Student Counselling Service Annual Report
2022/23

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1. Introduction

1.1 Service Overview

“The university counselling service has helped me immensely in navigating an unprecedented period of emotional distress in my life. I was particularly grateful to have this support given how isolated postgraduate research can be, and the time I have had to spend away from university life as a result of my personal circumstances. I found my counsellor and the admin team incredibly professional and compassionate at all times.”

*Student feedback*

The Counselling Service provides accessible, responsive, specialist therapeutic services to students seeking support for emotional, psychological and mental health difficulties. All our work is grounded in a sophisticated understanding of the diversity of our community and awareness of both the opportunities and complexities of life at Oxford. All students are guaranteed an initial assessment appointment within a maximum of 15 working days, to explore the nature of the difficulties experienced and to co-create a timely, appropriate and achievable plan using a strengths-based approach. All counselling interventions are formulated with an explicit awareness of and reference to the wider context of student’s lives and studies and draw on the multi-disciplinary specialisms across the team and department, the Collegiate University welfare system, and wider external services including NHS. Where appropriate we work proactively with welfare and NHS colleagues, co-ordinating support, always in accord with student’s needs and wishes.

The majority of students attend brief, individual counselling, complemented and supplemented by a broad range of workshops, therapeutic groups, Peer Support, online resources such as Togetherall and collegiate welfare support. Recognising the varying needs and circumstances of our students, and grounded in the principle of equity, around 10% of students are offered a longer-term intervention, typically arranged flexibly over the term and academic year and in co-ordination with NHS and college welfare provision.

The Peer Support Programme and Staff Mental Health Awareness training are delivered by service clinicians and are closely aligned. The clinical team provide clinical consultation, supervision and staff reflective practice across the University, in addition to college and link counselling services.
1.2 Executive summary

The Counselling Service are pleased to share this summary report of the work of the team through the academic session 2022/23, a year that has been marked by both constancy in our core offering of specialist individual and group counselling, and flexibility in adapting to the dynamic psychological needs of undergraduate and postgraduate student populations in the context of an ever-shifting biopsychosocial mental health landscape. We would like to thank the students who approach us with the trust and confidence to share their personal difficulties, something we recognise is itself an act of courage. We would also like to thank the Joint Student Mental Health Committee and welfare, academic and professional services colleagues across the Collegiate university whose collaboration and guidance enables this work and ensures strong outcomes. Headline outcome and impact data are as follows:

**Total students, individual counselling:** 3,228 students registered for individual counselling in 2022/23, 12.4% of the total student population; the majority were seen at the central service in Worcester Street, with 526 seen by a counsellor in college.

**Total students, groups and workshops:** 827 students attended groups and workshops.

**Waiting times for appointments:** The service sees 33% of students within 5 working days, 59% within 10 days and 80% within 15 working days of registration.

**Clinical outcomes:** The service continues to report outstanding clinical outcomes, the most compelling being that prior to counselling 48% of students rate their level of emotional difficulty as ‘very severe’ or ‘severe’, and only 16% rate their level of emotional difficulty as ‘mild’ or ‘moderate’. After engaging with the counselling service this is reversed, with 75% of students rating their level of emotional difficulty as ‘mild’ or ‘moderate’, and only 7% rating their difficulty as ‘severe’ or ‘very severe’.

**Student Feedback and Evaluation:** 85% of students rated their overall experience at ‘very good’ or ‘good. 88% said their counsellor was ‘very good’ or ‘good’ at listening and understanding;

**Impact and Academic Retention:** 21% of students indicated that when they first came to counselling, they were “thinking about suspending or withdrawing from the university”; only 7% of students were thinking about suspending or withdrawing by the end of counselling.

**Supporting others to support students - Training, Peer Support, welfare supervision, clinical consultation and guidance services:** In addition to direct support for students the Counselling service fulfils an essential function providing clinical consultation, guidance, risk assessment and management support across the Collegiate university through the duty counsellor provision, staff mental health awareness and Junior Dean training and extensive individual and group welfare supervision. The service is deeply appreciative of the opportunity to contribute perspectives based in psychological insights into complex problems and work with colleagues to determine and implement creative and compassionate solutions, underpinned by robust clinical governance.
2. Individual Counselling

“During our first session this term, I was dealing with thoughts of suicide and had a plan and means to carry it out. I was hesitant to be vulnerable and reluctant to disclose my suicidal thoughts, as I didn't believe others could be helpful in my crisis moment. Nevertheless, my counsellor skilfully and sensibly assessed the situation and gathered relevant information in a compassionate manner that did not feel threatening. She showed genuine care and provided a safe space for me, respect my wish of not be sent back to NHS for repeat assessments. It was also incredibly helpful to be able to openly discuss suicide, as others often panic and refer you to multiple services......Towards the end of our sessions, I feel much more hopeful and less suicidal, and I see a brighter future.”

Student feedback

A total of 3228 students registered for individual counselling in 2022/23, 12.4% of the total student population; the majority were seen at the central service in Worcester Street, with 526 seen by a counsellor in college as part of the On-Site Counsellor (OSC) Scheme. This compares with a total of 3595 students seen in 2021/22, of whom 3,005 were seen at the central service and 620 in colleges. This represents a slight reduction in overall student demand from the previous year, closer to the numbers seen prior to the pandemic. The pattern of requests across the academic year remains stable, with Michaelmas and Hilary terms seeing the highest registration numbers.
2.1 Waiting times

“Waiting times were far shorter than I was expecting which was good (based on my undergrad university where the waiting time was about a term, here it was about a week)”.  

Student feedback

The percentage of students seen in fewer than 5 working days has decreased from 42% in 2021/22 to 35% of students in 22/23. Overall, 80% of students were seen within 15 working days compared to 79% in 2021/22. The average waiting time for initial appointments increased from 9.4 working days in 2021/22 to 10 working days in 22/23. The increase in waiting times is due to staffing vacancies at peak points across the year, a factor addressed through further recruitment in summer 2023. Notwithstanding the longer waiting times for some, 83% of students indicated that they found the wait ‘easy to manage’ or ‘manageable’ during 2022/23. All students are contacted within one working day of their initial enquiry, and registration forms are reviewed and triaged daily, Mon-Friday, to ensure students with a priority need are seen quickly.
2.2 Referrals

Referral routes have remained largely stable with most students self-referring. Referral or signposting by college welfare, GP, nurse, tutors, peer supporters and other University staff reflects the successful co-ordination of support. 'Other' may include parents, friends or Common Room welfare reps.
2.3 Presenting issues

The Association for University and College Counselling Services (AUCC) system is used to categorize student presenting issues. These categories make it possible to compare data between services, and to aggregate data from many services to identify trends in the sector as a whole.

Presenting issues fall under 15 general headings. However, the majority of students present with issues falling under just 7 of these: Anxiety, Depression & Mood Change or Disorder, Relationships, Academic, Self & Identity, Loss, Other Mental Health Conditions and Abuse. These 8 categories accounted for nearly 90% of cases in 2022/23. All of the remaining categories account for the remaining 10% cases.

Anxiety remains largest single category of presenting issue, with a slight reduction in percentage of presentation from 33.7% in 21/22 to 31.1% in 22/23. This seems to confirm reports showing increased anxiety in the general population and particularly in young adults over the past decade. There were some small changes in the other categories. It is important to note that these figures representing the initial student defined presenting problem do not reflect subsequently identified co-existing conditions or problems.

2.4 Counselling session distribution

The average number of sessions per student was 3.35 in 2022/23. There is significant variation in the length of engagement, and we regard this as a great strength of the service. Rather than imposing a ‘one-size-fits-all’ approach, we give our professional counsellors freedom to make clinical judgments about the length of their engagement with each individual student, consistent with the need to manage their allocated caseload, and the presenting level of risk. Around 10% of students are offered longer term support, they are typically experiencing complex difficulties and/or who are dealing with complicated life situations. Their support is typically arranged flexibly over the term and academic year and in co-ordination with NHS and college welfare provision.
3. Medical consultations

As noted above, the service employs a medical consultant (psychiatrist), whose remit is to provide consultation to the team and, on a limited basis, to students. The medical consultant is not able to offer treatment, or medical prescribing, for the mental health problems of students. Their role is to develop an understanding of and formulate a plan to manage a range of conditions including providing advice on the most appropriate course of action, i.e. to advise the student’s GP to make a psychiatric referral. In academic year 2022/23, the medical consultant saw 182 students for psychiatric consultations. The most prevalent conditions amongst the students attending appointments were severe depression, neurodivergent conditions, a range of eating disorders, bipolar disorder, emotional instability and students presenting with a high degree of risk of harm to themselves or others.
4. Trauma Clinic

The majority of students who experience a traumatic event are effectively supported through the normal pathways of individual counselling and or an appropriate group but in specific cases more specialist provision accessed via the in-house Trauma Clinic is an option. The Trauma Clinic was established after a successful pilot in 2015/2016 with a limited provision of EMDR (eye movement, desensitisation and reprocessing) to students experiencing post-traumatic symptoms following a single event trauma. The provision is generally limited to 4 sessions of EMDR and suited to students who are otherwise functioning well and who are committed to facing what might be most difficult and painful. This brief model of EMDR is not suitable for students who have experienced complex trauma or are clinically vulnerable.

Over the academic year 2022-2023, the Trauma Clinic comprised of three counsellors, who worked with 6 students across the year – far more students were considered by the team, however the complexity of trauma profiles it most cases requires a longer-term protocol beyond the remit of the service. Looking ahead there is momentum to expand the service through both the addition of EMDR trained staff and a broadening of the offer to encompass other modalities.

5. Groups and Workshops

During the academic year 2022-23, the groups and workshops programme was offered flexibly online and in person and a total of 827 students attended group and/or workshop sessions. A rotation of 39 workshops and 24 groups across the academic year provided a diverse portfolio which generated buoyant sign-up rates and good engagement. Workshops are developed as psychoeducational content delivered in 1 to 3 sessions. The groups are 4+ sessions, running across the academic year, in either structured or semi-structured ways to support particular groups or address specific clinical needs.
In contrast to the previous year, group and workshop facilitators noted that students reported less interest in attending groups online, though the reception of online/in person mode of the workshops appeared to be mixed. One possible conclusion in the difference appeared to be the more didactic and psychoeducational nature of workshops, which can possibly be easier to engage with online. With this feedback in mind, over the course of the year we increased the number of in-person groups and workshops available to students.

Continued liaison with the Gardens, Libraries, and Museums (GLAM) enabled several workshops including, Perfectionism, Forest Bathing, Managing Sleep, Finding Your Voice, to take place in settings such as the Ashmolean, the Botanical Gardens, the Pitt Rivers and Museum of Natural History. Students were able to access these workshops without prior registration with the Counselling Service. Feedback and clinical measures evidence the positive impact of facilitating such psychoeducational workshops in non-clinical spaces.
6. Clinical Outcomes

“I think the counselling sessions really helped me articulate my jumbled thoughts and feelings, provided neutral perspective to look at my problems, offered support, understanding, warmth and courage. I also learned some tools like grounding and then around decision making, which helped me carry out my studies amidst the difficult personal circumstances.”

Student feedback

The service continues to report outstanding clinical outcomes, the most compelling being that prior to counselling 48% of students rate their level of emotional difficulty as ‘very severe’ or ‘severe’, and only 16% rate their level of emotional difficulty as ‘mild’ or moderate’. After engaging with the counselling service this is reversed, with 75% of students rating their level of emotional difficulty as ‘mild’ or ‘moderate’, and only 7% rating their difficulty as ‘severe’ or ‘very severe’.

6.1 Clinical Outcomes: What is CORE?

The service uses Clinical Outcomes in Routine Evaluation (CORE) analysis with students, a questionnaire administered at each appointment. CORE measures psychological distress and its impact on functioning across four domains: subjective well-being, problems/symptoms, functioning and risk to self or others. It yields a score for each domain and a single overall score. Scores range from 0 to 136, where 0 signifies ‘no disturbance’ and 136 signifies ‘maximum disturbance’. Scores below 34 suggest a low (sub-clinical) level of distress. Scores above 34 reflect clinically significant disturbance. CORE enables us to monitor the severity of the symptoms with which our students present for counselling while also allowing us to measure the effectiveness of our work by comparing students’ pre-treatment, session by session, and post-treatment CORE scores.
6.2 Results

CORE outcome data for 2022/23 is consistent with the preceding several years’ data and demonstrates both the high levels of distress and consequent impact on functioning at the point of initial assessment and the significant reduction in distress and improved daily functioning following intervention from pre to post scores. The tables below illustrate this, noting in particular that at the point of entry over 60% of students are presenting with moderate to severe levels of clinical distress and disturbance. Following counselling 70% are within the mild/low and healthy clinical symptom range.

<table>
<thead>
<tr>
<th>Core Score</th>
<th>Category</th>
<th>Clinical need</th>
<th>Percentage pre-intervention</th>
<th>Percentage post-intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;21</td>
<td>Healthy</td>
<td>Sub-clinical</td>
<td>4.53%</td>
<td>21.23%</td>
</tr>
<tr>
<td>21-33</td>
<td>Low distress/disturbance</td>
<td>Sub-clinical</td>
<td>10.54%</td>
<td>21.23%</td>
</tr>
<tr>
<td>34-50</td>
<td>Mild distress/disturbance</td>
<td>Clinical</td>
<td>24.81%</td>
<td>27.37%</td>
</tr>
<tr>
<td>51-67</td>
<td>Moderate distress/disturbance</td>
<td>Clinical</td>
<td>31.35%</td>
<td>18.99%</td>
</tr>
<tr>
<td>68-84</td>
<td>Moderate/severe distress/disturbance</td>
<td>Clinical</td>
<td>20.68%</td>
<td>8.94%</td>
</tr>
<tr>
<td>85+</td>
<td>Severe distress/disturbance</td>
<td>Clinical</td>
<td>8.10%</td>
<td>2.23%</td>
</tr>
</tbody>
</table>

CORE will continue to be used at the Counselling Service to gather long term data and from 2022/23 is aligned and contributing data to the SCORE Consortium research project, establishing a national minimum data set for counselling.
7. Student Feedback and Evaluation

“Listening and thinking / talking through a topic over a number of sessions was really helpful, as was signposting to useful resources. I am feeling better about things, and the counselling sessions played a really important role in that. The counsellor was excellent, very kind and listened closely during our discussions. I am very grateful to her and the service for the support.”

Student feedback

The Counselling Service routinely gathers feedback via a survey given to students attending two or more sessions upon completion of counselling. Return rates for evaluation forms has dropped with increasing use of online form, however, survey results are in line with previous several years, suggesting consistency in standards of service provision, student experience and satisfaction. Students responding to the main CS survey expressed high levels of satisfaction:

85% of students rated their overall experience at ‘very good’ or ‘good.

88% said their counsellor was ‘very good’ or ‘good’ at listening and understanding;
83% said their counsellors’ contributions were ‘very good’ or ‘good’.

![Pie chart showing how helpful the contributions of the counsellor were.]

75% of students rated the number of sessions they received as ‘about right’, 24% rated it as ‘too few’.

![Pie chart showing the total number of sessions.]

21% of students indicated that when they first came to counselling, they were “thinking about suspending or withdrawing from the university”; at the end of counselling only 7% of students were thinking about suspending or withdrawing.

![Bar chart showing students thinking of suspending pre & post counselling.]

<table>
<thead>
<tr>
<th></th>
<th>Post</th>
<th>Pre</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes to Suspending</td>
<td>7.1%</td>
<td>21.0%</td>
</tr>
<tr>
<td>No to suspending</td>
<td>92.9%</td>
<td>78.2%</td>
</tr>
</tbody>
</table>
8. Student demographics

Demographic data is shown for students who access central service (12.4% of total the student body).

8.1 Level of study

As for many years, a higher proportion of Undergraduate students than Postgraduate students access counselling. This is evidenced in the chart below, for example 48% of students at Oxford in 2021/22 were undergraduates. Of the students that accessed the Counselling Service, 53% were undergraduates.

8.2 Academic Division

The pattern of participation in counselling by Academic Division is slightly less marked than in previous years, though Humanities students continue to be over-represented and students in MPLS slightly under-represented. The differences in levels of attendance from the Academic Divisions may be explained by the differences in terms of gender representation of the Divisions (See below). These graphs show students who used the central service. Some of this data may also reflect varied workload and scheduling considerations for students across divisions.

8.3 Sex

In 2022/23 67% of students accessing the counselling service registered as female, and 33% as male. [Note: Please note that these figures are based on students’ legal
sex as declared to the university, and that many countries (including the UK) do not allow for a non-binary legal sex. This data therefore will not reflect true numbers of transgender, non-binary and gender questioning service users.

8.4 Ethnicity
The Counselling Service sees most ethnic groups of students roughly in proportion to their representation in the general student population, for example 3.6% of Oxford students identify as black, and 3.5% of students accessing counselling identified as black in 2022/23. It is important to note, however, that a slight overrepresentation of white students persists. (62% of students accessing counselling identify as white, against 59% of Oxford students overall). There has been improvement in engagement with Chinese students, an increase from 7.3% of service users in 2021/22 to 12% in 2022/23 and the Counselling Service continues to proactively work to maintain the ethnic diversity of the counselling clinical team and has had success in recruiting black and brown counsellors.
9. Other Service Activities

9.1 Clinical consultation and risk management

Over the course of the 22-23 academic year, we worked on improving our response to ever increasing demand, through fine tuning our duty and allocations processes. Closely monitoring the trends in requests for counselling appointments allowed us to change allocations practices, resulting in reduced waiting times and a smaller waiting list in contrast to the previous academic year. With the information from this academic year, we have made further changes to better prepare for the expected annual increase in the demand for appointments for the academic year 23-24.

During this academic year, we have increased the availability of our duty counsellors both internally to our counsellors and externally for staff and students within the university. The Duty Counsellor, available during working hours for callbacks, aims to offer guidance and support in situations where a therapeutic perspective might be useful.

The Duty Counsellor role is taken on by highly experienced clinicians to ensure incoming requests for counselling are managed in the most efficient way. The Duty Counsellor, oversees incoming communications to the service that may need clinical input and 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 that individual. Risk has historically been given a numerical indication of severity in the range of 0-3. This system was refined during the course of the year (April 2022) to better differentiate between different types of presentation, not all risk-related, and so the data presented here represents both risk ranges. Students presenting as high and moderate risk are immediately contacted and fast tracked to appropriate medical care. The changes made to the way that risk is evaluated enables greater differentiation between presentations. The percentage of students presenting with moderate risk has therefore risen from 2.3% in 2020/21 to 9.3% after April 2022. The new system has therefore made it easier to identify students presenting with varying risk profiles and respond accordingly.

![Assessed risk 2022-23](image)

9.2 On-Site College Counsellor Programme

The Counsellor-on-site (College Counselling) Scheme was launched in 2017/18 in response to students and staff in many colleges expressing a strong desire for
students to access counselling in colleges. The scheme has expanded over the past 5 years with a total of 18 Colleges currently retaining a college counsellor. Counsellors are present in colleges as a satellite provision with college counsellors making counselling available on college premises for up to one day per week. The scheme delivers individual, brief therapeutic interventions alongside welfare team support and liaison and provision of relevant, themed workshops as required. The college counsellor remains employed by the central service; management and clinical supervision is provided within the central service and counsellors are insured under university policy. Our central case management system (Titanium) is used remotely by counsellors on college sites to maintain the highest standards in confidentiality and student record management. Remote access to Titanium is available in all college sites.

9.3 Associate Programme

For nearly 30 years, the service has run an Associate Counsellor Programme offering supervised clinical placements to counsellors completing graduate-level qualifications in Psychodynamic Counselling, Counselling Psychology, Cognitive Behavioural Therapy and Integrative Psychotherapy. For many of our Associates this is their first experience of clinical work. For others who have already worked with clients, or are in the early stages of qualification, we offer a supported next-step towards accreditation and higher-level qualification. All our Associates are in training and receiving commensurate support. They are also intensively supervised in the service and receive additional CPD in the form of staff meetings, clinical discussion groups with the wider team, support and mentoring as required, and are offered other developmentally appropriate opportunities such as involvement in running groups and workshops. As a service we take pride in supporting the professional development of future counsellors and enabling our clinical team to develop professionally as supervisors. The Associate Programme offers an intensive apprenticeship to clinicians who develop the specialist skills to work effectively in our context. Over the years, many of our Associates have eventually joined our core staff team. We also know that Associates who move on from the Counselling Service go on to sought-after clinical roles in both the public and private sector.

The Associate programme further supports the work of the Counselling Service by enhancing our capacity to offer longer-term counselling to students. In 2022/23 we hosted 7 Associate Counsellors who worked with 61 clients, totalling an average of
13 sessions per client for a total of 799 sessions offered. We were also able to offer 40 hours of additional group work to 25 students.

9.4 Peer Support Programme

The Peer Support Programme continues to thrive after three decades and remains the largest and most successful University programme in the UK. A full report of the work of the Peer Support Programme for 2022/23 is supplied separately.

9.5 Staff Counselling Service Pilot

In October 2022, the University’s Pilot Staff Counselling Service was launched, to run for a 12-month period. Originally conceived as part of a whole-university approach to mental health as advocated by Student Minds, funding for the pilot was provided by the University’s Wellbeing Programme Board. Planning was jointly undertaken by the University’s Wellbeing Programme Board, Occupational Health Services, and the Counselling Service. Six senior Grade 8 clinicians from the Counselling Service were seconded to the pilot, offering 1.3FTE over 5 days a week, both in person and online. The Counselling Service management team undertook the daily triage, risk management and allocation of appointments in order to maximise the clinical time of the counsellors working on the pilot.

The pilot went live on 3rd October 2022 with a soft opening via HR Business Partners and the Occupational Health website, as there was no data available on which to anticipate demand. All clients were offered up to six sessions, and counsellors were supported in this work with fortnightly group supervision and line management. As anticipated, demand for the pilot service was high and the waiting list was closed at various intervals during the year to manage demand and ensure that all clients could be seen during the life-cycle of the pilot. At all times, enquirers and those on the waiting list were signposted appropriately, with Duty Calls with counselling service managers available to manage emerging difficulties. Data across a number of areas was collected and collated to provide a means to monitor and evaluate demand for the service and its outcomes in terms of improved staff welfare:

- Between October 2022 and September 2023 193 members of staff at the university attended a first session of counselling, resulting in 926 individual appointments over the course of their therapy.
- 57% of clients had between 1-5 sessions and 43% had six sessions.
- Dnas were low, at just 8, possibly aided by the counselling team maintaining a flexible approach to re-scheduling around annual leave and other internal work-related activities.
- The age of clients accessing the service ranged from 21 to 62.
- 42.5% were academic staff, 57.0% were support staff and 0.4% were from TSS.
- 42.1% of clients had not previously consulted any sort of mental health practitioner.
- Approximately 73.2% of referrals to the service were self-referrals with the remaining coming from line managers, colleagues, the GP, occupational health, and HR.
- The average time on the waiting list was 37.67 days but this date only refers to ‘accepted appointment’ and does not detail clients who were kept on the waiting list because of declined appointments.
The Pilot Staff Counselling Service Evaluation Survey results are based on both quantitative and qualitative data. Staff were asked to numerically indicate the level of emotional difficulty they were experiencing (1 = mild, and 5 = very severe).

- Prior to counselling the average severity rating was 3.82. Post counselling the average severity rating had reduced to 2.45, reflecting an improvement in the average level of emotional difficulty experienced.
- 43.54% reported that their difficulties related to a mixture of personal/life circumstances and work-related reasons, with 11.29% reporting that their difficulties were exacerbated by work.
- 18.33% reported that counselling was the most significant factor in the improvement of their level of emotional difficulty, with 56.66% citing counselling as an important factor, and 96.77% finding the contributions of the counsellor helpful.
- Staff rated their experience of the service as 4.68 out of 5 with 56.45% stating that the total number of counselling sessions was ‘too few’ and 43.54% ‘about right’.

The counselling team very much enjoyed the opportunity to support their colleagues in the wider university community and have found that it has enhanced their student work. It was with some sadness the pilot came to an end with no plans to roll out the service. The project would not have been possible without the dedicated work of particular members of the Occupational Health and Counselling Service teams, for which we are extremely grateful.

9.6 Staff Mental Health Awareness Training

Overview of Role and Activities

The second year of the pilot Mental Health Training Development Coordinator has been phenomenally successful, with an extensive programme of general and bespoke training packages delivered to over 800 staff across the collegiate university and associated departments. The training promotes a consistent approach to student welfare, in line with the Common Approach to Support Student Mental Health and supports staff to feel more equipped and confident when encountering and supporting students in distress, as well as helping staff to understand the nature of their role in such situations, including its limits.

In 2022/23 fifty-five half-day Mental Health Awareness (MHA) trainings were delivered to over 800 staff, just under half of which were delivered to staff in collegiate roles. Several additional trainings were arranged specifically for welfare staff in departments and colleges taking on new roles as welfare advisors to students. The training overviews the Joint Student Welfare Committee’s guidance on supporting students in distress, provides guidance and advice on how to recognise and respond to common mental health presentations thoughtfully and pragmatically, deals with issues of risk, including the risk of self-harm and suicide, and gives information on when, where and how to signpost to appropriate support services. The training continues to attract positive feedback from participants with the overwhelming majority of attendees reporting an increase in confidence in dealing with mental health issues following the training, along with reports of feeling better equipped to signpost to appropriate support services both within and outside of the university. Overwhelmingly participants rated the training as being very good or excellent.
Since taking on the role of training coordinator, the training role has now been extended to offering half-day mental health awareness training to staff wishing to learn how best to support colleagues experiencing mental health distress in the workplace. This has proved to be a popular training with approximately a third of training requests now coming from staff seeking workplace MHA training.

As part of her role, the training development coordinator is active in promoting good mental health across the university and routinely delivers talks and workshops for staff on a range of mental-health and wellbeing topics. More recently a well-received blog on *Practical Strategies to Support Mental Health* was published on the Staff Gateway. In collaboration with the University’s Wellbeing Programme team a number of workshops on mental health were additionally delivered as part of the Wellbeing Teams *Thriving at Oxford 2023* event series in Trinity Term.

**Future Plans**

In addition to delivering mental health awareness training to support staff encountering students in distress, a feature of the post-holder’s role is to review existing mental health training models in the university, such as Mental Health First Aid training. The aim is to develop a system whereby those who have received training from external mental health training providers are integrated into the university-wide system of mental health awareness training to ensure a coordinated and coherent approach to supporting students in distress. The appointee has worked closely with the Staff Wellbeing Programme Team to develop continuous professional development opportunities for such staff. Following a successful pilot in Trinity Term, the Wellbeing Team, in collaboration with the Counselling Service, are preparing to launch a series of mental health masterclasses on a range of topics along with a programme of reflective practice sessions, delivered by experienced clinicians from the Counselling Service. This collaboration will give Mental Health First Aiders across the university the opportunity to build on and consolidate their existing skills and knowledge, thereby ensuring consistency of approach to supporting students in distress.

**Staff feedback**

- Very clear, relevant input. Lots of practical tips.
- Comprehensive, reassuring and calming. Helpful information on signposting.
- Lots of examples and advice on how to deal with different scenarios with students.
- Very informative; good slides and lots of link with pointers for more information and sources of help.

**10. Staffing and resources**

For the year 2022/23 overall clinical staffing increased, following successful recruitment from 14 FTE in September 2022 to 16.4 by summer 2023, slightly exceeding the 15.7 FTE of 2020/21. All posts were supported through our core budget with the exception of the Training Development Co-Ordinator post, funded for a second year by the Walter Gordon Trust Fund.

**Staff development**

As in previous years, we are committed to a model whereby we expect all counsellors to be able to work with the full range of presenting issues. In addition to
this, many of our staff have significant expertise in particular presentations or


treatment modes. Across the team, to cite just a few examples, we have staff who


have worked in NHS Specialist services including Trauma, Forensic Psychiatry, Eating Disorders, Child and Adolescent Mental Health, ADHD amongst many others. Our staff have specialist qualifications in Cognitive Behavioural Therapy (CBT), Mindfulness, Acceptance and Commitment Therapy (ACT), Compassion-Focused Therapy (CFT), Eye Movement Desensitization and Reprocessing therapy (EMDR), and many other established therapies.


We continue to prioritise skill-sharing and CPD within the team, with fortnightly staff and training meetings alternating with small-group clinical discussions, in addition to the regular clinical supervision in place for all members of the counselling team, at every level. The Counselling Service operates under the ‘Ethical Framework for Counselling Professions’ of the BACP.


11. National Liaison

The Head of Counselling is engaged, nationally, with a number of strategic areas of work through roles including chair of the Heads of University Counselling Services (HUCS) network (BACP Universities and Colleges Division), co-chair of the national Mental Wellbeing in Higher Education Group (MWBHEG; Advance HE) and positions including executive board member of the Universities and Colleges division, BACP and the Student Space (Student Minds) Advisory group.

Deputy Heads of Service hold a broad portfolio of key partnerships: The Student Wellbeing in Experiential Learning Spaces Project promotes wellbeing across academia and welfare and facilitates students accessing non-clinical spaces for learning and psychoeducation. The ongoing liaison with Oxford’s Gardens, Libraries and Museums (GLAM) has provided clinical and academic support for research project, from running psychoeducational workshops in GLAM spaces and providing clinical and statistical evidence to research due to be published in the International Review of Psychiatry. The research outputs have contributed to the Transforming Access and Student Outcomes in Higher Education (TASO) Student Mental Health Evidence Hub Digital Repository, which provides information and guidance for the HE sector on improving efficacy of student mental health support, as part of the Student Mental Health Project.

The service leadership team continue to liaise actively with NHS services for eating disorders, crisis, and other mental health needs, facilitates better care for students both directly and indirectly, through knowledge and referrals. Work with the local Adult Community Eating Disorders (ACED) service is facilitating better informed referrals for both parties. A small interest group within the service is currently working towards more clearly defined remits of support with links to external services such as ACEDS and other HE counselling services.

12. Conclusions and looking ahead

Anticipating future demand, strategic alignment: The Counselling Service is reviewing current service provision, in consultation with the Joint Student Mental Health Committee and aligned to the Common Approach to Student Mental Health, to stratify and understand the range of psychological and mental health support needs of students across the University population.
**Supporting students with complex mental health conditions:** the service is focussing specifically on the needs of students experiencing severe, complex and enduring mental health difficulties, working to ensure that our services are appropriately comprehensive, diversified and co-ordinated.

**Clinical governance:** The Counselling service are using the opportunity presented by joining the University Mental Health Charter Programme to constructively review systems and processes to ensure robust clinical governance arrangements. UUK Suicide Prevention and Postvention guidance is similarly being consulted.

**Triage:** New administrative systems and ways of working are being tested relating to triage, fairer distribution of appointments based on needs and urgency, and improved management of waiting times.

**Accessibility:** The service has identified accessibility as a priority area for review in 2023/24, to ensure any perceived or tangible barriers to access and engagement are identified, understood and mitigated wherever possible.

**Partnership:** The Counselling team have developed a number of new initiatives in partnership with the Sexual Harassment and Violence service, and Disability Advisory Service, and seek to expand this further. Areas under consideration currently include support for students who have experienced domestic violence and support for neurodivergent students.

**Research Practice Networks:** The new leadership team are committed to further developing research-practice links, both within and beyond Oxford, to further embed evidence-based practice within the service and demonstrate the positive impact of our work. This will build on exiting involvement in external research projects such as SWELS, Social Prescribing, and Reducing Digital Distractions in addition to new partnerships with Psychology and Psychiatry.

**Hybrid Provision:** The service will continue to offer both in-person and online individual and group counselling to students, balancing student preference, clinical suitability and judicious use of physical space, aligned to the university New Ways of Working.