# 2019-2021 Biennium Internal Budget Proposal Narrative

**Division:** Enrollment & Student Services

**Evaluation Criteria:** Proposals will be evaluated on every aspect of this template. It is highly recommended that the narrative portion touch on each area. Proposals forwarded to UPRC by unit leaders will be discussed at UPRC and authors are encouraged to attend so that they may answer questions and provide clarification.

#### Counseling Center Staffing, Diversity Needs, and support for Student Mental Health

This is a revised version of a previously submitted budget proposal.
If box is checked please briefly outline any significant changes and/or indicate why it is
being resubmitted.

**Statement of Purpose:** (What is the challenge or opportunity being addressed? How does the proposal address this challenge or opportunity? Limit response to 1 page – please link to any existing reports, data, supplemental materials, etc.)

#### REQUEST FOR ADDITIONAL PROFESSIONAL STAFF

Requesting two positions: a multicultural specialist (a doctoral-level licensed psychologist) and an additional mental health counselor (master's level)

Counselor/Psychologist who is the Multicultural Specialist could potentially provide an "embedded position" in the new Multicultural Center Reason:

The Counseling Center has experienced a 39% increase in the number of students seeking services in the past five years (2017-2018 compared to 2013-2014). Accessibility of appointments has been a priority, due to the potential risk of increased wait times for a first appointment to see a counselor. Our goal has been for all students seeking services to be informed of the availability of same-day crisis appointments, with routine initial appointments scheduled within a week to allow for timely assessment of suicidality and other risk factors. However, as counselor schedules have filled with initial appointments for new clients in order to accommodate increased demand, the availability of treatment-focused counseling sessions has decreased. Therefore, students are being seen relatively quickly but the availability of individual counseling follow-up has been limited, with many students being recommended for off-campus referral for longer-term counseling.

A second impact of inadequate staffing is that as clinical services focus more and more on crisis and triage assessment, professional staff are less available for outreach. This means the Counseling Center clinicians are not able to create a presence at activities and venues where they can engage with students who typically under-utilize services (i.e. students from marginalized populations, students of color, international students, LGBTQ students, etc.) For example, many college counseling centers offer additional outreach services such as "Let's Talk", which provides students a less intimidating opportunity to informally talk to a counselor outside of the office environment. These programs reduce barriers to utilizing mental health resources, but take time and consistency to build visibility and trusting relationships with staff and students. To

better serve those populations who tend to under-utilize services, it may also be appropriate to consider an embedded counseling position, with a professional office located in the Multicultural Center (scheduled to open in 2019). It would be anticipated that an embedded counselor position filled by a multi-cultural specialist would encourage stronger connections with students and foster collaboration and referral with faculty and staff serving under-represented students.

Salary adjustments: Due to upward trends in mental health counselor and psychologist salaries, additional budget requested for recruitment and retention for five positions. (See goods and services additional line item).

#### **Anticipated Outcome(s):**

The Counseling Center will continue to follow a brief counseling model, with additional online and workshop resources to amplify the effectiveness of individual counseling appointments. Additional staff will allow us to offer brief counseling services in the range of 4 to 6 sessions for most clients, rather than an average of below 3 sessions (which is where we currently stand). Research in counseling efficacy indicates that that the four session mark tends, on average, to be the point at which clients experiencing clinically relevant levels of distress indicate improvement in symptoms.

The Counseling Center will also have better availability to provide more extended services to students who have greater mental health needs, and whose issues are appropriate for general counseling practitioners, but who are greatly impeded in accessing off-campus services (for example, due to inability to afford co-pays or lack of availability of providers accepted by their insurance). From a social justice and equity perspective, clinical need and referral barriers would ideally be evaluated on a case-by-case basis, with some flexibility in consideration for treatment disposition.

With increases in demand, the Counseling Center has increased group options, including group counseling as well as psycho-educational workshops. Increased staff can expand the availability of groups and workshops, which not only allows for efficient use of staff resources, but also addresses what is often a secondary issue underlying mental health concerns—that of social isolation.

**Metrics:** (How will outcomes be measured? Please include current data points and goals. If this proposal will have any impact on the <u>Overall Metrics</u> included in the university's strategic plan, please indicate which specific ones here.)

Staffing goal: Ratio of mental health care providers to students, as compared to International Association of Counseling Standards (IACS) recommended ratio and Association for University Counseling Center Director (AUCCCD) recommendations (which additionally account for the percentage of enrolled students utilizing services).

Appointment and Outreach measures: Our scheduling program allows for utilization statistics in regards to direct counseling services as well as outreach attendance. We also obtain demographic information about the students utilizing counseling services through our intake process.

Client measures: We have students complete a symptom checklist called the CCAPS (Counseling Center Assessment of Psychological Symptoms) prior to counseling appointments, which over time can indicate improvement in client symptoms. Currently, our average change on the CCAPS is less than the national average, which hypothetically may be due to the decrease

in average number of sessions we have been able to offer clients compared to other universities. (A recently released report by the Center for Collegiate Mental Health reports that the client average for individual counseling appointments among the participating 152 institutions was 4.6, as compared to WWU Counseling Center average of 2.9). Continued use of the CCAPS may provide data supporting the hypothesis that with increased treatment availability (i.e. increased number of sessions we can offer students beyond their initial appointment), we will see indications of symptom improvement more consistent with national Counseling Center data.

How does this proposal align with your departmental/divisional strategic priorities? (Please reference specific items from the recently completed departmental/divisional strategic plan and attach a copy.)

This aligns first of all with our goal to promote wellness of our communities through an enriching student experience, as we are supporting the mental health and psychological development of WWU students through direct services and intervention, as well as prevention. It also supports the goal to support persistence to graduation for all students. According to our most recent Healthy Minds Survey, 48% of students surveyed reported that emotional or mental difficulties had hurt their academic performance in the past four weeks for 3 or more days. According to the National College Health Association survey in 2016, within the last twelve months, 72% of students reported experiencing episodes of overwhelming anxiety and 50% reported that they had at some point felt so depressed that it was difficult to function. 19% reported that they had seriously considered suicide in the past twelve months. Clearly these statistics indicate that mental health issues are impeding academic performance and progress towards graduation.

How does this proposal support the University Mission and Strategic Objectives? (Please refer to the <u>2018-2025 Strategic Plan</u> and indicate which core theme(s) this proposal will help achieve.)

This would serve to advance inclusive success, particularly if additional staffing increases availability of on-campus services, as well as provide more innovative approaches such as outreach to students with marginalized identities who may be reluctant to engage in traditional therapy or access services .

#### What are the consequences of not funding this proposal?

During a time of increased requests and referrals to the Counseling Center, lack of additional funding to support increased student enrollment will decrease availability of timely, quality services. As the ability to provide on-going support and adequate brief counseling decreases, this not only impacts student mental health, but also creates problems with staff recruitment and retention.

Ultimately, the highest risk is that we won't reach a student who is experiencing acute distress or a mental health crisis that could result in harm to self, including suicide or suicide attempts, or harm to others. The loss of a student through suicide is a tragedy not only for the individual, but

also for the community that surrounds them (roommates, friends, families, faculty, staff) who are impacted by the loss.

## What alternatives were explored?

As noted above, the Counseling Center continues to explore a range of options we can offer students, following national trends towards a stepped care type of model which includes groups, workshops, and self-help materials in addition to the traditional one-on-one Counseling.

## Which units (departments, colleges, etc.) will be involved?

The Counseling Center collaborates closely with the Health Center and Primary Prevention and Wellness. With the addition of the Multicultural Center on campus, we would like to foster closer connections with our campus partners who support our community through the lens of diverse identifies, including students of color, students with disabilities, and LGBTQ+ students.

#### **Equipment needed:**

For added positions, standard equipment for professional staff, such as office furniture, comfortable chairs (as appropriate for counseling venue) and computers.

For major (>\$25k) purchases, please provide the following information.

Item:
Purpose:
Click here to enter text
Cost:
Click here to enter text
Anticipated Useful Life:
Click here to enter text
Replacement Cost if any:
Click here to enter text

## **Human Resources** (Complete the table below adding additional rows if necessary):

Position Title	Total Headcount	Total FTE	Salary and Benefits per FTE	Total Cost
Mental Health Counselor 2	1	1.0	87,846	87,846
Psychologist	1	1.0	110,251	110,251
Other Costs (position adjustments)				55,500

## Operating & Maintenance Costs (include service contracts, installation costs, etc.):

Goods and Services	\$3,150
Travel/Prof Dev	\$5,000
Equipment/Technology (one-time)	\$6,000

### **Space Requirements:**

What type of space is needed for this proposal? (e.g., private office, lab space, group work/study space, etc.)

Private office space

What features must this space have? (e.g., fume hoods, plumbing, 3-phase power, etc.)

Ideally, offices need to be part of a Counseling Center suite, where students check-in at a central receptionist space and check out tablets to complete data forms while seated in a waiting room. The offices need to be sound-proofed (i.e. fully walled-in). Access needs to ensure student privacy and for safety and confidentiality reasons, there needs to be a single entry door (with an additional fire exit door).

If an office space is allotted for an embedded counselor position (e.g. a counselor housed in the Ethnic Student Center), again, this office should be in a more private part of the building where students can access services discretely.

#### What needs can be accommodated within your existing space?

We are already maxed out in terms of our existing space, and in actuality are at a deficit in terms of counseling offices.

#### How much new space will be required?

We are currently short one clinical office and a request for that office is pending. We will need 2 additional offices for the two added positions.