Counseling and Mental Health Center - SFAC HIGHLIGHT SUMMARY Budget Cycle FY25

- 1. Did you receive any new funding for this year? If so, how is it being used? Present your budget worksheet.
 - Funding for Increased Psychiatry- hired a new provider with the increased funding with no break in service for psychiatry patients (they started in Jan 2023 funded from Jan-Aug with lapsed salary money).
 - Funding for professional development This past year, with lapsed salary money, we were able
 to send all staff to at least one professional development conference related to their roles in the
 office, as well as purchase trainings for the whole staff in ethics, and motivational interviewing.
 With the funding this year, we hope to be able to do the same with conferences and explore
 another training for the whole staff related to trauma, since such a large percentage of our
 clients have experienced trauma.
 - Funding for outreach -will be used for annual Fresh Check Day mental health fair and other mental health outreach and educational activities

2. Summarize the usage of your services. What areas/programs saw increases or decreases?

Direct Services Maintained

- 644 Total Students served in direct counseling services, 8% student body (2%1')
- 4,362 Total direct service contacts (2%1')
- 641Telehealth Therapy Sessions (all modalities)
- 2,835 Individual Therapy sessions
- 76 Group Therapy Sessions
- 90 Couples Sessions
- 301 Psychiatry sessions (74%1')
- 95 Calls answered by ProtoCall crisis services
- Average wait time until initial consultation = 2.99 days

Increase in Outreach Activities

- 161 outreach activities that reached 5,107 students, staff, and faculty
- Fresh Check Day: over 150 participants
- Implemented Togetherall peer support platform and have 63 users with 271 logins so far
- Welltrack App: 245 new users this year and 2169 logins (922 total users; 32%1')
- 89 on-line mental health screenings
- 14 Mental Health First Aid Trainings for 322 faculty, staff, and students
- 18 Let's Talk events

3. Describe the student satisfaction with your services.

Satisfaction

- 98% of clients report being satisfied with their therapist.
- 96% of psychiatry patients report satisfaction with psychiatry services after evaluation and 90% after follow up.
- 96% of group therapy clients report being satisfied with their group therapy experience.
- 95% felt telehealth services (if used) were definitely or possibly as effective as in-person services.

Other Outcomes

- 96% experienced an increase in the quality of their life functioning
- 93% experienced improved self-esteem/ self-worth/ self-image

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- 92% experienced a reduction in symptoms; reduction in negative thinking; improved coping
- 96% of clients indicate that counseling had helped their academic performance
- 64% of students indicated that the services they received had a significant role in maintaining their continued enrollment in the university
- 98% of students report that services helped them feel more supported by or connected to UHCL
- Retention of Counseling Services clients: For those who attended at least four sessions, the rate at which students either re-enrolled or graduated was **89%** for Fall 2022. This is higher than the university overall retention rate.
- Decrease in Suicidal Ideation 45% of students reported at least some suicidal ideation at the beginning of treatment and 86% had decreased their suicidal ideation score after treatment
- Decrease in Thoughts of Hurting Others 15% of students at pre-treatment reported some thoughts of hurting others, but at post-treatment, 85% had decreased their thoughts of hurting others score.
- Outcome results on the repeated symptom assessment (CCAPS) compared to the national outcome data for the last two years indicate for UHCL clients who start out with moderate or elevated distress on all 8 of the CCAPS subscales, the average change our clients show in reducing their symptoms is greater than the change achieved by 96-99.8% of counseling centers in the national sample. This speaks to the excellent services our students are getting, which comes out in the reduction of symptoms.
- 4. What has your department done to increase or improve services? Specifically, what did you learn in your assessment that is impacting your services now?
 - Continuing to offer our collaborative care model of treatment planning to incorporate all modalities of therapy as well as outreach and self-help (WellTrack and Togetherall to augment therapy) into treatment.
 - Constantly evaluating services and modalities to best meet the needs of the students through program evaluation and regular staff meetings and semester planning meetings.
 - Continued to offer therapy both in-person and remotely, giving students a choice in most cases.
 - Implemented Fresh Check Day mental health fair.
 - Successful reaccreditation of our center by IACS for the full 8 years (last year our doctoral internship program was reaccredited by APA for 10 years)
 - Received one-year THECB Student Success Acceleration Program Implementation Grant award in the in the amount of \$132,695.00 to create our own mental health awareness training program called CErT (Connect, Empower, refer, Thrive). Developed training program and have implemented it so far to 155 students, faculty, and staff since August 2023. That grant has ended.
 - Obtained more private space at the Pearland Campus for students seeking services there.
 - Changed our name to CMHC to better reflected the array of mental health services we provide.

5. Describe any new initiatives for the current year.

New Initiatives

- <u>JED Campus Fundamentals</u>: CMHC will participate in the JED campus fundamentals program which aims to establish a campus-wide collaborative for improving student mental health, substance use, and suicide prevention.
- <u>CErT Training</u>: We will begin offering regular trainings in Fall 2023 with our new CErT mental health awareness training for students, faculty, and staff. This will provide a new approach to helping the campus be aware of mental health issues and receive training on how to effectively talk about those issues and refer students to needed resources.
- <u>Togetherall:</u> Utilize Togetherall to provide peer support and connection to students in a clinically moderated anonymous peer supported environment.

- <u>Continuity of Care</u>: Create greater continuity of care for students continuing services from outside providers and for referring clients from UHCL to outside providers; and creating community partnerships and MOUs to facilitate referrals.
- <u>Development of plan to create a health and wellness peer program</u>: Work with Health Services and CRWC to develop a model for an ongoing peer program

Ongoing areas of focus and initiative

- Increasing demand for services this fall continuing to meet demand within our effective Collaborative Care clinical model
- Continuing outreach programming to educate the UHCL community about mental health issues as both prevention and primary intervention
- Staff recruitment and retention

6. What challenges or opportunities do you foresee for the current year and next year? <u>Challenges</u>

- Increases in demand for direct services this fall
 - This year so far we are experiencing a 16%1' in overall clinical appointments
 - 11% increase in individual therapy
 - 115% increase in crisis appointments
 - 42% increase in psychiatry
 - 77% increase in couples therapy appointments
 - 31% increase in group therapy contacts
 - 180% increase in calls to crisis line this September vs last September, one of highest months on record
 - Number of students seeking services this fall is 9% higher than last year.
- Challenges with attracting and retaining doctoral level Psychologists, which are needed for supervision of our training program. Without being able to hire another psychologist, we will be forced to consider the sustainability of the training program in its current configuration

Opportunities

- Opportunity for greater continuity of care during care transitions and partnerships to help our students who need a higher level of care
- JED campus provides an opportunity for the whole campus to learn better how to support the mental wellbeing of all UHCL students. We are hopeful that the recommendations can move us forward with this effort and that the Healthy Minds Survey will provide insight into the wellbeing of the student body as a whole.

7. Did you have funds swept at the end of FV23? If so, how much and why?

We had \$73,074 swept, all from salary and fringe. This was primarily due to vacancies and subsequent having difficulty filling positions. However, some savings was also due to the fact that the THECB grant covered some portions of the salaries for those heavily involved in the grant, which releases some of the SFAC salary funding. There was also \$8,745 in M&O that was left over, but that money had been moved from the lapsed salary line in anticipation that it would be needed for M&O but was not all used. There was no extra money from our originally budgeted M&O funds.

8. Are you requesting new funding? One-time or Base? Present your budget request for next year and rationale.

Three one-time funding requests. All will be base funding requests in the future. {\$75,030 total, which is only slightly above what was swept from last year)

- 1. Increased funds for psychiatry {\$24,000)
 - We used the one-time funding from last year to hire a new psychiatric provider at a

more acceptable rate. Previously the rate had not been adjusted since 2000, and we

were having no success in hiring a replacement provider at that current salary. If we cannot continue to pay the increased the rate, we will have to cut or eliminate psychiatry services.

- 2. Togtherall Peer Support Platform (\$13,500 for the support network; an additional \$11,250 to continue the trained peers portion of the service, for a total of \$24,750)
 - This was funded by the office with lapsed salary money for the last year and this current year. The contact ends this summer and we believe this is an important tool for UHCL students facing mental health challenges or need to connect with others around mental well-being.
- 3. Supplemental Salary for Doctoral Level Psychologist position (\$26,280)
 - As searches have been completed and positions re-evaluated, the salary ranges of some positions have changed, leaving us unable to fill the final position without additional salary in that position (a doctoral level psychologist). We have someone in the position for this currently fall/spring only at 0.6 FTE but need to hire someone who is licensable as a doctoral level psychologist for the future, in order to sustain our training program and meet our accreditation requirements.