



THE UNIVERSITY
of EDINBURGH

Student Counselling Service

Annual Report 2017-2018

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Service

The Report

This annual report was produced in October 2018 and covers the academic session from August 2017 to July 2018.

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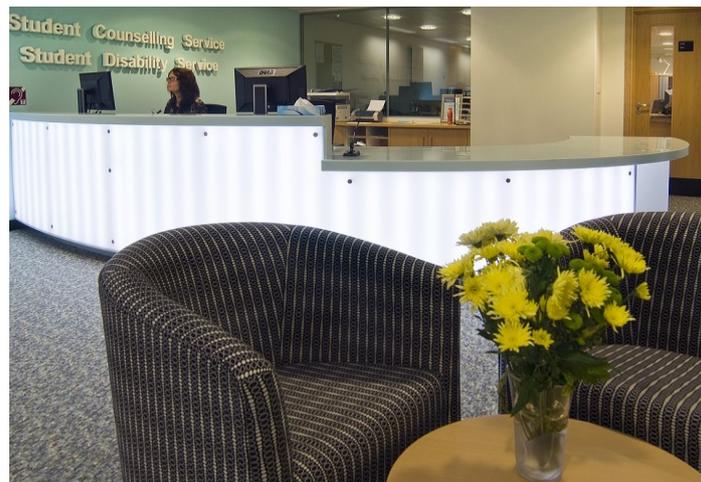
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This report can be provided in alternative formats on request.

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“I am so grateful I could use the service for free and with such ease. It has made a difficult time manageable and I am much more confident in dealing with situations now.” (Student feedback)

1. Summary of impact of service activities from the previous academic year on the student experience and how these contribute to University Strategy

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

The Service priorities for last year were:

- 1. To continue to raise the issue of resource, capacity, demand, and the implications of under resourcing on service delivery and the student experience.** Over the course of 2017-18, individual referrals by students seeking help increased by 13.1% and attendances at our workshop programme also increased. This had an impact on our response times (discussed below). An additional £150,000 for counselling provision is being made in 2018-19, and we are increasing service delivery for evening appointments, and making use of additional space at ECA, Kings Buildings, and Easter Bush. However, we are at the limit of how effectively we can deliver counselling capacity within the confines of the estate available to us. The planned relocation of the Service to a Wellbeing Centre in a refurbished 7 Bristo Square due January 2020 will increase our capacity, but demand to date has already increased by 25% during 2018-19. Other demands on our resources have also increased e.g. FOI requests increased by 58% over 2017-18 (averaging 2.5 per month) and the requests on the service from schools for additional mental health training or input into school based events. The impact of this is discussed below.
- 2. Wider promotion of Big White Wall.** The new contract with BWW using a population model (i.e. BWW is available to all students and staff of the University without limit) was launched in August 2017. Flyers, wallet cards and other promotional materials are available at all SCS sites, and are made available to Schools, Advice Place, Residence Life, Student Disability Service, and the Staff Counselling Service. BWW is promoted on the Service website. 120 posters were provided to the Students' Association for distribution around their various venues. At the start of Semester one, BWW presented a day on campus, demonstrating BWW to University staff including student support teams and BWW is now advertised on plasma screens across campus, and in particular as periodic screen savers in the Main Library computers.
- 3. Consider and implement changes in information to students and processing sensitive information in light of the General Data Protection Regulation.** The changes to data protection practice to be implemented because of GDPR had a particular challenge for the Service as all data processed by the Service is considered sensitive data, and we have to combine the requirements of GDPR with those of our professional confidentiality as a BACP Accredited Service. Changes implemented included a revised and extended Privacy statement, introduction of routine encryption of assessment outcomes notes, Special Circumstances evidence and Subject Access Requests, and preparing our contribution to the General Register held by the University. Our Service Administration Manager, Meg Stroud, took the

lead on this project that involved a considerable amount of work, often to very short time scales.

4. **Collaborating with Student Systems on extending the data base to identify student populations that are potentially underserved.** This task remains a work in progress with Student Systems.
5. **Consider the recommendations of the IPPR report 2017 and UUK's #stepchange campaign.** The #stepchange campaign, launched in September 2017, encourages a whole University approach, including the need for making mental health a strategic priority, deploying evidence based interventions, providing staff training in mental health literacy and promotion, providing tools for self-care and positive mental health, ensuring effective signposting for support. In line with this approach, the Service continues to contribute to the roll out and development of the University's Student Mental Health Strategy, the Mental Health and Wellbeing week in partnership with the Students' Association, delivering staff training on student mental health in collaboration with the Student Disability Service, developing and promoting online mental health training modules with the Charlie Waller Memorial Trust work. The Service will also be co-facilitating with the Students' Association, a pilot mental health peer support project, building on existing peer support initiatives within schools. During the year, the Service worked in partnership with The Foundation for Positive Mental Health to add the Feeling Good App to our range of Apps and online support for students. This App, already used in Lothian NHS, is free to students and staff, can be accessed via our website, and is promoted via flyers, posters and plasma screens.

Service activities are intimately linked with SES and USG strategic priorities, and the Student Mental Health Strategy:

- Responding to students as individuals, meeting needs, reaching goals, enhancing skills through developments that have most impact on improving student experience.
- Demonstrating 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 and pursuing continuous improvement of the Service.

“Counselling has given me the support I desperately needed to get through the hardest months of my studies. My sessions have given me the confidence to pick myself up when I was very low.” (Student feedback)

Measures of Success

2. Reflection on user engagement, feedback, usage and partnership working and externality
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User engagement and feedback

The Service seeks to engage student users by inviting feedback through a variety of evaluation questionnaires given routinely at end of therapy or workshops:

- (a) Service Evaluation (students' experience of the service)

- (b) Feedback from workshops
- (c) CIAO (clinical impact on academic outcomes)
- (d) CORE (clinical outcomes)

In 2017-18 of students attending counselling appointments we received 1213 Service evaluations, including CIAO feedback and 310 SLL workshop evaluations.

Table 1	Service Evaluation summary	2017-18	2016-17
	Satisfaction with service (reception, waiting areas, interaction with staff, accessibility and discreetness)	99%	99%
	Satisfaction with service publicity	97%	97%
	Percentage of students reporting waiting time for initial appointment as “too long”	13%	16%
	Percentage of students reporting waiting time for counselling as “too long”	38%	28%

Students’ satisfaction with their experience of the service remains highly positive. The drop in dissatisfaction with the waiting time for an initial appointment and increase in dissatisfaction with the waiting time for a counselling appointment is reflected in the overall KPI response times (see Table 5). 31% reported waiting more than 4 weeks, which would suggest that for some 7% of users, even a wait of up to four weeks post assessment for counselling is considered too long. 15.7% of users reported too few sessions, but the majority of these students showed recovery and improvement on the basis of the therapy sessions they used.

The service offers short term counselling, but does not work on the basis of ‘one size fits all’. The number of counselling sessions a student is offered is assessed on a needs basis, and students can re refer during the year when their needs will be re-assessed, within the context of a service providing evidence based brief therapy. At assessment, all students are signposted to additional forms of support that they can access.

Our service model of delivery does emphasise seeing a students as quickly as possible for a first meeting with a counsellor, with the triage approach prioritising students at risk. In the past year we improved our response time for the offer of this initial assessment. In the face of the increasing demand, a larger proportion of students waited longer than four weeks to be offered counselling, but 52% were offered counselling within two weeks of assessment. Failed appointments rose slightly from 8.8% to 9.6%, a loss of 1,450 appointments, due to students not attending confirmed appointments, or cancelling so late that they could not be offered to another student. Reasons are not always given, but often where identified the student is choosing to prioritise other activities or commitments over attending therapy.

“Counselling has been so beneficial to my mental wellbeing. I was suicidal and on the verge of leaving, dropping out and going home but I found a safe space where I was able to discuss my feelings without shame or judgment.” (Student feedback)

Attendance at the SLL workshop programme increased over 2017-18. The evaluations showed:

Table 2 Skills for Life and Learning evaluation	2017-18
Content of presentation was good/very good	97%
Style of presentation was good/very good	94%
The length of workshop (1 hour) was good/very good	74%
Would recommend SCS workshops and events	95%
I know where to find further help	96%

The SLL programme is particularly popular with international and PG students.

Table 3 Clinical Impact on Academic Outcomes (CIAO) evaluation

"To what extent would you say that counselling..."	2017-18	2016-17
helped you stay at University?	85%	78%
helped you do better in your academic work?	76.5%	74%
improved your overall experience of University?	83%	85%
helped you develop skills that might be useful in obtaining future employment?	87%	85%

The responses will vary year on year reflecting the particular concerns of individual student users, but the overall impact of counselling continues to be demonstrably high.

Analysis of service usage

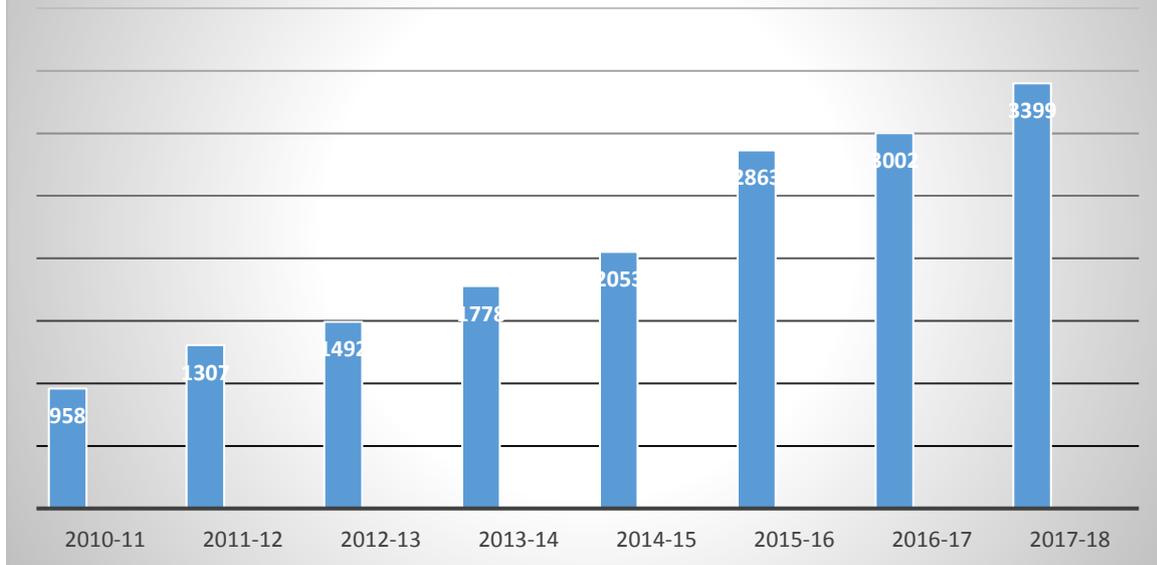
Demand on the service continues to rise. The associated risks, and the impact on the student is discussed throughout this report.

"Thank you for all your help. The changes I've felt since beginning counselling are more than I ever expected." (Student feedback)

2017-18 Summary of key user trends:

- Overall Service usage increased by 7% to 4,004, meaning we had contact with 9.7% of the student population. This does not include students using online self-help, or contact via welcome week or mental health and wellbeing week activities.
- The number of individual referrals for counselling increased by 13.1% to 3,398.
- There were 324 attendances at the SLL presentation/workshops (an increase of 26.5%) and 332 attendances at the Paws Against Stress therapist events.
- 25 students used email counselling.
- 8% of face to face counselling was delivered on campus to ODL students

Individual referrals 2010-11 to 2017-18



Overall user population is relatively stable:

- Gender balance male/female 29%/71% - (+1%/-1% from 2016-17)
- UG/PG 67%/33% (+1%/-1% from 2016-17)
- Change in proportion of PG users - PGT/PGR 64%/ 36% (-5%/+5% from 2016-17)
- UK students 56%, EU 17% and overseas 26%

Chinese students are proportionally underrepresented in the user population, however the proportion of Chinese students using the service has grown to 6.8%. During the summer vacation, the service took part in a video interview about counselling and the service specifically for Chinese students.

644 students with disabilities referred for counselling (a 14% increase on 2016-17) i.e. 19.2% of all students referring, and 13.5% of the all students declaring a disability to the University. Of all service users, 7.2% declared a mental health condition as a disability and 7% declared a learning difficulty.

The Student Mental Health Coordinator (SMHC) supported 157 students during the year; the SMHC supports students with acute, complex and enduring mental health problems.

The main issues students presented with remained the same: anxiety 26% (-2%); depression 18.5%; self and identity 13% (+1%); relationships 10%; academic 7% (-2%), though we saw an increase in students presenting with an experience of loss (7%) which included bereavement, relationship break up, parental divorce and loss of family stability.

The top six sources of referrals remain consistent: website 30%, School/PT/SSO 24%, GPs 12.5%, friends 12%, Workshops 6.4% and Advice Place 5%.

Service Key Performance Indicators

Clinical Outcomes

Table 4

CORE (Clinical Outcomes Routine Evaluation)	2017-18	2016-17
Overall Recovery and improvement	65%	66%

The analysis of our CORE outcomes indicates that 90% of our student users are in a clinical population i.e. struggling psychologically more than the general population and the majority experience moderate to severe anxiety and depression.

The IPPR report: Not by degrees: Improving student mental health in the UK's universities 2017 indicates a general recovery and improvement rate of students using university counselling of 63%, based on academic studies.

Response times

Table 5

% (2016-17 in brackets)	Referral to assessment	Assessment to counselling
1 week	62% (63%)	35% (33%)
2 weeks	28% (20%)	17% (20%)
3 weeks	9% (12%)	6% (9%)
4 weeks	0.5% (3%)	6% (9%)
4+ weeks	0.5% (2%)	36% (29%)

90% of students were offered an assessment within 2 weeks (cf. 83% last year), 99% within three weeks. 52% of students were offered a counselling appointment within 2 weeks of assessment, with 7% fewer students being offered an appointment within 4 weeks, in the context of an 11.4% increase in individual referrals. The response time in semester two was adversely affected by the cumulative increase in demand, limitation of student availability over the winter vacation and flexible learning week, recruitment lag, and the adverse weather closure of the University. The service remained operational during the UCU industrial action, though some students chose not to attend during that period.

“Help came at a time when I was most at risk of failing and helped ensure I didn’t.”
(Student feedback)

Partnership working

- The Student Mental Health training programme in partnership with SDS was delivered to 14 schools over 2017-18. All Schools have now had the training delivered at least once, and the programme will continue into 2018-19.
- Collaboration with the Vet School continues, delivering counselling at EBVC and periodic non-managerial supervision for student support staff.

- Collaboration with the 10 for 20 network continues with streamlined signposting of students to this network; similarly with the counselling charity Saheliya who work with BAME women.
- We aim to bring the NHS Stress Course onto campus annually.
- Collaboration with the Charlie Waller Memorial Trust in developing and promoting online training modules for staff related to student mental health.
- We have developed links with the Student Counselling Service at Trinity College Dublin, hosting visits from their staff, and the Director acting as external assessor on recruitment panels. We are learning from their experience of using Silver Cloud (online CBT support) and Titanium (case record management system) and they have adopted our SMHC job description in creating a similar role at TCD.
- Where there is need for closer collaboration is with NHS Lothian at a strategic level. To this end, the Director, as Chair of HUCCS Scotland, is part of a collaboration with AMOSSHE and Universities Scotland in raising the public health issues and needs surrounding student mental health with Scottish Government ministers.

Externality

The Service continues to have British Association for Counselling and Psychotherapy Accredited Service status, and is the only Scottish university counselling service to be BACP accredited. Service Accreditation is a recognised quality standard for organisations providing counselling and psychotherapy services. Service accreditation demonstrates that we offer an accountable, ethical, professional and responsive service to clients, staff, and stakeholders. As an Accredited Service, we work to the BACP Ethical Framework and recognised good practice within the HE sector.

The Service takes part in the activities of Heads of University Counselling Services (HUCCS), the Director being a member of the HUCCS Executive, and current Chair of HUCCS Scotland. We hosted meetings of both HUCCS and HUCCSS during 2017-18. The Director is also a member of the Association for University and College Counseling Center Directors (AUCCCD), and is able to benchmark service activities with similar services in North American universities. Participation in the annual conference of AMOSSHE also allows for networking and exploring best practice in counselling and student support in general.

HUCCS Annual Survey for 2016-17 was conducted in the course of 2017-18, but was hampered by a lower than usual participation rate. The survey reflected on not only increasing numbers of students seeking help across the sector, but also the increasing complexity of presenting problems. Secondary mental health teams often have long waiting times and anecdotally this has impacted on the complexity of caseloads within university services. The Service budget and FTE counselling staff provision is above average, and the Service has above average usage, compared with other Russell Group university services. We are among those services providing a wide range of group work interventions.

HUCCS Scotland is in the process of producing a paper on the usage and impact of student counselling in Scottish universities.

In line with the #stepchange campaign and recognised best practice, the Service continues to build on our contacts and partnership working with NHS Lothian. Regular meetings are

now established with Mental Health Assessment Service, and Intensive Home Treatment Team at the Royal Edinburgh Hospital, and with Psychiatric Liaison at the Royal Infirmary Edinburgh. The purpose of liaison is to help meet student and our Service needs from NHS Lothian services and for reciprocal needs to be discussed. The SMHC's ability to refer directly to South East Community Mental Health Services (Ballenden House) has been running now for 2 years and is currently being renegotiated. Referral to other localities and specialities is encouraged by the SMHC writing to GPs. The University Health Centre have now supplied and encouraged the use of their clinical email address to discuss students, protecting cross service student/patient confidentiality.

Following the 2018 UUK Mental Health and Wellbeing in Higher Education day conference, we have embarked on a project of **What Works** for mental health, discussed below.

3. Staff Development Activity

Key staff development is conducted through a variety of ways:

- All staff undertook the online Data protection training provided by the University in preparation for the advent of GDPR.
- The Service annual training day took a different focus, being 'in house' and aimed at consolidating counsellors' awareness of the wide range of University services available to students for signposting, and identifying opportunities for closer collaboration between services. Services included SDS and Mental Health Mentors, IAD, Chaplaincy, and the Residence Life team.
- Ongoing CPD as counsellors' professional requirement included: BACP UC day conference on working with suicidal students; Abertay University MSc module on Crisis intervention and mental health; CBT for eating disorders; running mindfulness groups; training on attachment and avoidant attachment; attendance at the UUK Mental Health and Wellbeing in HE day conference.

“My counsellor was brilliant. These sessions massively improved my quality of life.”

(Student feedback)

Opportunities and Enhancements

4. Reflection on service changes, new ways of working and efficiencies

Over the past year we have further embedded and enhanced the operational model. In the face of continuing increase in demand, we were able to reduce the response time for the initial appointment students have with a counsellor when support is put in place. We grew the numbers attending our workshop programme.

The current service operational model (Service upon Need) introduced in 2016-17 is working well. The emphasis is on offering students timely, evidence based support through (a)

immediate access online self-help (b) guided self-help support via the SLL programme and online tools (e.g. Big White Wall) and (c) brief therapy (normally up to four sessions, with a maximum of 10). 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. The online and guided self-help supports are also evidenced based psychoeducation though some students can be reluctant to engage with these. Over the summer vacation, we have embarked on a programme called **What Works** that will promote a wide range of supports and activities and explain the evidence for the benefit in engaging with these supports, in collaboration with the Chaplaincy, Sports and Exercise, and the Students' Association among others, and will complement the University's *Five Ways to Wellbeing* approach.

New developments

Big White Wall: under the new contract there were 883 users (increase from 475 in 2016-17). Peaks in registration occurred in October, November, February, May and July. University of Edinburgh users make good use of the support network with an above average number of logins, page views and time on site. The most popular usage was of community posts and self-assessments. There were 477 signups for Guided support courses, the most popular being *Manage Stress and Anxiety* and *Manage your Depression*.

The **Feeling Good App**, since its launch in the University in April until the beginning of September, has had 733 users; 472 students accessing the App from our website (without having to meet with a counsellor) and 34 signposted by counsellors, plus 227 staff users. The overall feedback from users is that the App is easy to use.

Table 6 Initial evaluation conducted by Foundation for Positive Mental Health

Pre App use	Post App use
Students accessing direct from website report Moderate anxiety Minor depression	Students reporting Mild anxiety Minimal depression
Students being referred by counsellor report Moderate to severe anxiety Major depression, moderately severe	Students reporting Moderate anxiety Mild to moderate depression

Changes made to activities and processes in response to external drivers

- As described above GDPR has necessitated a change in our practice around data protection.
- The project to redesign our website, with support from student systems, was completed in October 2017. This improved the design and layout of the website, and we are reviewing the content. The website encourages students to use immediate access online self-help, as well as facilitating online registration and self-referral for counselling.
- Freedom of Information requests – in view of the increasing number of FOI requests (30 in 2017-18) which can take up to 7 hours to prepare each response, we are working with the Records Management section in a pilot project of identifying and pro-actively

publishing the most frequently requested information. To date we have had one FOI per week in 2018-19.

- The contract with Silver Cloud is still under discussion and negotiation with Legal Services.

What has been challenging are the continual pressures of demand, not only from students but requests from schools in particular for more training or support input. There is a limit to how far our resources can meet these demands, and there is a risk of “mission drift” if we do not remain focussed on our core purpose. Local agencies offering low cost or no-cost longer term counselling are also under pressure, and regularly have to close to new referrals, which adds to the pressure on the service, as do longer waiting times for NHS services.

Another challenge has been managing expectation and inaccurate reporting about the service, particularly around waiting times and what brief therapy can achieve. Our response times are generally quicker than comparable NHS and third sector services, and the evidence shows that a brief therapy model, most common in HE settings, is effective. Misrepresentation, by students and staff, can potentially have the impact of deterring students from using and benefitting from what the Service can offer.

“I think it’s a real privilege to have this fee service as the first port of call within an institution. It has certainly improved life for me and I am now able to determine my next steps from a better position.”
(Student feedback)

Actions

5. Key priorities for coming academic year

- **Building capacity**, including recruiting and embedding new staff, maximising use of all locations available to the service, and developing psychoeducational group work
- **Partnership working**: piloting Mental Health Peer Support and further training input and reflective practice support for the Residence Life team.
- **Implement Silver Cloud**
- **Managing expectation** – Rolling out the **What Works** project and developing a Scope of Care Statement.

6. Risk analysis

As reported last year 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 are 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
- 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 throughout the day 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 2017-18, 347 students (up by 7%) described counselling as being a very important, or the most significant, support in helping them stay at University. At a conservative estimate, counselling saved the University £3,123,000 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 outstrip resources, and to offer interventions that are evidence based, meet students' needs, and that students are willing to engage with, at the risk of reduced satisfaction by not meeting unrealistic expectations. Educational and awareness campaigns may be especially effective for reducing unmet needs for mental health services, as does encouragement to seek help and reduce stigma. However, these initiatives can only be successful if the local resources are prepared to support increased demand for services, and to the date of this report referrals have increased by a further 22% in 2018-19.

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Director

University Counselling Service

During semester time the Service operates out of six locations across campus: the Main Library, Holyrood Campus (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
BAME	- Black Asian and Minority Ethnic
CBT	- Cognitive Behavioural Therapy
CIAO	- Clinical Impact on Academic Outcomes
CORE	- Clinical Outcomes Routine Evaluation
CPD	- Continuing professional Development
ECA	- Edinburgh College of Art
EBVC	- Easter Bush Veterinary Centre
EUSA	- Edinburgh University Student Association
FOI	- Freedom of Information
GDPR	- General Data Protection Regulation
HUCS	- Heads of University Counselling Services
HUCSS	- Heads of University Counselling Services Scotland
IPPR	- Institute for Public Policy Research
KPI	- Key Performance Indicator
ODL	- Online Distance Learners
PT	- Personal Tutor
PGT	- Postgraduate Taught programmes
PGR	- Postgraduate by Research programmes
SCS	- Student Counselling Service
SDS	- Student Disability Service

SES	- Student Experience Services
SFC	- Scottish Funding Council
SLL	- Skills for Life and Learning
SSO	- Student Support Officer
SST	- Student Support Teams
UCU	- University and College Union
UG	- Undergraduate
USG	- University Secretary's Group of services
UUK	- Universities UK