 2016-17, 324 students described counselling as being a very important, or the most significant, support in helping them stay at University. At a minimum estimate, counselling saved the University £2,916,000 from potential loss of fees and SFC funding.

The ongoing challenge for the Service remains the same: to respond to increasing demand that continues to outstretch resources, and to offer interventions that are evidence based, meet students' needs, and that students are willing to engage with. Our resources are also stretched by increasing demands for training, support and input to schools and departments, which can have an impact on our ability to meet our core task. Educational and awareness campaigns may be especially effective for reducing unmet needs for mental health services. However, these types of initiative can only be successful if the local resources are prepared to support increased demand for services.

14. Key priorities for the coming year

1. To continue to raise the issue of resource, capacity and demand and the implications of under resourcing on service delivery and the student experience.
2. Wider promotion of Big White Wall.
3. Consider and implement changes in information to students and processing sensitive information in light of the General Data Protection Regulation.

4. Collaborating with Student Systems on extending the data base to identify student populations that are potentially underserved.
5. Consider the recommendations of the IPPR report (above) and UUK's #stepchange campaign.

Ronnie Millar

Director

During semester time the Service operates out of six locations across campus: the Main Library, Moray House (Paterson's Land and Moray House Lodge), Kings Buildings, Edinburgh College of Art and Easter Bush Veterinary Centre



Acronyms

AMOSSHE	- Association for Managers of Student Services in Higher Education
AUCCCD	- Association for University and College Counseling Center Directors
BACP	- British Association for Counselling and Psychotherapy
CIAO	- Clinical Impact on Academic Outcomes
COL	- Centre for Open Learning
CORE	- Clinical Outcomes Routine Evaluation
CPD	- Continuing professional Development
CSE	- College of Science and Engineering
EBVC	- Easter Bush Veterinary Centre
ECA	- Edinburgh College of Art
ESES	- Edinburgh Student Experience Survey
EUSA	- Edinburgh University Student Association
HUCS	- Heads of University Counselling Services
HUCSS	- Heads of University Counselling Services Scotland
ISB	- International Student Barometer
KPI	- Key Performance Indicator
MHAS	- Mental Health Assessment Service (Royal Edinburgh Hospital)
ODL	- Online Distance Learners
PAWS	- Paws Against Stress (therapets)
PT	- Personal tutor
PGT	- Postgraduate Taught programmes
PGR	- Postgraduate by Research programmes
QA	- Quality Assurance
SCS	- Student Counselling Service
SDS	- Student Disability Service
SEP	- Student Experience Project
SFC	- Scottish Funding Council
SMHC	- Student Mental Health Coordinator
SLL	- Skills for Life and Learning
SSO	- Student Support Officer
SST	- Student Support Teams
UG	- Undergraduate
UUK	- Universities UK