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Introduction

In line with all other university counselling services across the UK, provision in Oxford has seen another increase in demand with the percentage of the student body accessing the service increasing from 10.2% (2,300 students) to 10.6% (2,419 students). This figure is comparable with demand for counselling at other universities, particularly in the Russell Group and in recent years the rate of demand has slowed compared with other universities. Despite this increase the service was able to maintain a high level of positive outcomes as well as high levels of satisfaction.

The service has cut the average waiting time for initial appointments from 9.7 working days to 8.6, with almost 40% of students being seen within 5 working days. A sign of a healthy counselling service is the degree of creativity in terms of developing new initiatives, and as shown in the report the service has continued to develop a range of new therapeutic interventions to support Oxford students. After a relatively long period of stability the service experienced a large turn-over of staff with many of the more senior members of the service leaving, but this has also created the opportunity of bringing in new blood to the team.

Highlights

The service has significantly expanded provision of therapeutic groups and workshops, by increasing the frequency of well-established groups to ensure that they are available at the time of student need. Previously some groups were offered in one or two terms only; this meant that they did not represent a realistic option for students presenting at other times of year. New groups have also been introduced during the year.

The establishment of a trauma clinic to work with students requiring specialist intervention to resolve post-traumatic symptoms was a particular highlight, having been piloted over the previous two years. Whilst this service has been accessible to students who have experienced a range of traumatic events, it has become a very important element of provision for students who have experienced sexual assault (whether historic or during their time at university) and has had very positive feedback from users of the service.

A collaboration with the Social Sciences Division has enabled the development and delivery of workshops for social sciences researchers whose research puts them at risk of developing symptoms of Vicarious (also called Secondary) Trauma. It is hoped that this work can be further developed to provide support to these students once they return from their fieldwork.

Worked was undertaken to extend the wellbeing-oriented Mindfulness provision across the University, whilst developing a specific and targeted Mindfulness provision for students with particular mental health difficulties and needs. The service made Mindfulness meditation available to staff of the counselling service and DAS order to protect wellbeing and provide continued resilience during an increasingly busy year.
Looking Ahead

In 2017-18 the Counselling Service will be taking forwards a number of projects to develop the service and improve the quality of provision for students. In 2016-17 the service work with five colleges to deliver counselling within the college space, and a number of colleges are also seeking this provision in the current and future years. The service also looks to extend the provision of vicarious trauma support within the Social Science Division, to provide researchers with greater awareness and self-protective techniques as they undertake research in some of the world’s most difficult environments.

The service was recently an award from the Diversity Fund to support of specific development projects; firstly funds to engage with the counselling team in Fudan University, China which will facilitate an exchange of counselling staff to provide training in the engagement of Chinese students in counselling. Currently Chinese students are the least likely to access the service. A second project was funded through the van Houten Fund to develop a peer support programme specifically the PGR community, creating resources and undertaking a pilot project within three departments within MPLS.

Finally, the use of data within the service will be considered, with a view to the development of regular management data and to understand the needs of the students who access the service and how they can be best supported.

Data note for 2016-17

With the introduction of a new electronic case management system for counselling services for 2016-17 a new approach to data and reporting has been necessary. One outcome of this change is that some data is not reportable in the same fashion as was in previous annual reports. Data has been noted with appropriate commentary where there are changes, and work is underway to overhaul the data and analysis undertaken for the counselling service, utilising the improved functionality now available.

Alan Percy
Head of Counselling Service
Students accessing the Counselling Service

There continues to be a steady increase in the number of students contacting the Counselling Service, with a 5.2% increase in 2016-17.

Set against an increase of student number the University there has also been a steady increase in the proportion of the student population accessing the Counselling service, with over 1 in 10 students now doing so. This increase is in line with the wider sector, however some HEIs have reported significantly higher demand; there is no clear evidence of this happening in Oxford, perhaps due to the protective impact of college welfare provision.

<table>
<thead>
<tr>
<th>Year</th>
<th>Students contacting the Counselling Service</th>
<th>Students who go on to make an initial assessment appointment</th>
<th>Students who fail to attend initial assessment appointment and do not re-contact (DNA)</th>
<th>Students receiving counselling</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/13</td>
<td>1,940</td>
<td>1,627</td>
<td>130</td>
<td>1,497</td>
</tr>
<tr>
<td>13/14</td>
<td>2,268</td>
<td>1,832</td>
<td>152</td>
<td>1,680</td>
</tr>
<tr>
<td>14/15</td>
<td>2,483</td>
<td>2,096</td>
<td>147</td>
<td>1,949</td>
</tr>
<tr>
<td>15/16</td>
<td>2,795</td>
<td>2,300</td>
<td>221</td>
<td>2,079</td>
</tr>
<tr>
<td>16/17</td>
<td></td>
<td>2,419</td>
<td>276</td>
<td>2,143</td>
</tr>
</tbody>
</table>

*Data unavailable for 2016-17 due to new data system.*
**Service Demand**

Whilst there is an overall increasing demand on the service, this demand is not consistent, and is linked very much to the academic cycle, as shown below. There are notable peaks at the start of Michaelmas and Hilary, and over the Easter vacation. The data below shows students registering with the service:

![Service demand - numbers registering for assessment by week](diagram)

The 2016-17 data maps closely to 2014-15, albeit with slightly higher number. The 2015-16 data seems to indicate an early demand for services ahead of the start of the academic year. It should also be noted that this data is for new registrations and that below this there will be students who are continuing to access the service.

As a continuous, rather than a cyclical service, there are no annual reset stages, and as such a large number of registrations late in the academic year will have a negative impact on timescales in the following year. The service now offers Skype counselling which may be driving additional demand.

Data on continuing students is shown, with a notable increase in 2016-17. This data should be interpreted with care as this higher number is due to data preparations for the new case management system.

![Continuing students at start of academic year](bar_chart)
**Referrals**

Whilst referrals can be made from a number of sources, the majority of students access the Counselling Service via self-referral, with the referral trend remaining largely unchanged:

![Sources of referral](image)

**Risk**

The duty counsellor reviews pre-intake paperwork carefully for an indication that a student may be at risk, as part of the determination of the most appropriate support route for the student, categorising this in the range of 0-3. Students presenting as high and moderate risk are fast tracked to appropriate care.

Nearly a third of students present with some level of risk - measured as some level of agreement with the statements ‘I have made plans to end my life’ or ‘I have thought it would be better if I were dead’. Individual counselling appointments are offer in order that this risk can be explored further.

![Assessed risk](image)
Presenting need

Allocated counsellors identify the presenting need of the student, the broad break down of this is presented below based on Association of University and College Counselling (AUCC categories). The vast majority of students present to the counselling service with symptoms of anxiety, depression or both. However, a subset of those students arrive with some sense of the underlying problems which may have given rise to these symptoms: these students tend to be categorised according to that underlying problem (e.g. experience of abuse, struggle with own sexuality, feelings of hopeless in relation to the academic project, breakdown of relationship with a supervisor). Students who arrive anxious or depressed, but who are not able to conceptualise what the underlying difficulty might be are categorised simply according to their symptoms of anxiety or depression. In nearly all cases, counsellor and client together identify one or more specific underlying issues. (This new insight into the nature of their difficulties, and the resulting ability to conceptualise a way forward is one of the main sources of value of counselling). However, these are not reflected in the AUCC categorisation.

Waiting times

The average waiting time for initial appointments has decreased slightly. Waiting times depend to some extent on the student’s availability to meet, with academic commitments or vacation periods contributing to longer wait times.
The average waiting times for initial assessment appointments has reduced by a little over a day in 2016-17, however there is a significant range of waiting times with the longest being 76 working days, although this is likely to be due to a specific issue. 95.3% of students are seen within 20 working days (4 weeks).

Data on the proportion of student seen within a number of working days is calculated differently within the new case managements system, so direct comparison to previous years is not possible. Confidence is higher with the new data and is felt to give a realistic picture. Average waiting time will be included in the development of management data for service leads will assist in understanding delays and provide an evidential basis for service improvement.

**Attendance**

A total of 9,986 appointments were arranged during 2016-17, an increase on previous years (and noting a new recording method via the new case management system). Of these a total of 7,676 were attended, giving an overall attendance rate of 76.9%. A breakdown of non-attendance is shown below:

<table>
<thead>
<tr>
<th></th>
<th>2016-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attended</td>
<td>7,676</td>
</tr>
<tr>
<td>Student no show</td>
<td>839</td>
</tr>
<tr>
<td>Student cancelled</td>
<td>894</td>
</tr>
<tr>
<td>Counsellor cancelled</td>
<td>283</td>
</tr>
<tr>
<td>Other</td>
<td>294</td>
</tr>
<tr>
<td>Appointments made</td>
<td>9,986</td>
</tr>
</tbody>
</table>

With 23.1% of appointments not going ahead as scheduled, and a high rate of no-shows (8.4%) and overall cancellations (11.8%), additional work will need to be undertaken to better understand issues, particularly in light of increased demand and waiting times. Missed appointments accounted for the loss of 2,310 clinical hours to the service in 2016-17, equivalent to 1.34 FTE members of staff.

This noted the majority of cancelled appointments are filled with other students or assessments, and the level of no shows is lower than other universities and the NHS, where the rate is above 10%. The implementation of Titanium has allowed for the introduction of 48 hour appointment reminder emails which is hoped will improve the attendance rates.

Attendance data will be incorporated into monthly management reporting to support the service, and to understand any periods of peak no shows or cancellation. It is anticipated that this data will be reported in future years to understand trends of data.
Counselling interventions

The Counselling Service provides individual counselling sessions to students, along with group and workshop sessions designed to complement individual provision.

The counselling provided by the Service is primarily short intervention. The Service focuses on providing short term therapeutic interventions to support students, enabling them to continue and complete their studies. The service does not generally provide long term therapy to treat chronic mental health conditions, but will support students to succeed in their studies.

The number of individual counselling sessions provided has increased by 32.5% over the last five years, with a notable increase in 2016-17. This may be due to switching to the new case management system which reports all appointments made.

<table>
<thead>
<tr>
<th></th>
<th>12/13</th>
<th>13/14</th>
<th>14/15</th>
<th>15/16</th>
<th>16/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual counselling appointments</td>
<td>7,536</td>
<td>7,627</td>
<td>8,649</td>
<td>8,411</td>
<td>9,986</td>
</tr>
</tbody>
</table>

Individual counselling sessions

The average number of individual counselling sessions offered per student has declined over the past five years to 3.3 in 2016-17.

Whilst one reason for the decrease may be the wider use of therapeutic groups and workshops, increasing user numbers will limit the length of intervention that can be undertaken with a single student. Feedback from students would suggest that the number of sessions in some cases is not sufficient, with a notable increase in the proportion noting having too few sessions (increased to 12%), and the proportion of counsellors deciding to end sessions (increased to 17.1%)

The data on number of service users seen within a range of sessions for 2016-17 is presented below, in a different format to allow for consistency in trend reporting in light of new data system reporting. The data shows a continued decrease in the number of interventions offered and an increase in students offered 1 to 3 sessions, with a notable increase of 22.3% over the last two years.
Groups & Workshops interventions

The service offers a range of groups and workshops to support students outside of one-to-one talking therapy, and seeks to increase this provision. These have been developed to make it possible to offer a briefer period of individual, to meet the particular needs of students with significant mental health difficulties that entail, for example, difficulty regulating strong emotion without the need for long-term counselling, and to provide an alternative to individual counselling where this is appropriate.

Groups and workshops available include:

- Finding Your Voice - for social anxiety and assertiveness
- ACT - Acceptance and Commitment Therapy
- Can’t Work Workshops
- Mindfulness

In 2016-17 there were in excess of 390 places available on workshops and groups, each with a differing number of sessions offered. Attendance at these groups and workshops is not centrally recorded presently, although work is underway to transform the way that students can book onto group and workshop sessions.
Client Demographics

The following section examines the service user demographic by academic status. Due to reporting limitations with the new case management system it is currently not possible to report on age of service user or ethnicity, although this should be remedied for future years.

Level of Study
The number of students accessing the Counselling Service has continued to increase across all levels of study, with the UG:PG split remaining steady (51.7%:48.3%) compared with previous years.

The proportion of students overall accessing Counselling Services has risen to 10.6%, meaning that nearly one in every nine students accessed counselling in the last year. Looking at the same data by student type reveals that UG students have a higher access rate (11.7%), but this has leveled off slightly after steeper increases in previous years. Within our graduate cohorts, the proportion of PGRs accessing the service has increased, with a 47% increase in demand over five years. PGRs have also shown the steepest increase in service access on 2016-17. It is hope that planned intervention projects in the current academic year such as a PGR Peer Support scheme and expansions of the vicarious trauma work will ensure that the specific needs of these students are met.
Given the increase in service users over the past 5 years, it is expected that the numbers will continue to rise, based on a range of factors such as accessibility and awareness of the service and nationally reported increases in mental health difficulties amongst young people.

**Gender**
The distribution of gender has remained consistent with previous years, with 63.4% female service users and 36.6% male. This is in contrast with a consistent gender split of 45% female and 55% male that is found in the general university population. The over-representation of females and under-representation of males is common across the sector and in line with national mental health provision.

**Academic Division**
The data on the divisional breakdown of students utilising the service shows that Humanities students make the greatest use of the service with 1 in 7 students (14.2%) accessing counselling in 2016-17. Humanities Division does have the largest proportion of female students, and given the greater use of counselling services by female students this higher rate seems reasonable. The same rational can be applied to MPLS who have a lower than average proportion of service users (7.6%) and a higher male student population.
The proportion of Continuing Education students accessing counselling is very low, and this will be due to the high level of part time and distance learning students who would be very unlikely to access the service.

Medical Sciences has a slightly lower rate of engagement with counselling services, due to a combination of geographical barriers of access, with students unable to attend sessions at Worcester Street easily whilst based at the hospitals in Headington, and difficulties in attending daytime appointments. A similar position is evident for students undertaking teacher training.
Evaluation

Students who complete their allocated number of sessions are asked to complete an evaluation survey. Please note: these responses do not capture student feedback for those who make contact but do not attend, or who do not return after their initial assessment. The responses to this evaluation are presented firstly as an evaluation of service success, and latterly as perception and satisfaction.

Intervention Effectiveness

The charts below show the level of emotional difficulty reported by student before and after counselling provision. The data shows that pre-intervention over 40% of students had severe or very severe emotional difficulty. Post intervention 84% reported mild or moderate emotional difficulty, with severe or very severe difficulty reported by less than 5%. The data indicates a clear reduction in emotional difficulty through the provision of counselling intervention.

The rate of potential suspension is another indicator of service effectiveness, with the data showing a decrease in the number of students contemplating suspension or withdrawal following a counselling service intervention.

The service previously reported on standardised CORE data, as a clinical measure of intervention. This has been excluded for 2016-17 due to difficulties in reporting of outcome data in the new data system.
Student Evaluation and Satisfaction

The overall satisfaction with counselling interventions remains high, with 95.1% of service users stating that their overall experience was good or very good. This is a 1.2 percentage point improvement on the previous year outcomes.

The total number of sessions provided to students continues to fall, down to an average of 3.3 in 2016/17. This has coincided with a notable increase in the numbers of students reporting having too few session, up 66% on the previous year. The free text comments from the 2016 Student Barometer contain a number noting low session numbers and a corresponding failure to address the issues as presented.

Whilst clinical staff are best placed to determine the number of sessions provided to our students, this area will need to be monitored, and work undertaken to communicate what services Counselling provides to better manage expectations.
Student Barometer 2016

The annual Student Barometer survey issued each November takes a snapshot view of the student body. Overall satisfaction with Counselling services shows a small increase in previous years, as per the chart below:

Continuing previous data, male students report a higher level of satisfaction compared to female, even though the latter make up a greater proportion of service users. The course level trend, shown below, shows that postgraduate students have an increasing satisfaction with the service, whereas undergraduates, the majority of the service users show a general downward or stagnant satisfaction:

A couple of comments from the survey from service users:

‘University counselling service was very quick to offer me an appointment and counselling has been very helpful’

‘The counselling service was extremely useful but looked like it could do with more funding to cope. It helped me cope with some major issues and to get my studies and life back on track’
Front of House Evaluation

Accessibility and welcome of the service is an important aspect of the provision in limiting barriers faced by students attending counselling services.

Overall, the front of house service provided was very well received by students, with small increases in outcomes reporting in the metrics. It is hoped that with the building works completed in Worcester Street that the evaluation of the waiting and reception areas will further increase.
Forward View

Service demand projections
The percentage of the student population contacting the Counselling Service has been increasing at an average of 1.1% over the past 5 years, although in 2015-16 the annual increase in demand was only 0.5%. Previous modelling assumed static proportion of students (10%) accessing the service, however this does not fit recent trends, so an updated model is proposed that looks at an increase in the range of 0.5% - 1.5% each year, with an expectation of average increases maintained at 1.1%. The chart below shows this:

The potential increase in service demand will need to be further considered, as a 1% increase in demand equates to approximately 250 students, who may require 4 sessions each, necessitating an additional 1,000 clinical hours. As such, relatively small increases in demand have a significant impact on timeliness and delivery.

Based on the projections, in 5 years (2021/22) the increase in demand for the service could be in the range of 68% -159% higher than current, supporting up to 30.5% of the student population, although the level of registrations may plateau.

If demand increases at the higher rate (or higher), there will be a significant impact on waiting times for appointments and on the intervention options that can be offered, with the current offer of universal student access to effective individual counselling at risk. There is a likely impact on student satisfaction due to expectation of provision and what is deliverable.
Management data
The Executive Officer in SWSS is undertaking a project in 2017-18 with the service heads in Counselling to make use of the data within the new case management system to inform management decisions. This will look at the use of data on a monthly basis, and to explore the coding of data to better understand the service user and level of need, which in turn will inform future service direction and offer.

Emerging risks and mitigations

Number of sessions offered
Feedback from students indicates a small but increasing concern around the number of sessions offered. There is a risk that reducing session numbers down will mean that clinical issues are not dealt with, nor the appropriate level of engagement with students achieved. The impact of this is poorer feedback, and poorer clinical outcomes with an increased likelihood of students returning to the counselling service and further driving up of demand.

Non-attendance rates
Missed clinical sessions have an impact on waiting times and mean that counsellors have unused clinical time. A closer monitoring of non-attendance, and of policy of non-attendance should be considered to make better efficient use of clinical hours.

Disabled students
Changes to DSA funding, disabled students with long term mental health needs are receiving reduced funding and access to specialist mentoring, which will lead to potentially very significant pressures on the counselling service, especially as there is risk that these students could disproportionately consume resource compared to other students.

Skype counselling
The introduction of skype counselling to support students has the potential to lead to dramatically increased demand on the service, through accessibility to those students who have suspended, spending time abroad as part of their studies, and particularly students of the Department of Continuing Education who are completing degrees remotely. ContEd students are a particular risk as many are older adults with much more complex mental health needs.

Case Management system (CMS)
Titanium Schedule was implemented for 2016-17 and is working well, however more work is needed to understand the full capabilities of the system and to ensure that data and reporting aspects work for the service.

Student journey
There is a need to better understand the student journey through the counselling service and needs of the students using the service. The key questions that we seek to understand are:
• What are the needs and emerging needs of service users?
• What interventions are put in place or offered to meet these needs?
• What is the take up on these intervention routes?
• Understand the distinction between 1:1 counselling and group/workshop and outcomes of these interventions.

**Staffing and Resourcing**

In 2016-17 the Counselling Service employed:

<table>
<thead>
<tr>
<th>Position</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core counsellors</td>
<td>12.85 FTE</td>
</tr>
<tr>
<td>Medical consultant</td>
<td>0.20 FTE</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>3.69 FTE</td>
</tr>
</tbody>
</table>

The core counselling staff includes a service head and three deputies. The FTE figure comprises established staffing excluding associates and casual appointments. The service utilises associates, who are trainee counsellors at the latter stages of their training who undertake supervised counselling practise.

Counselling staff undertake regular training and development as part of their continuing professional development and professional accreditation. Key training was provided in the year on working with suicidal students and suicide prevention.

**Professional Standards**

The Counselling Service is staffed by a highly qualified and experienced team of counsellors and clinicians. There is a range of accreditations and registrations depending on the different qualifications and therapeutic modalities of the team member, and include:

- BACP (British Association of Counselling and Psychotherapy) - Accredited or Senior Accredited Practitioner
- UKCP (United Kingdom Council of Psychotherapy) - Accredited as Psychotherapeutic Counsellor or Psychoanalytic Psychotherapist
- British Psychological Society (BPS) - Chartered Psychologist
- Health and Care Professions Counsel (HCPC) - Registered Psychologist
- BPS Registered Applied Psychology Practice Supervisor
- Associate Fellow of the British Psychological Society.

There are also several members of the clinical team who are accredited clinical supervisors through the UKCP.

The Counselling Service operates under the ‘Ethical Framework’ of the BACP.