Maintaining a Counselling Service that is visible, valuable but also accessible
- Intake Counsellor: An innovative approach to managing demand.

Gerard Hoffman – Manager, Student Counselling
Linda Robertson – Intake Counsellor, Student Counselling
Workshop Outline

- Background of Student Counselling at Victoria University of Wellington
- Challenges around managing demand in student services
- Demand management principles, strategies and what we have tried
- Intake Counsellor (IC) pilot
- How the Intake Counsellor fits within the service
- Challenges for the IC role
- Shifts/Changes over time
- 2015 Evaluation of intake counsellor role
- Discussion
Mihi whakatau

Ka tangi te titi
Ka tangi te kaka
Ka tangi hoki ahau
Tihei Mauri ora!
Discussion

• What are the issues facing your service around demand and waiting time

• What have you done about it so far?
Student Counselling, Victoria University of Wellington

• 22,000 students
• 2014: 2150 students seen approximately 7000 times for individual counselling
• 8 FTE counsellors plus:
  • Specialist positions:
    – Intake Counsellor
    – Mental Health Coordinator
    – Wellbeing Educator/Advisor
    – Kairauhi Tauira (Māori Students Counsellor)
    – Consultant Psychiatrist
Demand management

‘Demand management therefore refers to the range of strategies that services have in place to ensure the needs of clients presenting for service are best served within the limitations of available resources.’

Responding to children and young people: demand management framework for sexual assault counselling services for children and young people. © Copyright State of Victoria, Department of Human Services, 2008.
Our challenges:

• 2011, Counselling Service moved into a new shared Health/Counselling facility centrally located
• Led to immediate increase in demand by 20%
• Waiting times for new appointments over two months at peak times
• At the same time we increased our University wide Wellbeing promotion activities
• Community mental health services under pressure
Impacts of long wait times

- Students not seen when they need to be
- Prioritised students in crisis or at risk, at the cost of others seeking support
- Complex and acute demand dominates
- University wide reputation for being inaccessible and unresponsive – lag time
- High level of DNAs
- Complaints
- Stress on staff and impact on service morale
- Ability to impact learning and academic outcomes affected - time sensitive environment
Demand management principles

1. Responsive
2. Therapeutic relationship begins at first point of contact
3. Minimise waiting times
4. Proactive
5. Quality
6. Safety
7. Protect staff
8. Equity
9. Priority access given to vulnerable and marginalised groups
Demand management strategies

1. First point of contact
2. Crisis management
3. Priority assessment
4. Duty appointments
5. Referrals
6. Waiting list management
7. Supporting clients who are waiting
8. Frequency and length of contact
9. Clients who do not attend scheduled appointments
10. Balancing short, medium and long term clients
11. Managing staff absences and periods of understaffing
12. Service exit

Responding to children and young people: demand management framework for sexual assault counselling services for children and young people. © Copyright State of Victoria, Department of Human Services, 2008
Demand management strategies – What the intake process links to

1. First point of contact
2. Crisis management
3. Priority assessment
4. Duty appointments
5. Referrals
6. Waiting list management
7. Supporting clients who are waiting
8. Frequency and length of contact
9. Clients who do not attend scheduled appointments
10. Balancing short, medium and long term clients
11. Managing staff absences and periods of understaffing
12. Service exit

Responding to children and young people: demand management framework for sexual assault counselling services for children and young people. © Copyright State of Victoria, Department of Human Services, 2008
Discussion

• How many demand management strategies are familiar within your service?

• What have you found to be the most effective?
Intake Counsellor Pilot

- Began by analysing workflow, waiting time
  - 2013 35% of students seen once only
  - 1900 students seen individually
  - 55% seen twice or less
  - Average 3.3 sessions per client per year
  - 2 month wait at busy time for new clients
  - Complaints from students and university staff
  - Counselling Service reputation under pressure
  - Increased counsellors provided short term relief only
Intake Counsellor Pilot – March 2014

• Key message to students and staff:
  – ‘Talk to a counsellor within several days’ (decision to prioritise equity of access and timely first contact)
  – Students in crisis able to be seen same day
  – Deal with team concerns about effectiveness, sustainability, and ethics of the pilot role
  – Recruit specialist counsellor to carry out one off triage/assessments/problem solving/referral
  – Engage student leaders in pilot design and recruitment
Intake Counsellor- key elements

• Develop new intake form and triage process
• Four ‘new client’ options:
  1. Quick question (brief same day duty counsellor)
  2. Emergency (same day duty counsellor)
  3. Appointment with previous counsellor
  4. Intake counsellor
   
   Plus: Mental Health Coordinator appointment (for complex presentations needing a care coordination approach)

• Reviewed frontline reception protocols
• Train team on the pilot – deal with change
• Resolve unintended consequences in client flow
Mauri Ora = a service including Student Counselling, Student Health, and the Support Team
Original Plan for the Intake Counsellor

• Students will be seen within 1-3 days
• Remembering back to what our data shows, with 35% of students had one session, so, the assumption was the IC will pick up many 1-session students
• 50 min Counselling follow up waiting time will reduce
• IC to see 7 students per day, 30 min sessions.
Intake Role Implementation

• Project team established
• Regular meetings held to review role fit, processes and value
• The need to deal flexibly with unintended consequences, in terms of client flow (i.e. when intake counsellor on leave, busy times of the year etc.)
• Time dedicated to resource and knowledge building
How we define the role to students and staff

On our Student Counselling web page

“Here at Student Counselling we provide short term counselling support for students, for any issues that are impacting on their studies (e.g. life challenges, relationships, family, sexuality, depression, anxiety, stress, alcohol/drug issues). When you first come to counselling you will be asked fill out a brief form, clarifying your needs. This will help us offer you the most appropriate appointment toward meeting your needs.

New to Student Counselling? Not currently seeing anyone at Student Counselling?

Most students new to our service will meet initially with our Intake Counsellor for a 30 minute intake session. The Intake Counsellor will clarify why you are here, assist you to begin resolving any immediate issues, and work with you to develop a plan/or first step to get you back on track with your life and studies. This could include a further booking at Student Counselling, or other support.”
Intake triage form – Part 1

Victoria University of Wellington
Student Counselling Service
Welcome to the Student Counselling Service.

Counselling Appointment Options

1. Please read the information below and tick which situations apply to you.

- I have seen a counsellor at Victoria Student Counselling before.

<table>
<thead>
<tr>
<th>Situation</th>
<th>Situation</th>
<th>Situation</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ I need quick advice from a Counsellor on a personal or academic issue</td>
<td>□ I would like to speak to a Counsellor because:</td>
<td>□ I am concerned about the safety of either myself or someone else.</td>
</tr>
<tr>
<td>□ Support for an extension</td>
<td>□ I am stressed, depressed or anxious and want help</td>
<td>Please let reception know if this applies to you</td>
</tr>
<tr>
<td>□ Late withdrawal or academic progress related issue</td>
<td>□ I need strategies to cope with stress, a breakup or a distressing incident or situation</td>
<td>A Counsellor will speak with you today</td>
</tr>
<tr>
<td>□ Exam/Aegrotat</td>
<td>□ I need support for any other issue</td>
<td></td>
</tr>
<tr>
<td>□ Worried about someone else</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

We will endeavour to have a counsellor speak with you as soon as we can. The Counsellor you meet with initially will listen to you, clarify what support you are seeking and determine how we might help you. If you need ongoing counselling there may be a waiting time following your initial appointment.
2. Please complete the following details:

Date: __________________________ Name: __________________________ Student ID#

Cell Ph: __________________________ Email Contact __________________________

Emergency Contact __________________________ Phone No __________________________

Year of study at Vic __________________________ Degree/Major __________________________

3. It would help us if you are able to tell us how we can help:

Please tell us briefly why you are seeking counselling support today?

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

What practical immediate outcomes would you like from your initial appointment?

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

(The information you write on this form is confidential and will be given directly to the counsellor you are to meet with)
How the Intake role is structured

- 6 x clients per day, 4 days per week
- Small gap between each client for notes, or to allow flexibility for a slightly longer session
- Other admin, team tasks, supervision, role responsibilities carried out at the end of the day or on the non-client day.
Challenges in the Role (20 months on)

• IC started on the back-foot, appointments for 50-min counselling booked 2-3 months ahead already
• Fitting the IC seamlessly within the team
• 7 students too many, 6 is a realistic number, four days a week, one day where I am involved in other activities – such as team meetings, projects, other admin tasks.
• Gaining job variety
• Seeing students and then there being a wait for counselling follow up
• Student and university staff perception that the Intake Counsellor is “not a real counsellor”, or doesn’t provide “real counselling”.

Capital thinking. Globally minded.
Questions Considered

• Would IC see referrals from Student Health?
• What happens to students who have accessed counselling in the past?
• What happens if safety concerns come up in IC session?
• What are the cross-overs and distinctions from Duty Counselling?
• How do we initially triage students to the most appropriate appointment?
• How do we incorporate the Support Team in the revised client flow
Shifts/Changes in IC Role Over Time

• Students seen within 1-2 weeks, sometimes 3 weeks or more
• 6 sessions per day, not 7
• IC has become a ‘go-to’ person with Mauri Ora for resources or options in the community
• The demand has continued to increase for the service and there are implications for this
Pros and Cons – IC point of view

• Demanding role, sustainability important
• IC wellbeing vital
• Information overload in sessions
• 30 min sessions are possible, however some space for flexibility is important. In reality sessions are approx. 40-45 mins
• Time buffer between sessions is important
• Having a non-client day each week is important
Impact of the IC Role

• From April 2014 – May 2015, 38% of students seen by the Intake Counsellor did not book a further counselling appointment
• A number of students who did book further counselling either cancelled this before the next session, or did not show up for it (DNA)
• The wait time for further counselling has reduced.
Student Evaluation of Intake Process

• In 2015 we decided to evaluate the effectiveness of the new intake process
• Survey designed in Qualtrics
• Distributed to all students, 573 in total, who had an Intake Session from 01/01/15 – 14/10/15
• 25.8 % survey response rate (n=142)
• Feedback sought from students on wait time for intake session and follow up counselling, how they felt about this, and their experience of the intake process.
• All responses were anonymous
• All data collected were student self-reports
Student Evaluation – Questions Asked

• How long ago was your intake session?
• How long the wait between when you booked the intake session and had your intake session?
• Did you go on to book a further counselling session following your intake session? If not, why not?
• How long was it between the intake session and the next counselling appointment? Was this wait OK for you?
• The student experience of intake counselling and the impact of this on the student’s life, study, and the issue they came along with.
Wait time for Intake Session

Student Perception of Wait Time for Intake Session:

Student Perception of Whether the Wait Was OK:
Wait time for a 50 min counselling session

Student Perception of Wait Time for 50 min Counselling Session:

Student Perception of Whether the Wait Was OK:
Was the Intake Session helpful for the students?

- Strongly Agree: (29.10%)
- Agree: (29.10%)
- Somewhat Agree: (14.18%)
- Neither Agree or Disagree: (11.19%)
- Somewhat Disagree: (6.72%)
- Disagree: (5.97%)
- Strongly Disagree: (3.73%)
Did the Intake Session assist students to clarify personal concerns & feel less worried or distressed?

The intake session assisted me in clarifying my personal concerns:
- Strongly Agree: 21.64%
- Agree: 23.88%
- Somewhat Agree: 24.63%
- Neither Agree nor Disagree: 12.69%
- Somewhat Disagree: 6.72%
- Disagree: 10.45%
- Strongly Disagree: 4.48%

The intake session assisted me to feel less worried or distressed:
- Strongly Agree: 18.66%
- Agree: 20.15%
- Somewhat Agree: 26.87%
- Neither Agree nor Disagree: 12.69%
- Somewhat Disagree: 6.72%
- Disagree: 10.45%
- Strongly Disagree: 4.48%
Did the Intake Session assist students to focus on their study & plan for how they could deal with concerns?

The intake session assisted me to be more able to focus on my studies:
- Strongly Agree: 23.88%
- Agree: 14.18%
- Somewhat Agree: 12.69%
- Neither Agree or Disagree: 11.13%
- Somewhat Disagree: 8.96%
- Disagree: 8.96%
- Strongly Disagree: 6.72%

The intake session assisted me in planning for how I could deal with my concerns:
- Strongly Agree: 22.39%
- Agree: 25.37%
- Somewhat Agree: 22.39%
- Neither Agree or Disagree: 9.70%
- Somewhat Disagree: 7.46%
- Disagree: 8.96%
- Strongly Disagree: 22.39%
Did the Intake Session assist students to discover some immediate solutions to at least some of their concerns?

- Strongly Agree: 7.46%
- Agree: 29.10%
- Somewhat Agree: 18.66%
- Neither Agree or Disagree: 12.69%
- Somewhat Disagree: 9.70%
- Disagree: 9.70%
- Strongly Disagree: 12.69%
Did the Intake Session assist students to discover some immediate self-care strategies?
In summary

• Wait times for initial meeting with a counsellor have reduced considerably throughout the year (same day or 2 to 3 weeks)

• Follow up wait times still an issue
Questions/Comments?