

# The University Counselling & Mental Health Service 2014-15

Senior Student Counsellor

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## Introduction

We provide a student Counselling & Mental Health Service that supports the University key strategic themes of enhancing our student experience, promoting equality and diversity, and assisting students to realise their full potential. The Service supports student well-being and enables students to continue and complete their studies when faced with personal crisis or distress.

## Aims

- To provide a high-quality student support service to the University community.
- To develop and sustain a service that responds flexibly to different students' needs.
- To innovate and increase the quality, range and level of student services available.

## Key Results

- 1,296 individual counselling sessions and additional resilience-themed workshops (based on mindfulness) for 70 students.
- 307 students used the individual counselling service and new mental health service. (copy of Mental Health report attached)
- Student participant feedback:
  - 72% reported that it has improved their experience of university;
  - 69% reported that counselling helped them continue at the university;
  - 74% reported developing useful skills for the future;
  - 96% reported they would recommend this service to a friend.
- Average waiting time 10 days against our target of 7 working days owing to staffing shortages in semester 1 which have now been addressed. (see 'staffing during the year' below)

## Themes

- An increase in referrals for complex mental health issues which we have addressed by employing a new specialist Mental Health Advisor.

- An increase in referrals for transgender-related issues which we have addressed by attending a course on 'working with Trans-identified and Trans-historied' workshop in order to address complex issues involved and support student whilst waiting for appropriate referral to NHS if required.
- A year-on-year increase in total number of referrals which we are addressing by innovations including new group-based sessions and peer-to-peer mentoring in order to promote wellbeing and build resilience.

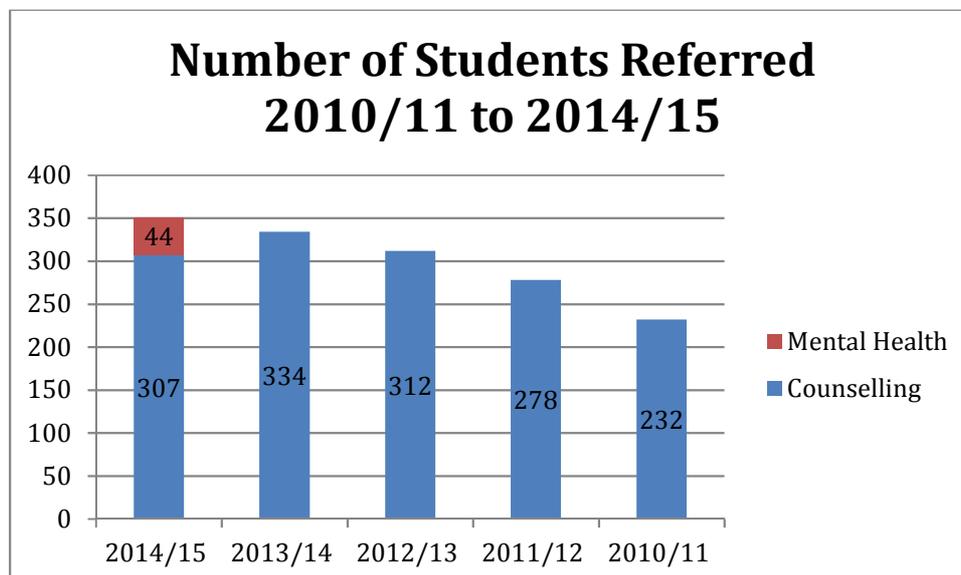
## Services

We:

1. Maximise each student's potential to benefit from their university experience by offering quality short term counselling and where appropriate mental health support and advice.
2. Fast-track students requiring urgent help with our 'on the day' appointment system.
3. Develop and deliver appropriate workshops and training, provide P2P mentors for those students who need additional help from another student who has been specifically trained to support them.
4. Provide training in Mindfulness for students to build resilience and learn new ways of coping with stress and depression.
5. Work collaboratively with others such as the Student Association and 'Healthy Mind & Healthy Body' and we also advised the Student Association on their student mental health agreement.
6. Support students with pre-existing mental health issues of whom there are increasing numbers due to inclusion of a range of mental health diagnoses under the disability discrimination act 2005.
7. Support students who experience university study-related issues.
8. Support student in serious crises and at risk e.g. suicide, self-harm, abuse, trauma, and refer students on to their local GPs and appropriate NHS resources.
9. Support individuals and groups of students when a traumatic situation occurs at university (e.g. suicide attempt of a peer in halls of residence, thus preventing psychological crises).
10. Support those who are trans-gendering/transgendered and trans-historied and are struggling to deal with the emotional adjustment.
11. Constantly form and update our knowledge base with regard to supporting students who have experienced cyber-bullying and advice from the Clerk to Court and Corporate Governance Manager, the Secretariat, on current university policy which facilitated new protocol and policy for the counselling service.

## Counselling & Mental Health Service Statistics

### 1. Number of Students Referred



Number of Students	2014/15	2013/14	2012/13	2011/12	2010/11
<b>Counselling</b>	307	334	312	278	232
<b>Mental Health</b>	44				
<b>Total</b>	351				

There has been a 5% increase in the number of students accessing the service this year and our new Mental Health Advisor saw 12.5% of this year's referrals, meaning that the counsellors saw the other 87.5%. Approximately 7% of the student population accessed the university's student counselling & mental health service over the year. **(See 2. Year-on Progress Report)**

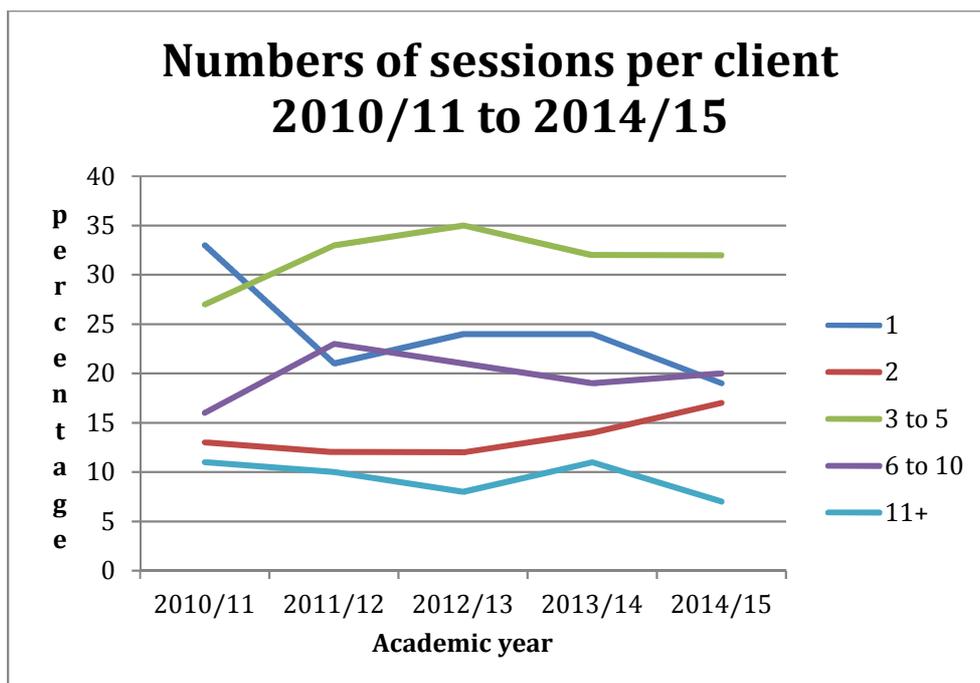
### 2. Waiting Times

#### Total wait for appointment in days

	2014/15	2013/14	2012/13	2011/12	2010/11
<b>Total wait for appointment</b>	10.7	7.0	7.0	6.6	5.9

### 3. Number of Sessions Provided

#### Number of sessions

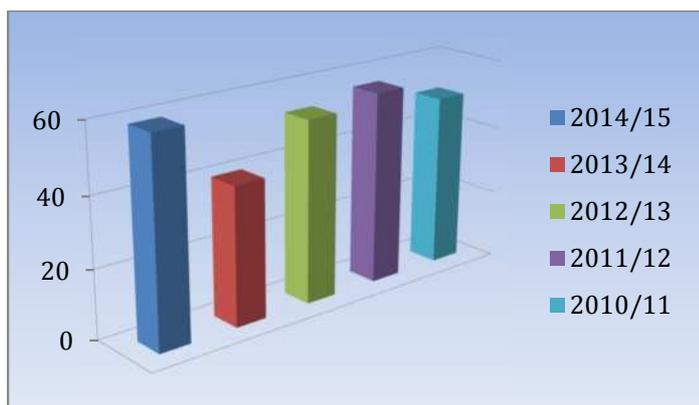


Number of Sessions	2014/15	2013/14	2012/13	2011/12	2010/11
1	19	24	24	21	33
2	17	14	12	12	13
3 to 5	32	32	35	33	27
6 to 10	20	19	21	23	16
11+	7	11	8	10	11

We offer short-term counselling of 6-12 sessions maximum; some students need more sessions due to the complex nature of their presentations and the long wait for appointments from NHS services. It would be detrimental to these students' mental health if we were to suddenly stop seeing them after 12 sessions, so in these limited number of cases we are willing to provide further sessions until NHS services can take over or until the crisis passes.

### Number of on-the-Day Appointments

We reserve a number of appointment slots each week for on-the-day take up for students in immediate crisis. This year there have been 59 on-the-day appointments taken up by students. This is an increase of 47% of 'on-the-day' appointments on the previous year. This shows the importance of setting aside some sessions each week for this purpose and helps pre-empt prevention of escalation to higher levels of risk.



Year:	2014/15	2013/14	2012/13	2011/12	2010/11
<b>Number of on-the-Day Appointments:</b>	59	40	53	56	50

#### 4. School

##### Which School Referred Students Are Studying In:

School	2014/15	2013/14
SHS	44	26
AMG	29	17
SET	18	10
DBS	9	47

Type of Client	2014/15	2013/14	2012/13	2011/12	2010/11
Student-U/grad	96	90	91	90	87
Student-P/grad	4	10	9	10	13

#### 5. Equality & Diversity

##### A. Nationality

International students can be particularly vulnerable; we offer a workshop in 'Orientation week' on transitions to help support the students that gives us the opportunity to engage with other cultures.

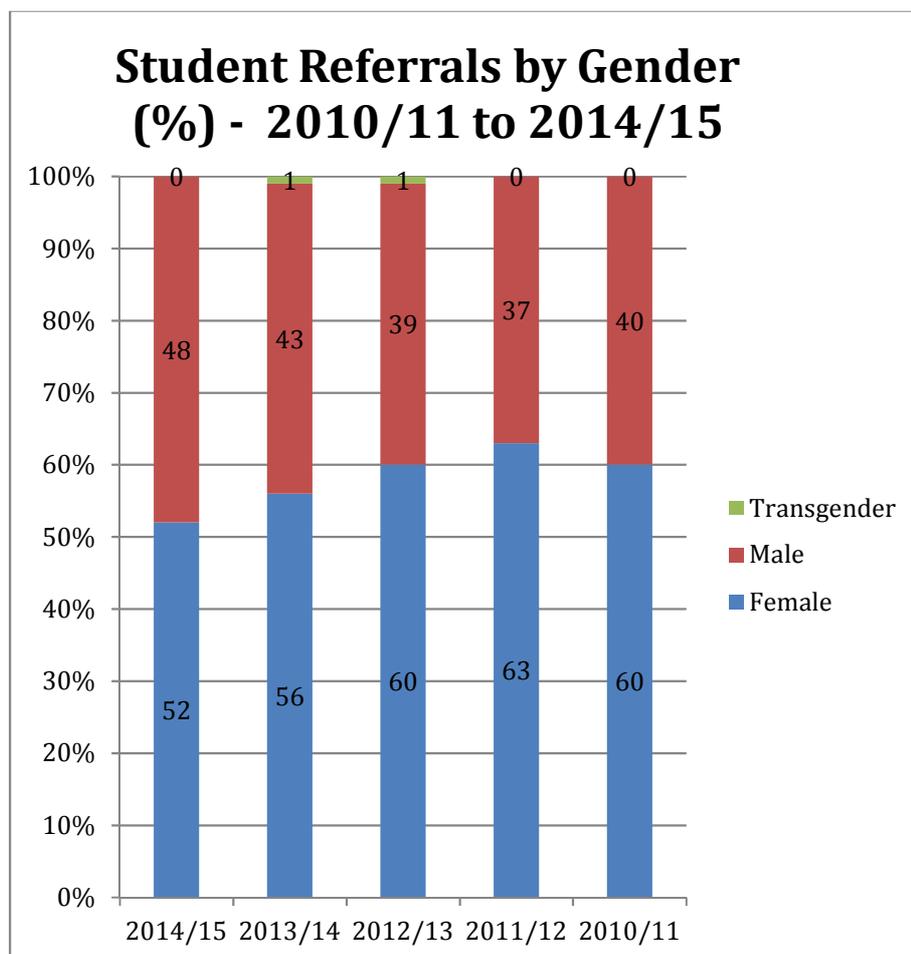
Nationality (%)	2014/15	2013/14	2012/13	2011/12	2010/11
UK	88	89	82	84	83
International (Including EU)	11	11	18	16	17

##### B. Disability

**52 students, that is 17% of our client work, disclosed disability on their referral forms.** We are working with the disability team in providing support, counselling and mental health advice.

##### C. Gender

### Gender as declared by the students on their referral forms:



Gender (%)	2014/15	2013/14	2012/13	2011/12	2010/11
Female	52	56	60	63	60
Male	48	43	39	37	40
Transgender	0	1	1	0	0

It is important to note that, although none of the students declared themselves to be in the transgender category on their referral form, counselling sessions revealed that a number of the students were engaged at varying points on a transgender process and they varied in which gender category (male or female) they would currently put themselves. This highlighted the need to change how we record gender identity issues on our forms.

We have been in consultation with the student LGBT Society at Abertay this year on how best to present and record gender identity on our forms. This has led to changes on the forms, which should help us more accurately record the varied gender identity statements from the students. In addition two of the counselling team have this year attended a transgender & trans-historied training course in order to help us have a better awareness of the issues involved and to improve the service provision.

## 6. Risk

A number of referred students present with 'risk' issues such as self-harm and suicidal ideation. This year 48 students, 16% of all those referred, communicated risk of harm to themselves, we use the Risk questions from CORE to provide the basis for managing and containing risk. These questions cover suicidal ideation, harm to self and others. If any student scores 5 or more or 4 on any one item then the counsellor completes a risk form discusses the client with the Senior Counsellor.

The Counsellors and Mental Health Advisor deal with the immediacy of the situation in a variety of ways: referring to appropriate services in the NHS and supporting students whilst waiting for these referrals to come through in the meantime. Due to the high proportion of students at risk it's vital that we are able to offer support quickly, and that these students are fast-tracked for counselling or mental health support. It's also vital that waiting times are kept to a minimum and to achieve this it's important that we have the right number of qualified and experienced staff available at the right times. I believe we will be able to achieve this with the staff we have, and we will continue to monitor the situation.

## Staffing during the year

Significant changes have occurred in 2014-15 with regards to staff levels. Two long-term staff left Abertay: ██████ moved to a new job in Bristol and ██████, took voluntary redundancy.

I took on the role as Senior Counsellor in July 2014 and with half the team gone, this left two of us (█████ and me); referrals came in at the same rate and so this was what directly led to the longer waiting time mentioned above. After the usual recruitment procedures for new staff had been set in motion, two new staff were recruited and started as follows:

- ██████ & ██████ started working as permanent part-time members of the team.
- ██████ started working as a sessional counsellor.

The team works well together with staff bringing a varied and extensive range of experience, skills and knowledge to provide the university, students and staff a professional, ethical service to meet the demands of the 21st century.

In January ██████, the Mental Health Advisor, became part of the counselling service, which meant we could offer an integrative service to meet the needs of students with mental health difficulties; This provided other services such as the disability service with a fast track referral system, and requests for guidance regarding the management of students' mental health issues have also grown.

Part of ██████'s role is to oversee the P2P (Peer to Peer) Student Mentoring Scheme. Each new student is given a trained student mentor to support them in navigating the first few weeks' transition to university life and beyond if necessary. The counselling and mental health service provides each mentor with excellent training in listening skills, awareness of mental health and disability issues and help in developing self-awareness in a supportive environment. A by-product of the training programme is that mentors acquire transferable skills, which can be applied to life outside the university environment and in the jobs market.

## Professional standards

Upholding professional standards and in order to retain our accreditation and membership of the BACP counsellors have to have 30hours professional development every year, this year counsellors/mental health advisor have attended courses on 'working with Trans-identified and Trans-historied and BACP conference on 'Innovation & Care" which include topics such as 'ethical & legal aspect of the concept of "duty of care" with HE, and working with students in the 'digital world'. The knowledge gained is passed on to other counsellors at our regular team meetings.

### **Placements for Associate Counsellors**

Each year we offer a placement to a student who has recently completed the Post-graduate Diploma in Counselling at Abertay University. The placement is from September to May, giving the counsellor valuable experience of working in Higher Education in a highly professional and qualified service delivering short-term counselling. We said goodbye to ██████ in this role in May 2015 and we welcome ██████ who will be starting with us at the end of October 2015.

### **Placements for Students on Diploma Course**

For the first time we will be offering a place to a student from another university who is on their 2nd year of their diploma. ██████ will be starting with us at the end of September 2015. This new development will allow us to offer additional counselling appointments as well as giving the placement student the opportunity of working with clients in a Higher Education setting as they work towards their diploma in counselling. ██████ will be mentored by one of the experienced counsellors to make sure he is familiar with our policies and procedures and is working within his capacity and experience. ██████ will also be supervised and monitored by the university where he is studying.

## **Contributions - *Counselling & Mental Health Team Contributes To:***

### **Supporting Academic Staff**

The counselling & mental health service helps in supporting other university staff (academic and support staff) in dealing effectively and supportively with students. This is done in a variety of ways by email, telephone conversations, meeting one to one as well as meeting with larger groups. This process also helps to manage the anxiety of the staff.

██████, our **Mental Health** Advisor, has meetings organised with groups of staff who are directly involved with students such as security, academics and support staff, in order to promote understanding of his role. ██████ also attends 'Student Causing Concern' meetings, where he provides valuable advice & guidance in dealing effectively and supportively with students with complex mental health difficulties.

We have also provided a 1-hour **Mindfulness** Taster session at the request of the Sports & Psychology department. This is particularly significant as Mindfulness is now well researched as being helpful to athletes to aid concentration.

### **The Student Association**

We have enjoyed working collaboratively with the Student Association on a number of projects such as the 'Student Mental Health Policy' and 'Health bodies Healthy Minds' workshops. Our aim is to continue to build on the relationships. We see this as a way of reaching out and becoming accessible to more and more students. (See Developments Plans 2015-16).

### **Collaborating on New Policies Working with Academic Staff**

Due to a few incidents of **cyber-bullying** within the student population, we decided we needed a policy protocol and invited ██████, Secretariat, to a team meeting to look at the issues involved and the current stance of the university for both victim and perpetrator. ██████ also looked at current legislation and produced a counselling protocol on cyber-bullying in line with university policy, which is still being drawn up. We believe the counselling service to be aware of the trend of cyber-bullying: our experience with victims is that quite often they are not sure that the bad behaviour is abusive and are unsure what to do about it. (see development plan).

## Access to Notes

Met with ██████ to consider implications and access to counselling notes in line with BACP guidelines (British association of Counsellors & Psychotherapists) and data-protection policy and law.

## GP & Mental Health services

A significant number of students present with 'risk issues' (16%) such as self-harm and suicidal ideation; sometimes we need to refer them immediately by contacting the student's GP surgery. This year we embarked on building relationships with the medical practices in the area in order to facilitate good practice, clear lines of responsibility and create easier pathways. ██████ and I met with the Practice Nurse at Hillbank Surgery, which was informative on both sides about expectations and the needs of the counselling service and students. Our plan is to meet with other surgeries that serve Abertay students in order to promote good practice and develop relationships. ██████ has also met with the NHS Crisis Team to clarify referral pathways for the care of those students who are at imminent risk of harm.

## Mindfulness

We ran a 7-week course Mindfulness course for students that commenced on 1/10/2014 Mindfulness is an integrative, mind-body based training that can enable people to change the way they think and feel about their experiences, especially stressful experiences, maximise general wellbeing, building tools for life such as empathy, self-compassion, emotional resilience and tolerance.

This is the second year we have run a Mindfulness course and it was offered to 25 students, (a manageable group size) through Eventbrite. There was a high demand and more students applied than we could take. The first week of the session is actually a taster session of 1 hour and we specify that the course is only available to those who attend the 'taster session'. The reason behind this is to give information regarding understanding the content, practical and theory, as well as the commitment needed by the students in order to get the most out of the course, such as regularly practising the mindfulness meditation exercises.

When I worked in the NHS running Mindfulness courses, clients would have to attend a 30-minute interview before being accepted on the course. The taster session we run is effectively in place of one-to-one interviews, which means that instead of 15-hours of interviewing I can use the taster session, which saves on time. Looking through last year's attendance we saw that those who stayed committed to the course were those who attended a 'taster session' at the beginning.

19 students out of the 25 who booked attended the taster session and 12 students attended the second session; the drop in numbers from the taster to the second session is to be expected as those who did not continue decided that this was not for them. 8 students attended all of the sessions; some struggled to attend every session due to demands regarding changes of time-table and certain difficulties two of the students had with the impact of their disabilities.

## Mindfulness - Student Exit Questionnaires

6 Students completed the exit questionnaires; here are some of the comments:

### *Why did you come on the course?*

- "Learn skills to deal with situations of stress and anxiety, but also take a step back and think of reacting differently with situation's involving high intensity and disagreements".
- "Because I wanted to see if it would be able to obtain tools to deal with stress/anxiety".
- "To help improve myself"

***What have you gained from the course?***

- “Being able to step back and see the situation in perspective as it is now”, challenged my previous conceptions on ways of thinking”.
- “The skill of identifying different factors and situation in my life, learning how to accept difficult things as part of life”.
- “Relaxation tools, to be mindful in day-to-day life”.

All 6 said they would recommend Mindfulness to their friends.

**Mindfulness - Conclusion:**

From the answers to the questionnaires and listening to the students directly they reported that the Mindfulness they practised improved their sense of wellbeing and they gained life skills. Mindfulness makes a valuable contribution to the counselling service, and as shown above, some academic staff are beginning to see Mindfulness as a valuable contribution to aspects of the service they provide.

Reflecting on the student numbers booked on the course and the numbers that actually attend is quite significant; my plan is to raise the bookings for the taster session to 35 and then hopefully more students will actually attend the rest of the course.

**P2P (Peer to Peer) Mentoring Scheme**

The P2P scheme was developed to help smooth the transition of new students into university life, in recognition that this can be a stressful process and that students often find it easier to approach their peers about things that are worrying them rather than talk to staff. Providing such support at an early stage can prevent difficulties escalating, can foster a sense of ‘belonging’ and thus can aid retention. We are able to offer every new undergraduate entrant (and some postgraduate students on a small number of courses) a mentor.

██████ oversees the mentoring scheme as part of his role as the Mental Health Advisor. This is something new for ██████ and with support he has taken on the challenges of this role and provided training for 17 new mentors (co-facilitated with one of the counsellors), which has been successful. As a result we are able to offer every new student a mentor from among the new and existing mentors.

Some of the students who undertake this role were also involved in the Principal’s Award, adding to their skill-set and employability.

**Development Plans 2015-16**

Our team took time to have a Counsellors & Mental Health Away-Day on 5<sup>th</sup> March, which included discussion of having a 5-year plan

The away-day is a valuable resource for looking at our strengths and weaknesses as well a space to think about the future development of the service.

***Engagement with External services***

██████ & ██████ plan to meet with GP’s & staff 2015-16.

***Anxiety/Depression & Stress Workshops***

To be delivered by ██████ & ██████ in Semester 1 2015  
Student exit questionnaires – reflect reason for workshops.

***Roadshow***

Alloway Hall & Kidd Building, involving Counselling

**Supporting Students**

Team, Disability, Finance, Careers, International Services and academic support, advertising our services as a proactive approach. [REDACTED] to arrange and facilitate with suggested date of 9<sup>th</sup> November for before the exams.

**'Lad Culture' in Universities  
'Good Lad' Workshops**

Our experience of cyber bullying and research published by NUS reveals that that 50 per cent of study participants identified "prevailing sexism, 'laddism' and a culture of harassment" at their universities. Our counsellor [REDACTED] would like to pursue the idea of running a 'Good Lad' workshop that is currently run in some of the universities. Working in collaboration with Psychology & Sports and the Student Union. We are hoping to run a workshop sometime in 2016 and also to produce a leaflet on cyberbullying and bad behaviour for all students.

**Accelerated Degrees**

Staffing in the summer of 2016 considered to meet the demands of the students, no changes at this present time, to review summer 2016.

**Questionnaires** (see Attached)

Questionnaires are used in order to find out the students experience, the effectiveness of the counselling.

Of those students completing the questionnaire...

**77.8%** said that **Anxiety** had brought them into counselling (table 5.6)

**67.4%** said that **Depression**

**43.8%** said that **Academic issues**

**21.6%** said that **Suicidal thoughts or intentions**

**69%** said that **Counselling helped them stay at university** (table 5.7)

**53%** said that **Counselling was either one of the many factors or the most important factor that helped them perform better in their academic work.** (page 9 table 5.9)

**74%** said that **Counselling had helped them to develop skills that might be useful in the future.** (table 5.10)

**95.5%** said that **they would recommend the service to a friend.** (table 5.14)

**Statistics for the Mental Health Advisor – Academic Year 2014/2015**

**44** Students seen for mental health support over the academic year 2014/2015

**400** Mental health appointments offered

**Gender:**

**Female** **59.02%**

<b>Male</b>	<b>40.86%</b>
<b><u>Nationality:</u></b>	
<b>UK</b>	<b>90.8%</b>
<b>International Including EU -</b>	<b>9.08%</b>

**Referral routes:**

<b>Disability Service</b>	<b>40%</b>
<b>Counselling Service</b>	<b>30%</b>
<b>Crisis self-referral and/or Academic School/University</b>	<b>30%</b>

**4.54% of students seen resulted in Student Causing Concern meetings****Presentation Primary features:**

- Anxiety/stress related	47.67%
- Low mood, pre-existing diagnosis of Depression	36.32%
- Bi-Polar Disorder (pre-existing diagnosis)	4.54%
- Emerging Psychosis	2.27%
- Addictive behaviours	4.54%
- Advice and Welfare issues	4.54%

Presentations varied with some students presenting with a combination of symptoms, anxiety/stress and low mood with associated risk.

Nearly 25% of the students seen presented as a risk to self.

**Schools the Students Came From:**

- DBS - 22.7%
- SHS - 36.32%
- AMG - 34.05%
- SET - 6.8%

**Other Provisions Made by the Mental Health Advisor:**

<b>50</b>	<b>Peer mentor interviews</b>
<b>3</b>	<b>Peer mentor training days, with 17 students completed training.</b>
<b>1</b>	<b>SEZ training day</b>