



*University Counseling Center*  
THE UNIVERSITY OF UTAH

**ANNUAL REPORT**

**JULY 1, 2017 – JUNE 30, 2018**

**REPORT ONE:**

**KEY ACTIVITIES, ACCOMPLISHMENTS AND STAFF EXCELLENCE**

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## INTRODUCTION

### UCC OVERVIEW AND ORGANIZATION

MISSION. The purpose of the University Counseling Center (UCC) is to facilitate and support the educational mission of the University of Utah. We provide developmental, preventive and therapeutic services and programs that promote the intellectual, emotional, cultural and social development of students, staff and faculty. We advocate a philosophy of acceptance, compassion and support for those we serve, as well as for each other. We aspire to respect cultural, individual and role differences as we continually work toward creating a safe and affirming climate for individuals of all ages, cultures, ethnicities, genders, gender identities, gender expressions, languages, mental & physical abilities, national origins, races, religions, sexual orientations, sizes and socioeconomic statuses.

UCC LEADERSHIP. Lauren Weitzman, PhD, served as the UCC Director and completed her fourteenth year in this role. Dr. Weitzman continues to report to Barbara Snyder, PhD, Vice President for Student Affairs. The Executive Committee was comprised of Dr. Weitzman and the Associate Directors for Clinical Services and Training, Cindy Harling, LCSW and Steven Lucero, PhD, respectively. The Executive Committee meets on a weekly basis. Josh Newbury, LCSW, Assistant Clinical Director, met with the Executive Committee on an as-needed basis this year. The Same Page Committee continued to meet bimonthly as the primary coordinating body of the UCC, with standing members consisting of the Director (Dr. Weitzman), the two Associate Directors (Dr. Lucero and Ms. Harling), the Assistant Clinical Director and Coordinator of Social Work Training (Mr. Newbury), the Outreach Coordinator (Susan Chamberlain, PhD) and the Coordinator of Testing and Assessment (Jake Van Epps, PhD). Same Page Committee meeting minutes are disseminated to all permanent professional staff members with an open invitation to attend and submit agenda items.

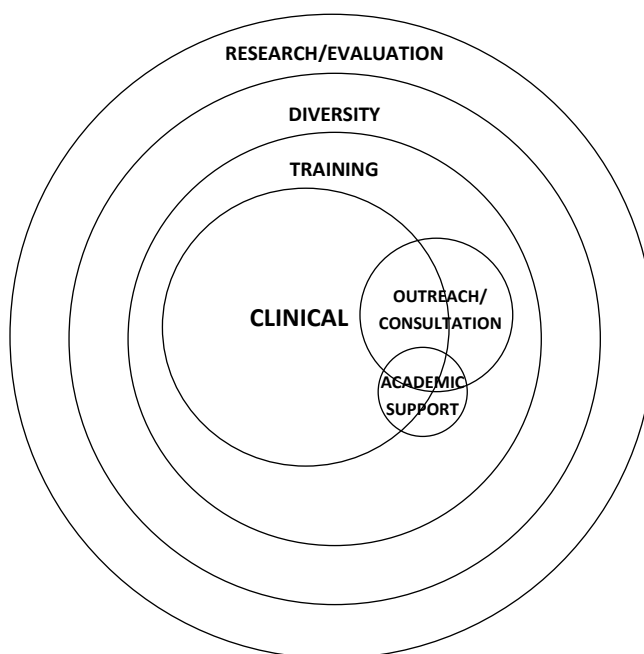
UCC NEW POSITIONS. As noted in last year's annual report, beginning July 1, 2017, we transitioned to a Psychiatric Advanced Nurse Practitioner (APRN) psychiatric medication provider model and ended our training relationship with the Department of Psychiatry. Existing psychiatry funds were used to hire Rachel Jenkins-Lloyd, APRN for a .875 FTE Psychiatric APRN position as of July, 2017. The UCC was fortunate to receive new funding to hire an additional .50 FTE psychiatric APRN, as well as to hire a .83 FTE 10-month Clinical Social Worker. Christina Kelly LeCluyse, LCSW began in the Clinical Social Worker position in September, 2017 and Stacey Pearson, APRN began her .50 FTE position in October, 2017.

UCC STAFF CHANGES. As of July 1, 2018, Lois Huebner, PhD, retired after 25 years of service to the UCC. Dr. Huebner served as Associate Director for Clinical Services for 21 of these years. Additionally Leslie Giles-Smith, Learning Success Center Program Manager left her position after 18 years with the Learning Success Center to return to her educational roots teaching youth drama. Dr. Steve Lucero was named the Interim Learning Success Program Manager following Ms. Giles-Smith's departure. Becky Robinson, the Clinical and Training Secretary announced her plans for retirement in August 2018 after 14 years of service to the UCC, and Catherine Riney, front desk Office Assistant was hired as her replacement.

**UCC ORGANIZATION, CLINICAL STAFF AND FUNCTIONAL AREAS.** The mental health functions of the University Counseling Center are organized by functional area, with a permanent clinical staff member holding coordinator responsibility for each functional area. In 2017 – 2018, the UCC permanent clinical staff was a team of nine licensed psychologists (including the Director), six licensed clinical social workers, and two psychiatric APRNs. Our clinical training staff consisted of four psychology doctoral interns, four master’s level social work interns, four counseling psychology doctoral core practicum counselors, and six clinical psychology doctoral assessment and CBT practicum counselors (total of 18 trainees). Additionally, the Testing Center and Learning Success Center have program managers who oversee personnel and daily functioning in their areas. The Center for Student Wellness, which previously reported to both the UCC and the Student Health Center, began a transition toward becoming an independent office in 2017-2018 and no longer reported to the UCC as of July 1, 2017.

The 2016-2017 UCC Organizational Chart may be found in Appendix A. Appendix B provides a listing of University Counseling Center staff. Figure 1 provides a conceptual diagram of UCC functions. The three direct service functions (Clinical Services, Consultation/Outreach, Academic Support) are found in the middle of the diagram, surrounded by the Training, Diversity and Research/Evaluation functions.

**FIGURE 1: UCC FUNCTIONAL AREAS**



**UCC ACCREDITATION.** The UCC is accredited by the International Association of Counseling Services (IACS) and the American Psychological Association (APA) as a pre-doctoral psychology internship program site. We continue to monitor our service and training functions in light of these accreditation requirements.

## **2017 – 2018 UCC ANNUAL REPORT HIGHLIGHTS**

- 1,984 unique clients visited the UCC, representing a 20.5% increase from 2016 – 2017.
- A total of 10,385 clinical sessions were provided, representing a 13.8% increase from the previous year.
- 1,334 initial intake sessions were conducted, representing a 9.4% increase from the previous year. The highest demand for intakes in October, November, January & February.
- Anxiety, Depression, and Stress are the “Top 3” Reasons clients report for seeking counseling.
- 5,549 individual counseling sessions were provided for 1,152 clients, representing a 9.1% increase in number of session and an 11.3% increase in clients served by individual counseling.
- 183 clients attended a counseling group for a total of 1,513 appointments. This represents a 94% increase in the number of clients served by our group counseling program and a 64% increase in group therapy appointments compared to the previous year.
- Our psychiatric APRNs provided 166 psychiatric medication evaluations and 682 follow-up medication management sessions, representing a 59% increase in medication evaluations and a 22% increase in medication management appointments from 2016 – 2017.
- 529 crisis intervention appointments were provided, representing a 31.9% increase from the previous year.
- 58.8% of clients reliably improved according to the overall CCAPS Distress Index.
- 80.3% of clients surveyed who were “thinking of leaving the U before counseling”, reported that counseling “helped me stay at the U of U.”
- 63.5% of clients surveyed said counseling helped them increase their academic performance, and 78.6% said counseling enhanced their experience at the U.
- A total of 197 workshops, presentations, and tabling events were provided to 45 different campus departments over 17 different topic area.
- 18 graduate students trainees from national psychology doctoral programs and the U’s College of Social Work and Departments of Psychology and Educational Psychology, worked side by side with licensed clinical staff providing intake assessments, crisis intervention sessions, individual, group, and couples counseling, and psychological assessments.
- A total of 326 students utilized 1,805 hours of one-on-one tutoring services.
- 2,287 students participated in Supplemental Instruction sections.
- The Testing Center provided curriculum-based, placement and entrance exams and professional tests to 10,390 people.

## UCC CORE OBJECTIVE #1: PROVIDE DIRECT MENTAL HEALTH SERVICES

*The provision of direct mental health services is a core component of the UCC's function and is directly aligned with Student Affairs Strategic Objective # 1, Develop students as a whole through the cultivation and enrichment of the body, mind and spirit. More specifically, this Core Objective and related goals connect to Student Affairs Strategic Objective # 1, Goal a: Promote physical, spiritual and psychological health and wellness, collaborating across campus with multiple organizations as well as the Health and Wellness Student Affairs Learning Domain. Specific goals, outcomes and utilization data to support UCC Core Objective #1 are outlined below.*

### OVERVIEW OF UCC CLIENT DEMOGRAPHICS & SEVERITY OF CLIENT CONCERNS

UTILIZATION DATA: UCC CLIENT DEMOGRAPHICS. The modal UCC client is a White, straight woman between 18 and 22, self-referred, from the U.S., reporting no religious affiliation, identifying as single and living with roommates off campus. She does not identify as having any disabilities, is doing well academically (B or better GPA), has health insurance and is not taking any psychiatric medications at present but has had mental health counseling in the past. She has waited 4 days to get an intake appointment and has a CCAPS Distress Index at the 56<sup>th</sup> percentile, indicating she is somewhat more distressed than the average client seeking university counseling center services nationally (the average university student is at the 50th percentile of all student clients participating in the Titanium data base).

By the numbers, 58.1% of our clients who filled out new demographic information last year identify as women and about 2.1% identify as transgender or a “self-identified” gender. The majority (72.4%) identify as straight and (23.7%) identify as bisexual, gay, lesbian, questioning or “self-identify” (up from 19.1% last year).

Among clients who identify country of origin as other than the US, the highest numbers report China, India, Korea, Iran, and Mexico as home. Overall, 69 countries are represented. About 9.6% of our clients identify as international students (up from 6.1% last year).

70.9% percent of our clients identify as White or Caucasian, with 10.9% identifying as Asian or Asian-American, 1.7% as African-American or Black, 8.4% as Hispanic/Latino/a, 0.3% as American Indian/Alaskan Native, 0.6% as Pacific Islander, 5.0% as multi-racial and 2.2% as “other” or “self-identify.”

The average age of our clients is 24. In terms of religion, about half of our clients report they have “no affiliation” (53.5%). Of those who do endorse an affiliation, the higher percentage identify as LDS (16.6%), followed by “self-identify” (8.7%) and Catholic (6.9%). More than half of our clients identify as “single” at the time of their intake (53.8%), with 13.2% married and 1.4% in a “civil union or equivalent.” 29% report they are in a “serious dating relationship.” Most clients live off campus (73.4%) with less than 1% in a fraternity/sorority and 22.3% “on campus.” Most (45.9%) live with roommates, while 23.0%



live with spouse/partner/significant other. 14.9% live with parents and 15.0% live alone. 6.0% live with children.

20.3% of our clients report they are “first generation” college students (down from 28.5% last year). 68.8% report undergraduate status at intake (15.9% freshman, 16.2% sophomores, 18.3% juniors and 18.4% seniors). 28.6% report their status to be graduate or professional student. Mean self-reported GPA is 3.37. About 1.1% of UCC clients report current or prior military service. Of those who do, 40% report having experienced “military trauma” (up from 25% last year). 6.3% of our clients are registered with the Center for Disability Services at the time of intake.

48.4% consider themselves as “self-referred.” Among specific referral sources cited, “friend” was most common (24.9%), followed by “family member” (15.0%), “faculty” (11.3%), website/social media (5.7%), and Student Health (4.3%).

SEVERITY LEVEL OF UCC CLIENTS. About 57.9% of our clients have utilized mental health services previously and 40.02% have taken psychotropic medications. 8.9% have been hospitalized for mental health conditions, with ranges from 1 to “more than 5” hospitalizations.

27.1% of our clients reported that they have engaged in self-harming behavior at least once. 38.8% indicate they have considered suicide. Information provided at intake interviews reveal that 22.7% of clients at intake report current suicidal ideation (down 3.1% from last year), while an additional 21.7% report “non-suicidal morbid ideation.” 10.3% reported past suicide attempts. 6.6% also reported they have considered harming others (down from 9% last year) and 1.6% report past harm to another. 1.9% report homicidal ideation (intake form).

25.9% of our clients reported they had been subject to an unwanted sexual experience; 35.5% of female clients (up from 30.5% last year), and 10.6% of male clients, and 47.4% of Transgender and self-identify gender clients (up from 25% last year) reported being subject to an unwanted sexual experience. Clients reported other types of victimization as well, with 45.3% indicating they had been harassed or abused (up from 41.2% last year). 48.7% reported “PTSD” experiences. We do not know what types of experiences clients were categorizing in this way as they were not asked explicitly during the intake assessment documents.

In terms of family, 17.4% of clients report that a family member attempted suicide (7.2% committed suicide), 13.4% have a family member who was prosecuted for criminal activity, 17.9% have a parent with a drinking problem, and 8.9% report having a parent with a drug problem. 14.8% report physical abuse in the family while 6.5% report sexual abuse in their family.

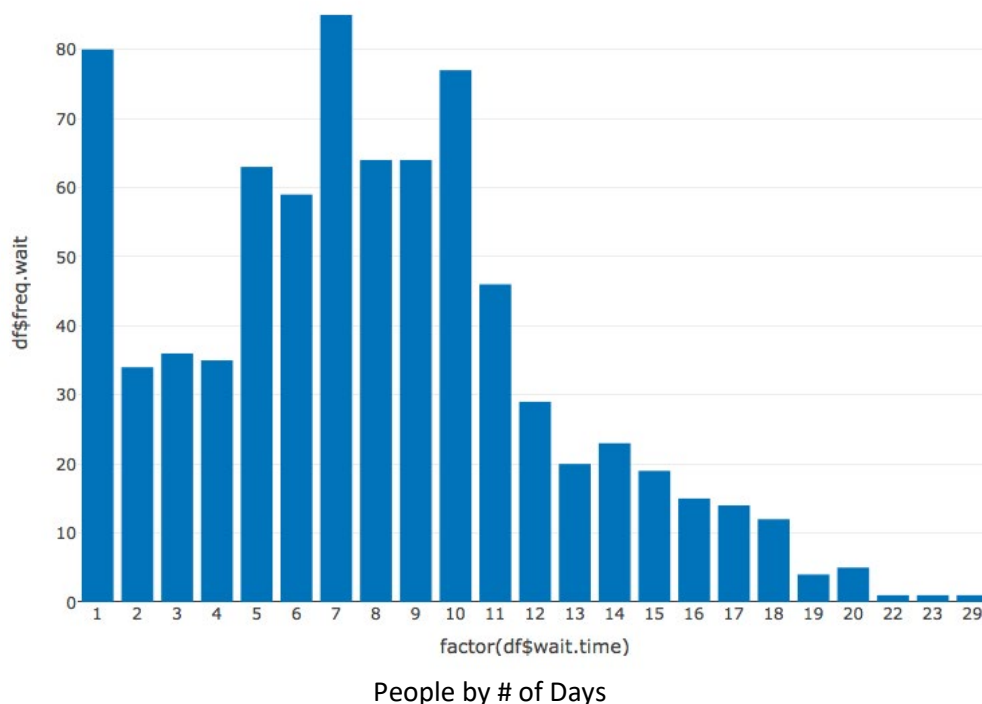
## GOALS AND OUTCOMES SUPPORTING UCC CORE OBJECTIVE #1: PROVIDE DIRECT MENTAL HEALTH SERVICES

### GOAL 1: CONDUCT EFFECTIVE AND EFFICIENT INTAKE ASSESSMENTS

As the first step in accessing UCC direct clinical services, potential clients are greeted by a receptionist who makes initial queries regarding eligibility and then either asks the potential client to respond to items on the Request for Services (RFS) form or asks a truncated version of those questions if the initial contact occurs on the phone. Individuals, who endorse any items on the RFS form, indicating a possible mental health crisis, are referred to the Mental Health Intervention Specialist (MHIS) for assessment, possible crisis intervention, crisis intake or other service. Individuals who do not meet criteria for “mental health crisis” are offered the option of scheduling an advanced intake or trying for a same day appointment/intake. We typically offer about 33 Advanced Intakes per week and 16 Same Day Service appointments.

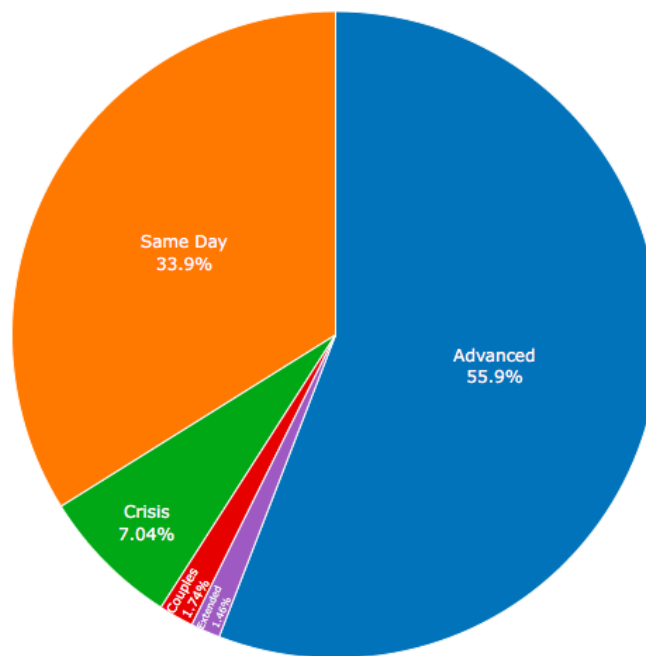
- a. Outcome: Intake wait time. Over the year July 1, 2017 – June 30, 2018, **the average wait for intakes of all types (Advanced, Same Day, Crisis) was 4.42 days working days (6.24 days if counting weekends).** 514 clients (32.2%) were seen for a Same Day Intake. **The average wait for an Advanced Intake (not including Crisis or Same Day intakes) was 7.86 working days (11.1 with weekends).** Overall, intake wait times appear to be similar to those in the last year (3.68 working days for all intake types, 7.8 working days for Advanced Intakes).

**FIGURE 2: ADVANCED INTAKE WAIT TIME FREQUENCY (2017 – 2018)**



- b. Outcome: Intake utilization. In 2017 – 2018, UCC staff conducted 801 Advanced Intakes (55.9%), 486 Same Day Intakes (33.9%), 101 Crisis Intakes (7.0%), 21 extended intakes (1.5%) and 25 Couples Intakes (1.7%), for a total of 1,334 intake sessions. This is a 9.43% increase for total intakes over last year. Same day intakes are those scheduled on the same day that the client calls for an intake appointment. Crisis intakes occur via the Mental Health Intervention Specialists who triage anyone who endorses any one of the critical items on the Request for Services sheet or who otherwise presents with a mental health crisis. Highest demand for Intakes was in October and November during the fall semester, and January and February in the spring semester. Overall, clients accessed UCC for any service at the highest rates in October and November during the fall semester and February, March, and April during the spring semester. The trend for use of UCC services has shifted in recent years to earlier in the year and remaining high rather than peaking during spring semester. Figure 3 provides a graphical representation of the proportions of intakes conducted in 2017 – 2018.

**FIGURE 3: INTAKE UTILIZATION BY APPOINTMENT TYPE (2017 – 2018)**



- c. Outcome: Assess level of distress at intake. Clients complete a measure of distress at each counseling visit, including intake and crisis sessions. At intake, clients complete the CCAPS 62, while at follow up therapy sessions clients complete the shorter CCAPS 34 (Center for Collegiate Mental Health, 2015). Overall distress is measured via a “Distress Index.” **At intake, UCC clients had a Distress Index raw score of 1.89, which falls at the 56th percentile of**

**individuals seeking services at university or college counseling centers nationwide.** This indicates that at intake – on average – University of Utah UCC clients identified themselves as more distressed than 56% of a large national sample of students seeking services at counseling centers. **In fact, University of Utah UCC clients reported higher than average levels of distress on all measures of the CCAPS at intake except Substance Use, Eating Concerns and Hostility.** The highest overall distress for our clients was reported on the Depression subscale, followed by Social Anxiety, Academic Distress, and Generalized Anxiety (See Figure 4). Interestingly, our clients showed most deviation from other counseling center clients on Depression (56% were above the national average), Academic Distress (55% were above the national average), Social Anxiety (55% were above the national average), and Generalized Anxiety (54% were above the national average). Figure 5 summarizes Family History data reported at intake.

**FIGURE 4: CCAPS SCALE SCORES AT INTAKE (2017 – 2018)**

<b>Distress Index</b>	<b>1.89 (56<sup>th</sup> percentile)</b>
Depression.....	1.87 (56 <sup>th</sup> percentile)
Social Anxiety.....	2.10 (55 <sup>th</sup> percentile)
Academic Distress.....	2.04 (55 <sup>th</sup> percentile)
Generalized Anxiety.....	1.86 (54 <sup>th</sup> percentile)
Hostility.....	1.02 (50 <sup>th</sup> percentile)
Eating Concerns.....	1.00 (50 <sup>th</sup> percentile)
Substance Use.....	0.62 (46 <sup>th</sup> percentile)

**FIGURE 5: FAMILY HISTORY OF UCC CLIENTS (2017 – 2018)**

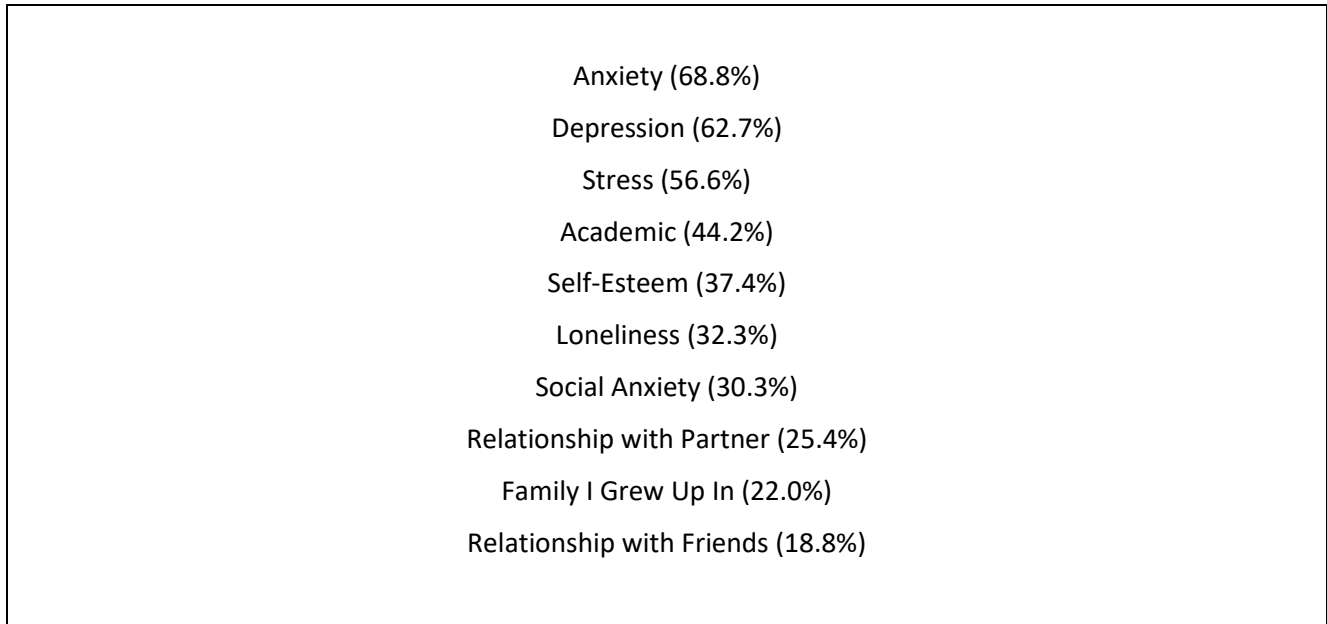
<b><u>Item</u></b>	<b><u>Percent</u></b>
Frequent hostile arguing.....	43.7%
Family member diagnosed with mental disorder.....	40.5%
Parents divorced before 18.....	27.7%
Family frequently moved.....	22.1%
Parents unemployed for extended period.....	22.0%
Family member with debilitating illness, injury, handicap.....	20.2%
Family member hospitalized for emotional issue.....	20.0%
Parent with drinking problem.....	17.9%
Family member with eating problem.....	17.6%
Family member attempted suicide.....	17.4%
Rape/sexual assault of self or family member.....	16.0%
Physical abuse in family.....	14.8%
Family member prosecuted for criminal activity.....	13.4%
Parent with drug problem.....	8.9%
Family member committed suicide.....	7.2%
Sexual abuse in family.....	6.5%
Death of parent before 18.....	4.3%
Parent with gambling problem.....	2.4%

**In Summary,  
If 10 UCC clients came in for an initial intake today....**

3 have done some binge drinking in the past 2 weeks  
2 are using marijuana  
5 have had previous counseling or psychotherapy  
4 are taking psychotropic medications  
1 has been psychiatrically hospitalized  
4 have considered suicide  
At least 1 has made a suicide attempt  
3 are engaging in self-harming behaviors  
At least 1 has thoughts of hurting others  
3 have had an unwanted sexual experience  
5 have been harassed or abused  
5 report “PTSD” experiences  
3 had parents who divorced during their childhood  
4 were exposed to frequent and hostile arguing at home  
2 have a parent with a drinking problem  
1 was aware of physical abuse going on in the family  
2 was aware of rape or sexual assault in the family  
2 had a family member hospitalized for mental health reasons  
4 have a family member with a mental disorder  
2 had a family member attempt suicide  
1 had a family member complete suicide  
1 had a family member who was prosecuted for criminal activity

- d. Outcome: Identify reasons students use UCC services. As part of the intake process, clients are asked to review a list of typical (and not so typical) concerns they might be experiencing and to indicate which are applicable to them. See Figure 6 for the most frequent concerns reported by our clients at intake. Table 1 provides comparative data over the past five years (2012 – 2017).

**FIGURE 6: TOP CLIENT CONCERNS REPORTED AT INTAKE**



**TABLE 1: TOP CLIENT CONCERNS REPORTED AT INTAKE BY PERCENT ENDORSED (2013-2017)**

	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Anxiety	68.2 (1)	69.0 (1)	73.1 (1)	70.8 (1)	68.8 (1)
Depression	62.5 (2)	63.4 (2)	64.6 (2)	63.7 (2)	62.7 (2)
Stress	56.7 (3)	58.6 (3)	63.8 (3)	60.1 (3)	56.6 (3)
Academic	44.5 (4)	45.4 (4)	46.9 (4)	45.0 (4)	44.2 (4)
Self-esteem	35.4 (5)	38.1 (5)	36.9 (5)	39.7 (5)	37.4 (5)
Loneliness	27.5 (7)	29.5 (6)	29.1 (6)	28.4 (7)	32.3 (6)
Social Anxiety	24.5 (8)	26.9 (8)	28.0 (7)	29.7 (6)	30.3 (7)
Relationship w/ part	29.8 (6)	27.7 (7)	27.8 (8)	28.2 (8)	25.4 (8)
Family I grew up in	19.9 (9)	18.6 (10)	19.9 (9)	20.7 (9)	22.0 (9)
Relationship w/ friends	19.2 (10)	19.9 (9)	27.8 (8)	17.3 (10)	18.8 (10)

- e. Outcome: Effective triage & assignment to appropriate UCC counseling service or community provider. Clinical teams meet at the end of the day (M-TH) to make assignments to individual counselors, groups, workshops, assessment, or in some cases, referral to the community. Each client is briefly presented by the staff member who met with the client for intake or crisis and the team reviews the client “paperwork.” Following the team meeting, the team leader and the Mental Health Intervention Specialist make the counselor assignment. The client is notified of

their assignment via an email that is sent the following morning. This email lists the name of the assigned counselor, group or workshop leader and asks the client to schedule an appointment within two weeks. When the team believes we need more information to make a good decision, the email asks the client to call in and talk with the intake interviewer. Assigned counselors or group leaders will often call or email clients as well, especially if the client is in high distress. Clients are assigned to staff based on assessment of severity, level of complexity, urgency (who can see them quickest), expertise, interest and availability/schedule. More than half of all clients are seen by staff who are in training programs and we make every effort to match clients to the experience level of the trainee therapist.

## **GOAL 2: PROVIDE EFFECTIVE, MULTICULTURALLY-SENSITIVE INDIVIDUAL, COUPLES AND GROUP COUNSELING.**

The UCC provides a variety of direct mental health services to university of Utah students.

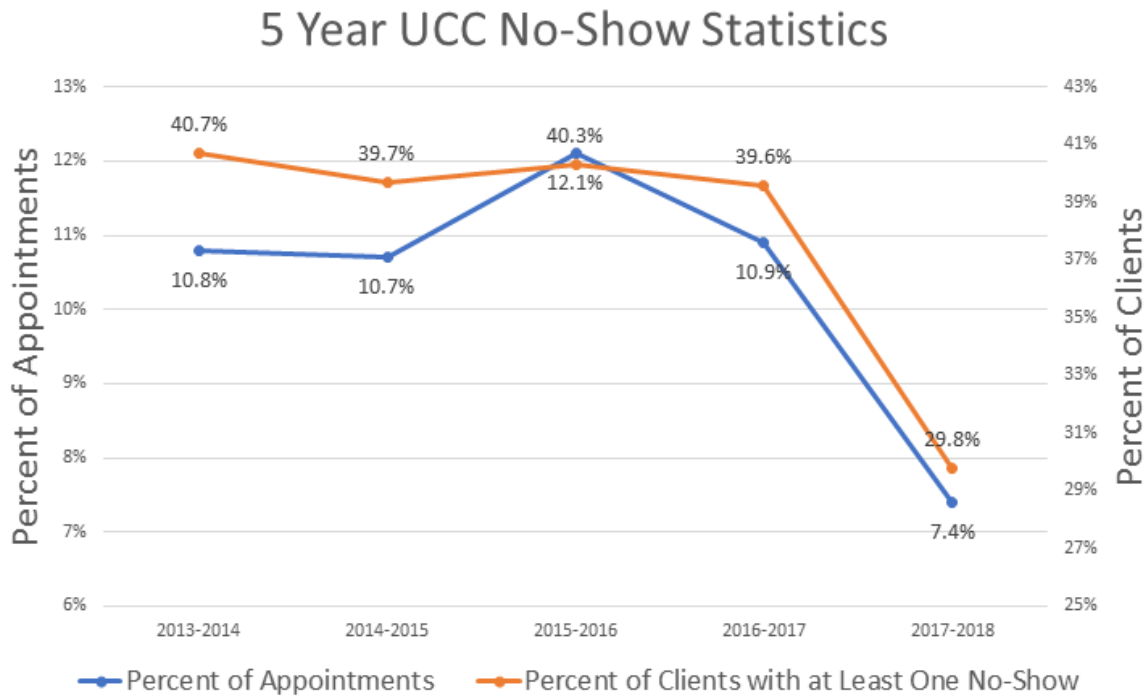
- a. *Outcome: Total Sessions Provided:* The UCC provides a variety of direct mental health services to University of Utah students. **In 2017 – 2018, we provided 10,385 sessions of direct service to 1984 clients.** This continues a trend for increasing utilization of UCC services over the past decade, **representing a 13.8% increase in total number of sessions and an 18.6% increase in total number clients served.**
- b. *Outcome: Individual Sessions Provided:* The most frequently used service is ***individual counseling***, which we offer to undergraduate students taking 6 or more credits and to graduate students taking 3 or more credits. Individual counseling is meant to be relatively short term, with a general expectation of up to 12 sessions per year, although for training purposes and when circumstances allow or require, we may extend that limit. **In 2017 – 18, UCC staff provided 5,549 sessions of individual therapy for 1,152 clients, representing a 9.1% increase in number of sessions and 11.3% increase in clients served by individual counseling.** In addition, staff met with 200 clients for case management services for a total of 242 hours. Case management services may have been provided to current clients or to former clients.
- c. *Outcome: Group Counseling Sessions Provided:* ***Group counseling*** is an effective and somewhat more cost efficient modality for addressing mental health concerns. The UCC has a very active group psychotherapy program through which we offered 9 different therapy groups and 3 support groups last year. **182 clients attended group (generally not the same clients that are in individual counseling; and independent of support groups), for a total of 1513 appointments and 2119 hours of service. This represents a 94% increase of clients being served in this modality, and a 64% increase in group appointments from 2016 – 2017.** 146 of these clients also attended pre-group screening/orientation appointments. An average of 8



clients per group attended the Women of Color group across the year, which is a collaborative effort between the Women's Resource Center and the UCC.

- d. Outcome: Couples Counseling Sessions Provided: We also offer **couples counseling**, although we do so on a more limited basis. **This past year 25 couple's intake sessions were conducted and 40 couples attended 76 couples counseling sessions.**
- e. Outcome: Crisis Intervention services provided. This past year, **546.27 hours were devoted to crisis intervention appointments representing a 23% increase over the previous year** in hours spent in crisis appointments.
- f. Outcome: Case management and in-house clinical consultation: As part of our model for clinical effectiveness and excellent graduate training, UCC staff spends significant time **consulting in-house and documenting case management services**. Staff devoted **530.43 hours to case management** (writing letters, identifying resources, advocating for clients with other University departments or community entities, collaborating with other University departments around specific clients, etc.) and recorded **317.08 hours of "in-house case consultation"** to monitor and strategize about high risk clients, support trainee staff in working with complex clients, etc.

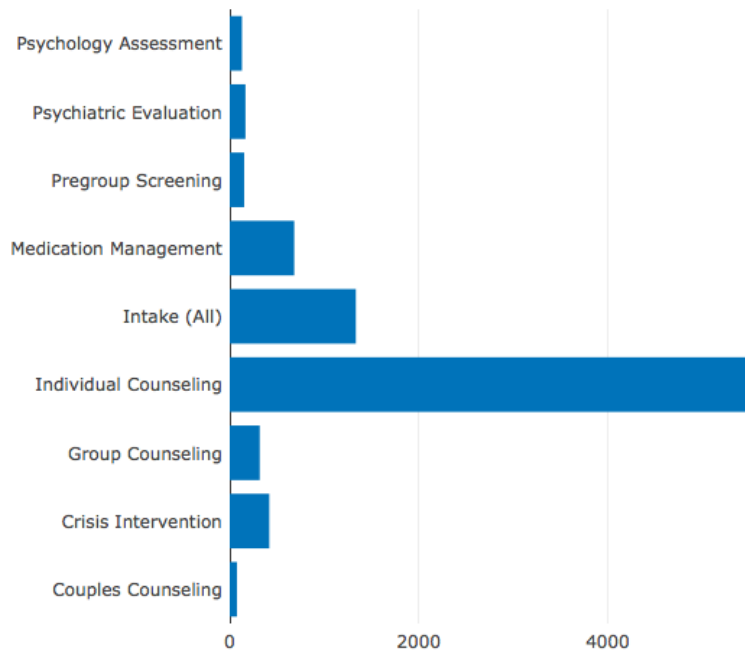
In an effort to reduce no-shows, the UCC implemented a no-show fee and an automated text reminder system this year. In the 2017-2018 academic year, 7.9% of all appointments scheduled were no-shows; 33% of clients late-cancelled or no-showed at least one appointment. This is a 5.8% decrease in no-show rates compared to the 2016-2017 academic year, and a 16.6% decrease in clients who no-showed at least one appointment. The figures below provide a graphical representation of percentage of no-show, and clients who no-showed appointments at least once.



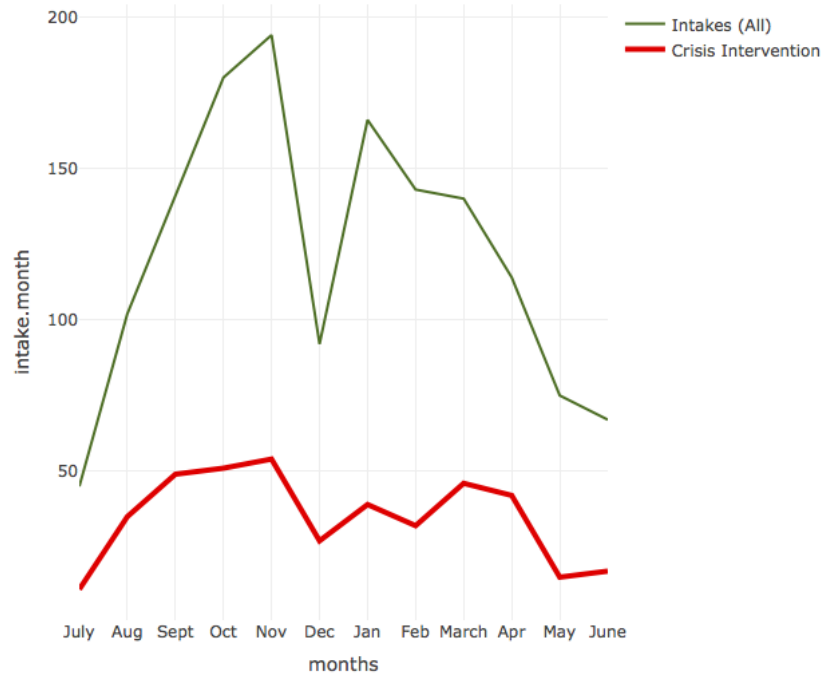
- g. Outcome: Mindfulness Center structured workshop utilization. Our **Mindfulness Center** this year offered weekly 30-minute drop-in meditation sessions and 14 offerings of the 4-part (1 hour per module) workshop series, *Feel Better Now* mindfulness workshop. Meditation groups met 37 times and served 3 people/week, on average (111 sign-ups, total). *Feel Better Now* workshops served 88 distinct people (199 sign-ups, total). The 5-week Mindful Approach to Work-Life Balance workshop for U graduate students, staff, and faculty was held two times and 8 individuals were served.
- h. Outcome: Psychological assessment services provided. The Counseling Center offers **psychological assessment** services to clients who are actively engaged in psychotherapy with one of our staff. Staffing for this service comes through our relationship with the Department of Psychology who houses their second year adult assessment practicum at the UCC. Doctoral students in this practicum provide extensive personality, cognitive, learning disability, ADHD and other assessments to our clients without cost to the clients. Assessments are also provided by our doctoral level Psychology Interns who, as part of their APA-approved internship at our UCC, are required to complete at least 2 full assessments per semester. **32 clients completed assessments for a total of 129 appointments (including feedback sessions)** and took advantage of this excellent and very low cost service last year.

Figures 8 – 10 provide graphical representations of percentages of major clinical appointments, monthly number of appointments by appointment type and individual counseling sessions by month.

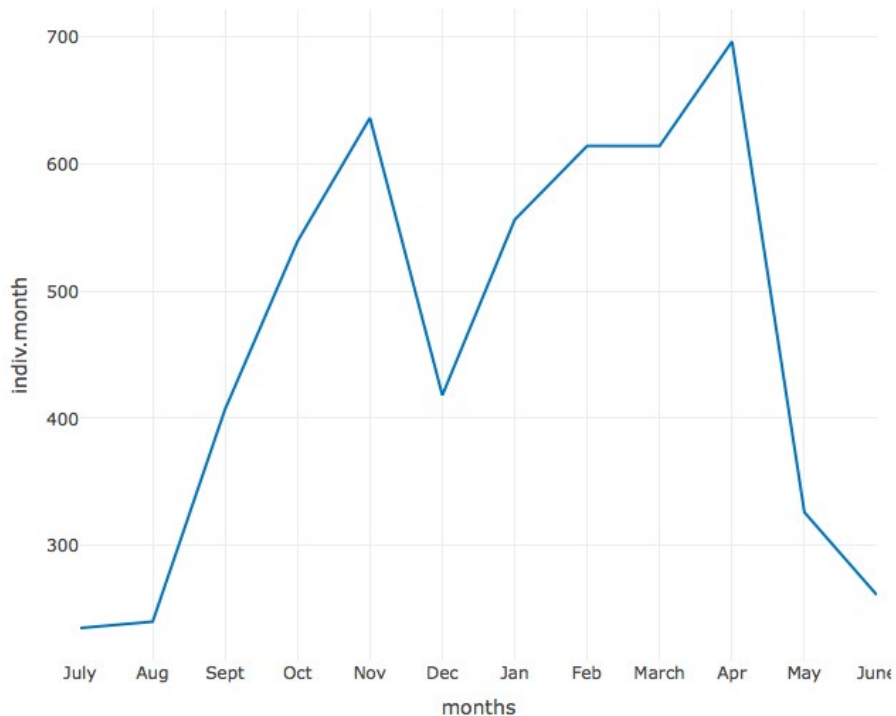
**FIGURE 7: MAJOR CLINICAL APPOINTMENTS (2017-2018)**



**FIGURE 8: MONTHLY NUMBER OF INTAKE/CRISIS APPOINTMENTS (2017-2018)**



**FIGURE 9: INDIVIDUAL COUNSELING SESSIONS BY MONTH (2017-2018)**



- i. Outcome: Reduce client distress. Routine assessment of our clients allows us to calculate the amount of symptomatic and subjective distress change clients report across sessions as one measure of clinical improvement. Using an algorithm that includes all clients who had at least 3 CCAPS administrations and whose initial scores were above the “high cut” (highly distressed) for specific scales, we found the following outcomes:
- **45.1 % of clients reliably improved according to the overall Distress Index** and 0.2% reliably worsened (n = 207)
  - **44.2% of clients reliably improved** on the **Depression** subscale and 1.4% reliably worsened, (n = 275)
  - **29.2% of clients reliably improved** on the **Generalized Anxiety** subscale and 1.7% reliably worsened (n = 188)
  - **60.9% of clients reliably improved** on the **Hostility** subscale and 0.7% reliably worsened (n = 173)
  - **26.0% of clients reliably improved** on the **Academic Distress** subscale and 0.9% reliably worsened (n = 121)
  - **62.8% of clients reliably improved** on the **Substance Abuse** subscale and 1.9% reliably worsened (n = 98)
  - **21.8% of clients reliably improved** on the **Social Anxiety** subscale and 1.2% reliably worsened (n = 89)
  - **37.6% of clients reliably improved** on the **Eating Concerns** subscale and 10% reliably worsened (n = 79)

As an additional measure, we can determine the percentage of clients who both showed “reliable change” and moved from above the high cut (high severity) to below the cut. Using this measure we see a very similar pattern to what is presented above: **41.8% of clients both showed “reliable change” and moved out of the “high distress” category for the overall Distress Index.** The Hostility (55.3%), Substance Use (46.2%), and Depression (37.0%) scales showed a similar response. Other scales were as follows: Generalized Anxiety (26.6%), Academic Distress (24.9%), Eating Concerns (29.5%), and Social Anxiety (20.3%).

We also compared our average client change on CCAPS subscores to the average change of clients at other university counseling centers among clients who had elevated levels of distress. **Our client’s average change on the Distress Index scale was greater than the change achieved by 67.4% of counseling centers.** Furthermore, our client’s average changes on the CCAPS Hostility, Generalized Anxiety, Alcohol Use, Depression Eating Concerns, and Academic Distress, and Social Anxiety scales were greater than that of counseling centers nationally (74.7%, 93.8%, 82.9%, 68.2%, 57.8%, and 55.0%, 48.5% respectively).

Suicidal ideation. We pay particular attention to several CCAPS items known as “critical items.” These items track suicidal ideation, impulse control, and homicidal ideation. CCAPS items are scaled from “1” (“not at all like me”) to “4” (“very much like me”). **For the item: “I have thoughts of ending my life,” 90 clients endorsed this at a “4” at their first administration and 116 clients endorsed this at a “4” at some point in their counseling.** Furthermore, 140 clients endorsed a “3” for this item. This indicates a very high and concerning level of suicidal thought and potential intent to die. At the latest administration of the CCAPS, 61 clients endorsed a “4” and 92 endorsed a “3” for this item. These data suggest that with counseling, students with high levels of suicidal ideation are likely to report diminished levels of SI.

Thoughts of harming others. **With regard to the item “I am afraid I might lose control and act violently”, 38 clients endorsed this at a “4” at their first administration, and at the last session 25 clients did.** Similarly, 34 endorsed a “3” at their first administration, and at their latest treatment session 26 clients did. The data are supportive of diminished concerns about acting out with violence after receiving treatment at the UCC. On the item “I have thoughts of hurting others” 6 clients endorsed this at a “4” at the first administration, and at the latest assessment, 3 did. 13 clients endorsed this item at a “3” at their first administration, and 11 endorsed it at a “3” at the latest session. Results for this item are more concerning, as it appears that while counseling is effective in diminishing thoughts of harm to others, for clients who endorse this at the highest levels the decrease by the end of treatment assessment is less than for suicidal ideation.

- j. Outcome: Operate within the 12 session short-term framework for individual counseling. **The average number of individual counseling sessions per client was 4.53.** Forty-five clients were seen for more than 12 sessions during the year, with a maximum of 24 sessions. 70.1% of clients were seen in individual counseling for 1-5 sessions. The average number of all appointments (intakes, individual, crisis, medication management, etc.) per client was 4.89.
- k. Outcome: Conduct therapy groups that maximize therapeutic factors. As noted above, group counseling is a well-utilized “treatment of choice” at the UCC, especially for clients with interpersonal concerns. Using an algorithm that includes all clients who had at least 3 CCAPS administrations and whose initial scores were above the “high cut” (highly distressed) for specific scales, we found the following outcomes for clients participating in group counseling:
- **58.8% of clients reliably improved according to the overall Distress Index** and 0% reliably worsened (n = 30)
  - **52.2% of clients reliably improved** on the **Depression** subscale and 1.5% reliably worsened, (n = 35)
  - **25.5% of clients reliably improved** on the **Academic Distress** subscale and 2.0% reliably worsened (n = 13)
  - **27.3% of clients reliably improved** on the **Generalized Anxiety** subscale and 3.9% reliably worsened (n = 21)
  - **68.2% of clients reliably improved** on the **Hostility** subscale and 0% reliably worsened (n = 15)
  - **75.0% of clients reliably improved** on the **Substance Use** subscale and 6.3% reliably worsened (n = 16)
  - **20% of clients reliably improved** on the **Social Anxiety** subscale and 1.7% reliably worsened (n = 12)
  - **26.9% of clients reliably improved** on the **Eating Concerns** subscale and 15.4% reliably worsened (n = 7)
- l. Outcome: Clinical staff remains current in terms of clinical best practices. UCC staff actively participates in local and national conferences. See Appendix C for a listing of local and national conferences and workshops attended by UCC staff and the Staff Excellence section for UCC staff professional service.
- m. Outcome: UCC services enhance students’ experience at the U, thus enhancing student retention. UCC services enhance students’ experience at the U, which should have a positive impact on student retention. UCC administered a client experiences questionnaire to clients attending any post-intake session during November 2017. This cross-sectional sample thus included clients with variable “doses” or exposure to the counseling process: some respondents had attended only an intake, while others may have been in the middle or even toward the end of their counseling experience. A total of 261 clients responded. **35.9% of clients indicated they were “thinking of leaving the U before counseling.” Of that group, 80.3% said that counseling “helped me stay at the U of U.” 62.8% of all clients expressed that counseling had “helped me stay at the U of U.”**

**63.5% said counseling helped them increase their academic performance, while 78.6% said counseling enhanced their experience at the U.**

More specifically, 73.4% of clients said counseling helped them think in more complex ways. Counseling helped 65.4% attend, concentrate and/or persist at academic tasks; and counseling helped 65.4% improve the “non-academic” areas of their life. 78.6% reported counseling helped them improve interpersonal skills, 67.6% reported counseling helped them improve the quality of their relationships and 71.9% reported counseling improved their ability to “be myself.”

### **GOAL 3: PROVIDE EFFECTIVE AND SUFFICIENT PSYCHIATRIC MEDICATION SERVICES FOR UCC CLIENTS.**

The UCC offers ***psychiatric medication services*** as an important adjunct to our therapy services. This service is now staffed by 2 Advanced Psychiatric Nurse Practitioners. Clients access this service through their counselor when there is agreement that medications may be useful or when there is a diagnostic or level of care question for which we need medical input.

- a. *Outcome: Psychiatry Services Provided:* **This past year clients attended 166 psychiatric medication evaluations and 682 follow-up medication management appointments. Total psychiatric medication evaluations increased 50.9% from 2016-17.** This increase is largely due to the transition to 1.375 FTE in-house Psychiatric APRN’s from our previous arrangement with the Department of Psychiatry. This allowed for faster access and a larger number of available psychiatric medication services appointments for UCC clients.

## **UCC CORE OBJECTIVE #2: PROVIDE CONSULTATION AND MENTAL HEALTH EDUCATIONAL SERVICES TO THE CAMPUS COMMUNITY**

Another major area of focus for the University Counseling Center (UCC) is the provision of clinical consultation and mental health educational services to the campus community. Clinical consultation is provided to U faculty, staff, and students who seek assistance related to students of concern and making appropriate campus referrals. All UCC permanent clinical staff members participate in this endeavor. Outreach services are made available primarily to the University community, including student groups, administration, Student Affairs units, and academic departments. Occasionally, presentations are conducted with community groups in the Salt Lake City area. Outreach requests are fulfilled by UCC's permanent clinical staff and interns and allow staff members to make connections with the campus community and develop strong collaborative relationships with University students, faculty, and staff.

The Prevention and Outreach area was co-coordinated this year by Susan Chamberlain, PhD and Christina Kelly LeCluyse, LCSW. Outreach efforts continued to emphasize developing collaborative relationships with campus offices, particularly those that serve students with under-represented and marginalized identities (e.g., first generation college students; students of color). For example, we continued to build strong relationships with student organizations such as Delta Sigma Theta (the sole Black sorority on campus), Beacon Scholars, CESA, First Ascent Scholars and TRIO. In addition, we strengthened our relationship with University Student Apartments by initiating a mental health-related training for their staff. We also developed new liaison relationships with International Student Scholar Services and Career and Professional Development Center. We further developed our branding efforts by creating consistent visual messaging across various platforms (brochures, inserts, window clings, power point presentations). Drs. Karen Cone-Uemura and Lauren Weitzman were highlighted in *Humans of the U* <https://attheu.utah.edu/home-page/humans-of-the-u-34/>; <https://attheu.utah.edu/home-page/humans-of-the-u-lauren-weitzman/>.

We restructured our Faculty Liaison Program in 2017 – 2018 by creating a series of monthly open houses for each University of Utah College and their respective departments. Faculty, academic advisors, and key staff members are invited to monthly College Open House held in the UCC to receive a tour of our facilities and learn about our counseling services in a more intimate format.

The provision of consultation and mental health educational services to the campus community is aligned with *Student Affairs Strategic Objective # 5*, Partner with faculty, staff and external constituencies to foster student development and enhance the greater community. More specifically, this core objective and related goals connect to *Student Affairs Strategic Objective # 5, Goal a*: Develop formal and informal reciprocal partnerships with campus and community constituents, providing on-going events and engagement opportunities that bridge the University community with the greater Salt



Lake Community, as well as the *Campus Community and Diversity and Inclusion Student Affairs Learning Domains*.

Table 2 outlines the 10 campus units with which the UCC collaborated most frequently when providing clinical consultation and prevention and outreach programs. Additionally, we provided 54.0 hours of consultation and outreach to the campus community (reaching 2,875 people) and 27.68 hours of consultation and outreach to the general Salt Lake community (reaching 327 people).

**TABLE 2: MOST FREQUENT CAMPUS PARTNER COLLABORATIONS  
(2017 –2018)**

<b>Program/Department Service Provided To</b>	<b>Hours</b>	<b>Number of People</b>	<b>Number of Contacts (Consultations + Outreach Programs)</b>
Center for Disability & Access	53.50	228	29
Behavioral Intervention Team	35.25	232	24
International Students & Scholar Services	24.25	126	26
Student Affairs	18.25	251	12
Housing & Residential Education	14.0	614	9
Orientation	22.75	1678	32
Educational Psychology	20.58	57	17
Center for Student Wellness	8.25	236	5
Chemistry	7.75	252	7
CESA	7.75	125	7

## GOALS AND OUTCOMES SUPPORTING UCC CORE OBJECTIVE #2: PROVIDE CONSULTATION AND MENTAL HEALTH EDUCATIONAL SERVICES TO THE CAMPUS COMMUNITY

### GOAL 1: MAINTAIN EFFECTIVE RESPONSIVENESS TO REQUESTS FROM U STUDENTS, FACULTY AND STAFF REGARDING STUDENTS OF CONCERN

Mental Health Intervention Specialist (MHIS) staff and clinical team leaders are available each day to respond to questions from staff and faculty regarding students of concern. These consultation contacts usually occur over the telephone but can also involve in-person meetings. A typical request for consultation includes a professor who shares a concern about one of their students given their observations of the student's behavior (e.g., presenting in class as depressed or distressed). Professors will also contact the UCC with concerns about information a student has shared in a class assignment that suggests possible mental health concerns. We also field consultations from U students concerned about a roommate or classmate's behaviors (e.g., depression or eating concerns). Finally, we sometimes consult with community members seeking mental health treatment referrals.

- a. Outcome: Efficiently respond to questions and provide effective consultation. **This past year, we recorded 294 campus consultation contacts, which represents a 143% increase in recorded contacts.** While the number of campus consultation contacts likely increased, we were also more consistent in recording consultation contacts in Titanium this past year. **44.9% of these consultations concerned a U of U student, while smaller percentages concerned U of U department (5.5%), staff (4.7%), faculty (0.8%), or the community (6.8%).** At this time, we are only able to track the person/entity that was the focus of the consultation contact. We continue to consider how to document the content of the consultation with our current data management software.

### GOAL 2: PROVIDE CAMPUS OUTREACH AND PREVENTIVE EDUCATIONAL PROGRAMS, BOTH BY REQUEST AND UCC-INITIATED.

- a. Outcome: Develop and maintain effective collaborative relationships with campus partners. Table 3 provides an overview of the 11 campus units and academic departments with which the UCC collaborated most frequently when providing prevention and outreach programs.

**TABLE 3: MOST FREQUENT CAMPUS PARTNER COLLABORATIONS FOR OUTREACH PRESENTATIONS  
(2017 – 2018)**

<b>Program/Department Service Provided To</b>	<b>Hours</b>	<b>Number of People</b>	<b>Number of Presentations/ Trainings</b>
Orientation	21.25	1,671	30
Housing & Residential Education	13.75	612	8
Center for Student Wellness	8.25	236	5
Educational Psychology	7.58	26	4
School of Business	6.5	162	5
International Students & Scholar Services	6.5	78	6
Chemistry	6.0	192	5
Student Affairs	6.0	101	5
CESA	5.25	116	5
Physical Therapy	5.0	145	3
TRIO	5.0	46	3

Another important avenue for UCC collaboration with our campus partners are the Intern Diversity Initiatives. These multiculturally-oriented initiatives promote and maintain liaison relationships to address the needs of underserved populations on campus. These efforts continue to focus on creating sustainable and meaningful programming for U of U students, staff and faculty. Below is a list of Intern Diversity Initiatives conducted by our psychology and social work interns during 2017 – 2018:

- Co-sponsored *Bailamos*, a social event held in collaboration with the Dream Center that raised approximately \$5,000 for undocumented students.
- *LGBTQ Support and Empowerment Group*: Created a new, free weekly support group held in the Union which will continue running during the 2018 – 2019 year.

- *Resources for Veterans at the University Counseling Center Brochure*: Co-created a veteran-specific brochure with the University of Utah Veteran Support Center
- *Counseling Services offered through the Homeless Student Task Force*: Developed a process whereby we could identify and reach out to students experiencing a housing crisis.
- *Improvement in web-based resources for students off campus*.
- *Creation of a video dispelling myths about counseling and counseling services*.
- Provided a very well attended *workshop for international students* that addressed how mental health concerns impact a student's academic experience.
- *Development of Resilient U Peer Mentoring Training syllabus*.

- b. *Outcome: Provide evidence and theme-based educational and prevention programs on a by-request basis*. This year the UCC outreach and consultation program continued to be very active, offering presentations to a large number of organizations. Dr. Chamberlain identified three goals for staff to incorporate for each outreach presentation they conduct: 1) teach participants a skill; 2) provide participants with an educational handout; and 3) refer participants to our online workshop evaluation.

**A total of 197 workshops/presentations/tabling events were provided to 45 different campus departments over 17 different topic areas, including stress management, suicide prevention, LGBTQ and multicultural issues, managing life roles, and information about UCC services**

*Presentations and Workshops*: Our records show that the UCC provided 224 hours of presentations and workshops to 8,937 students/faculty/staff. The UCC spent 250 hours of preparation time for outreach activities. The *Tips for Working with Distressed Students*, developed and presented in collaboration with the Center for Student Wellness and the Dean of Students Office was co-presented by Lauren Weitzman to 3 campus units that included College of Engineering graduate assistants and the Office of the Registrar.

Our total number of workshops decreased 9.6% this year, down from 218 in 2016 – 17. This was likely affected by the required increase of clinical service delivery hours for licensed staff in a year where we were also down two permanent clinical staff members. We continue to explore how to maintain outreach as an active element of UCC service delivery given the real demand of providing clinical services.

*Campus Tabling Events*: **The UCC participated in 21 campus tabling events** providing many opportunities to introduce people to our services and respond to their requests for information about mental health concerns. Tabling events provided contact to an estimated 912 University students, staff and faculty. This represents a 162.5% increase in tabling events compared to last year. Creating innovative tabling has remained a priority for outreach and prevention services

and continues to improve the visibility and presence of the UCC on campus, and likely results in greater access and utilization of our counseling services.

*Media Outreach:* **We recorded nine media outreach contacts this year**, which included interviews with the Daily Utah Chronicle, KSL, the Deseret News for a special piece on college student anxiety, and students completing class projects.

A summary of all outreach programs by topic for 2017 – 2018 is provided in Table 5.

**TABLE 4: SUMMARY OF OUTREACH PROGRAMS  
(2017 – 2018)**

<b>Outreach Category</b>	<b>Hours</b>	<b>Number of People</b>	<b>Number of Presentations/ Appointments</b>
Mental Health Issues	87.8	3108	73
UCC Services	51.2	2212	59
Tabling	36.0	912	21
Diversity	14.0	69	14
Professional Development (Ethics & Training Issues)	12.8	86	9
Personal Development (includes MBTI workshops)	8.5	163	5
Interpersonal Skills	7.8	134	7
Career Development	1.0	36	4
<b>Total</b>	<b>219.1</b>	<b>6720</b>	<b>192</b>

- c. *Outcome: Provide confidential, anonymous online mental health screenings.* The UCC continues to offer online screenings for the ninth continuous year. These screenings are located and accessible on the UCC's Website Home Page, and are available to any interested campus or community member. **A total of 2,105 online mental health screenings were taken this year, which was a 17.6% increase compared to last year.** The breakdown of total screenings is as follows: Depression (971), Generalized Anxiety (637), Bipolar (170), Disordered Eating (142),

Post-traumatic Stress Disorder (108), and Alcohol Misuse (37), and Substance Use (20). 24% of those completing online screenings lived on campus. The breakdown by academic years showed: 22% freshman, 19% sophomore, 20% junior, 18% senior, and 22% graduate student. Table 6 summarizes data for each screening for treatment history and plans to seek help post-screening. It is striking to notice that the majority of persons completing these online screenings have not been in mental health treatment, yet a majority of those responding to the question plan to seek professional help. This affirms the importance of these anonymous online mental health screenings for facilitating access to mental health services.

**TABLE 5: SUMMARY OF ONLINE MENTAL HEALTH SCREENING TREATMENT DATA  
(2017 – 2018)**

Screening Type	Never Been Treated	Plan to Seek Help
Generalized Anxiety	91% (of 637 respondents)	85% (of 125 respondents)
Depression	70% (of 971 respondents)	81% (of 264 respondents)
Bipolar	94% (of 170 respondents)	77% (of 22 respondents)
Eating Disorders	94% (of 142 respondents)	64% (of 22 respondents)
PTSD	89% (of 108 respondents)	68% (of 22 respondents)
Alcohol	89% (of 33 respondents)	60% (of 5 respondents)
Substance Use	95% (of 20 respondents)	25% (of 5 respondents)

- d. Outcome: Regularly evaluate the effectiveness of outreach programs conducted on campus. We continue to face challenges in our ability to consistently obtain evaluation data for our outreach programs, due to a number of factors, including the switch from Campus Labs to Qualtrics . We are committed to creating accessible and meaningful evaluation forms for outreach. In addition to obtaining important evaluation data, this will allow us to better report the demographics of the students served by our outreach programs.

**GOAL 3: ADMINISTER THE STAFF/FACULTY LIAISON PROGRAM TO ENHANCE RELATIONSHIPS WITH ACADEMIC DEPARTMENTS AND OTHER CAMPUS UNITS.**

This was the 20th year of the Faculty Liaison Program, which was created to develop and strengthen working relationships between UCC staff and academic departments/faculty. This program has helped academic departments/faculty better access services at the UCC and provides a specific individual contact when clinical consultation is necessary.

- a. Outcome: Update the UCC Staff/Faculty Assignment website on a regular basis. This list was updated regularly to accommodate changes in UCC staffing and may be accessed at <http://counselingcenter.utah.edu/faculty/department.php>
- b. Outcome: Utilize UCC Staff/Faculty Assignments to staff outreach requests. UCC Staff/Faculty assignments are often utilized as the first step in staffing outreach requests. After receiving a request from a particular department, the Prevention and Outreach Coordinator will first contact the staff/faculty liaison for that unit.
- c. Outcome: Monthly University of Utah College Open Houses. As noted in the introduction to this section, we have restructured our Faculty Liaison Program to include monthly College Open Houses. This gives faculty, staff, and academic advisors the opportunity to learn about UCC services in a more intimate setting. At each College Open House, we provide student utilization data specific to that college and have the opportunity to discuss how we might better serve each College's unique student needs. Beginning in January, 2018 we held three College Open Houses for the College of Science, School of Business and School of Dentistry and College of Pharmacy (combined).
- d. Outcome: Communicate annually via email with deans and department chairs about the UCC Staff/Faculty Liaison Program. We changed the timing of distribution of the annual email letter to College Deans and Department Chairs this year to coincide with the timing of the monthly College Open Houses discussed above. This letter, sent by the UCC Director, is now targeted to each University of Utah College with the goal of increasing attendance at the designated College Open House. Please see Appendix D for a sample of the 2017 – 2018 Faculty Liaison College Deans and Department Chairs letter.

#### GOAL 4: SUSTAIN A VIBRANT SOCIAL MEDIA PRESENCE.

Susan Chamberlain, Outreach Co-Coordinator, had primary responsibility for creating content for UCC social media platforms. The UCC Social Media Policy to establish guidelines for posting to social media may be found in Appendix F.

- a. Outcome: Maintain and regularly post to the UCC Facebook, Twitter and Instagram.



<https://www.facebook.com/UofUCounseling>

Our UCC Facebook page provides information about mental health topics and UCC therapy groups, workshops and social justice activities. We have emphasized skills-focused content such as mindful breathing and self-compassion exercises. The UCC Facebook page had a total of 796 “likes” by June 30, 2017, representing an 5.7% increase from the previous fiscal year, and 786 people following our Facebook page. We have also begun to record data regarding the “post-reach” of our Facebook page. This year, up to 2577 individuals viewed Facebook posts, with the modal post viewing numbers between 100 and 200.



<https://twitter.com/UofUCounseling>

<http://instagram.com/uofucounseling>

Twitter, Pinterest and Instagram continue to be active elements of our UCC social media platform. Currently we have 465 followers on Twitter and 850 followers on Instagram

- b. Outcome: Develop, create and post relevant You Tube videos on the UCC website.



<https://www.youtube.com/user/UofUCounselingCenter>

The UCC continued to maintain its YouTube channel this past year to share video information on counseling services with the larger campus. Videos include *What To Expect From the First Appointment*, *You Are Not Alone*, *Mental Health Awareness Promotional Video*, and *Group Therapy, Isn't.....* As noted above, one of our Social Work Interns created a new video this year that featured UCC clinical staff and dispels about counseling and counseling services.



### **UCC CORE OBJECTIVE #3: PROVIDE CRISIS INTERVENTION TO PROMOTE INDIVIDUAL AND CAMPUS SAFETY FOR U STUDENTS, STAFF AND FACULTY**

The Counseling Center maintains capability to respond to individual student mental health crises as well as campus crises. We now have two Mental Health Intervention Specialist (MHIS) staff whose primary function is to manage and triage students who present for crisis appointments at the UCC. These staff members see all students who present with a mental health crisis defined by our Request for Services form and conduct crisis intakes for students who will be continuing with UCC services. They work closely with clinical team leaders when managing crises. The UCC Request for Services form includes 7 questions ("I am currently unable to keep myself safe," "I am at risk to end my life or seriously harm someone else," "I am having strange experiences such as hearing voices or seeing things that others do not," "I am here today because I have been physically or sexually assaulted recently," "I am here today because someone close to me has died recently", "I am here because I am experiencing micro-aggressions, discrimination, and/or oppression", or "a U of U faculty or staff member has encouraged me to meet with a crisis counselor." We included the item related to micro-aggressions, discrimination, and oppression so that students impacted by these issues would have access to more immediate care given the impact of national and global events that have negatively affected U students who possess marginalized identities.

**In 2017 – 2018, UCC staff logged 438.27 hours of direct crisis intervention services (428 appointments). 101 crisis intakes were conducted during this timeframe. *This demonstrates a 45.1% increase in the number of crisis appointments compared to the previous year***, which was the second year that we had our Mental Health Intervention Specialists in place to provide urgent access crisis services. Please note that crisis intakes begin as crisis intervention sessions. If the student is eligible for UCC services, a crisis intake can be conducted with the appointment changed in Titanium accordingly. Logged crisis intervention sessions represent students who presented for a crisis appointment but who are not continuing with UCC services, students who are referred for a follow-up advance or same intake, or students being treated at the UCC who presented for a crisis appointment outside of their regularly scheduled counseling session.

The provision of crisis intervention services to the campus community is aligned with *Student Affairs Strategic Objective # 1a*. (Promote physical, spiritual and psychological health and wellness, collaborating across campus with multiple organizations) and *Strategic Objective # 5* (Partner with faculty, staff and external constituencies to foster student development and enhance the greater community). This Core Objective and related goals connect to the *Health& Wellness and Campus Community Student Affairs Learning Domains*.

**GOALS AND OUTCOMES SUPPORTING UCC CORE OBJECTIVE #3: PROVIDE CRISIS INTERVENTION TO PROMOTE INDIVIDUAL AND CAMPUS SAFETY FOR U STUDENTS, STAFF AND FACULTY**

**GOAL 1: MAINTAIN EFFECTIVE RESPONSIVENESS TO CAMPUS CRISES AND TRAUMATIC EVENTS.**

- a. Outcome: Efficiently respond to campus crises. The UCC is pro-active in reaching out to campus units whenever we learn of the death of a student, staff, or faculty member. **In 2016 – 2017, we provided 3 community support meetings facilitated by UCC staff following a critical incident such as a suicide, student death, or other traumatic event.** This included campus response for two high profile campus tragedies in Fall 2017. The first was the suicide of an international graduate student, followed by the murder of an undergraduate student in a canyon adjoining campus that necessitated a lock-down of the residence halls. In addition to facilitating community support meetings, UCC staff consulted closely with campus partners and participated in memorial services for these students.
- b. Outcome: Provide effective consultation to campus partners to determine the best course of action when a traumatic event occurs. The outreach coordinator collaborates with UCC clinical staff to organize community support meetings for affected departments. Once we receive a request for support from a university department that has experienced a traumatic event, we first assess the situation by determining as much information as possible about the impact of the event on that department. While we value being responsive to these requests, we often “slow down the process” to think carefully about the timing of when to best hold the community support meeting. We typically collaborate with our campus partners regarding how to share information about the tragic event to affected students, staff and faculty. We always send two co-facilitators to any outreach of this kind so that one facilitator can meet individually with students if they become distressed during the group meeting. As noted above, we fortunately provide a minimal number of these types of outreach requests each year, reflecting the relative low frequency of these events.

**GOAL 2: REPRESENT THE UCC ON THE BEHAVIORAL INTERVENTION TEAM AND CAMPUS EMERGENCY OPERATIONS PLANNING COMMITTEES.**

- a. Outcome: Provide effective consultation regarding the campus mental health response by actively participating on campus safety-related committees. The UCC Clinical Director serves as a member of the Behavioral Intervention Team, which operates out of the Dean of Students office. This UCC role on this team is to provide mental health guidance, consultation and support. **Cindy Harling, Associate Director for Clinical Services, served on the Behavioral Intervention Team in 2017 – 2018 and logged 35.25 hours in this role.**

**GOAL 3: PROVIDE CAMPUS SUICIDE PREVENTION TRAININGS TO CAMPUS GATEKEEPERS ON A REGULAR BASIS BY REQUEST AND INITIATED BY THE UCC.**

- a. Outcome: Provide evidence-based campus suicide prevention trainings. **Suicide prevention gatekeeper trainings were provided to 6 campus departments in 2017 – 2018.**
- b. Outcome: Regularly evaluate the effectiveness of suicide prevention programs conducted on campus. We are continuing our efforts to improve our evaluation methods to ensure that all campus suicide prevention gatekeeper trainings are evaluated.

**UCC CORE OBJECTIVE #4: PROVIDE TRAINING TO INTERDISCIPLINARY STUDENTS IN THE MENTAL HEALTH FIELD**

The training of graduate-level students in Psychology and Social Work is a highly valued and central function of the UCC. In addition to contributing to the educational mission of the University, UCC trainees provide direct clinical services to University students. As detailed below, Departmental Core Objectives of the UCC permanent clinical staff in the Training area in 2017-2018 included the recruitment, selection, orientation, training, supervision, oversight, evaluation and administration of 19 graduate-level trainees in a total of 4 clinical UCC training programs from across campus and across the country.

For the 2017-2018 academic year, the UCC Training Committee was comprised of Steve Lucero, PhD (Training Director), Josh Newbury, LCSW (Coordinator of Social Work Training), and Susan Chamberlain, PhD (Coordinator of Practicum Training). Steve Lucero maintained overall responsibility for agency training and directly administered the psychology internship, Josh Newbury continued direct administrative responsibility for social work training. Susan Chamberlain administered the doctoral practicum training programs. Key activities of UCC permanent clinical staff members related to training are explicated below.

*Training Program Changes and Accomplishments for 2017-2018*

- Completed a successful psychology intern national search and matched with 4 interns from APA-accredited academic programs (University of Texas at Austin, University of North Dakota, West Virginia University, and University of Utah) for 2018-2019.
- Completed a successful social work intern search from the Utah State University College of Social Work, selecting a diverse cohort of 4 interns for the 2017-2018 academic year.
- Implemented updated Psychology Intern Evaluation instrument in line with American Psychological Association (APA) updated Standards of Accreditation (SOA).

The provision of training to interdisciplinary students in the mental health field is aligned with *Student Affairs Strategic Objective # 5*, Partner with faculty, staff and external constituencies to foster student

development and enhance the greater community. This key activity and related goals connect to the *Campus Community and Diversity and Inclusion Student Affairs Learning Domains*.

**GOALS AND OUTCOMES SUPPORTING UCC KEY ACTIVITY #4: PROVIDE TRAINING TO  
INTERDISCIPLINARY STUDENTS IN THE MENTAL HEALTH FIELD**

**GOAL 1: ADMINISTER HIGH-QUALITY TRAINING PROGRAMS IN COLLABORATION WITH THE  
DEPARTMENTS OF EDUCATIONAL PSYCHOLOGY, PSYCHOLOGY, AND THE COLLEGE OF SOCIAL WORK.**

**a. Outcome: Facilitate trainee skill development in discipline-specific areas.**

Social Work Training. The UCC selects four social work interns each year from the Masters of Social Work program at the University of Utah's College of Social Work. These four interns complete a 20 hour per week internship across Fall and Spring Semesters, collectively totaling 2 FTE.

These interns provide individual, group and couples therapy, intake assessment and crisis intervention services and campus community outreach. They also complete a Diversity Initiative on campus. UCC averages approximately 20 applicants each year for our four social work internship slots. Our five Licensed Clinical Social Workers (LCSWs) are all approved Field Faculty for the University of Utah's College of Social work, marking an important collaboration between Student Affairs and Academic Affairs on campus. These LCSWs provide clinical training and supervision via small group and individual mentorship. Agency supervisors oversee and incur professional liability for interns' work.

Practicum Training. The UCC functions as a "core" practicum site for all 2nd year doctoral students in Counseling Psychology and in Clinical Psychology at the University of Utah. The administration of these programs for 2017-2018 was the responsibility of Susan Chamberlain, PhD. The year brought four practicum counselors from Counseling Psychology, each of whom spent approximately 15 hours per week in the agency in a general Psychotherapy Practicum during Fall and Spring Semesters. There were also seven practicum counselors from Clinical Psychology, each enrolled in two separate practica: Cognitive Behavioral Therapy and Psychological Assessment, totaling approximately 15 hours per week.

Each of these practica is another important example of collaboration between Student Affairs and Academic Affairs at the University. While clinical supervision for the Clinical Psychology doctoral students is provided by licensed academic faculty members, licensed UCC psychologists and doctoral interns provide supervision for the Counseling Psychology doctoral students.

**TABLE 6: SOCIAL WORK INTERNS' CLINICAL CONTRIBUTIONS (2017 – 2018)**

Social Work Interns' Clinical Contributions 2017-2018 (N=4; Total FTE = 2.0)			
Intake Sessions	Individual Psychotherapy Sessions	Group Psychotherapy Sessions	Campus Outreach Presentations (Hours)
94	422	82	26.75

**TABLE 7: DOCTORAL PRACTICUM COUNSELORS' CLINICAL CONTRIBUTIONS (2017 – 2018)**

Doctoral Practicum Counselors' Contributions 2017-2018 (N=11; Total FTE = 2.55)		
Intake Sessions	Individual Psychotherapy Sessions	Psychological Assessment Test Batteries
93	626	25

- b. Outcome: Provide effective supervision & training. UCC licensed permanent clinical staff members and psychology interns provided weekly clinical supervision to four of these graduate trainees. UCC licensed staff and psychology interns provided an average total of 14 hours per week of one-to-one clinical supervision during Fall and Spring semesters and 1 hour per week during Summer term. UCC permanent clinical staff provided an average of 3.5 hours of training/clinical seminars to these trainees weekly including the UCC Training Seminar, Social Work Training Seminar, Clinical Consultation Hour and Staff Development Seminar.
- c. Outcome: Work effectively with training coordinating departments. The UCC Training Committee maintained collaborative relationships with our academic campus training partners. Examples of specific outcomes and accomplishments for the year include:
- As mentioned, all five of the available UCC LCSWs are recognized by the College of Social Work as approved Field Faculty Instructors.
  - The UCC again sponsored a Social Work Intern Open House for MSW-student applicants from the local College of Social Work.
  - The UCC continues to have the Supervision Seminar for Psychology Interns co-taught by the Counseling Psychology faculty member who is concurrently the Practicum Instructor for the "Core" Practicum here. This allows training collaboration between UCC professional staff and interns and Ed Psych faculty members Sue Morrow, PhD (Fall) and Karen Tao, PhD (Spring).
  - Susan Chamberlain, PhD worked closely with faculty members from the Clinical Psychology doctoral program in the Department of Psychology—to administer the department's Cognitive-Behavioral Therapy Practicum and Assessment Practicum at UCC, respectively.

**GOAL 2: ADMINISTER AN AMERICAN PSYCHOLOGICAL ASSOCIATION (APA) ACCREDITED PSYCHOLOGY DOCTORAL INTERNSHIP TRAINING PROGRAM.**

Psychology Internship. The psychology internship at UCC has been nationally recognized and accredited by the American Psychological Association (APA) since 1979, one of the longest-standing accredited university counseling center psychology internships in the country.

The Psychology Internship Training Program at UCC brings four full-time interns (4.0 FTE) to the center each year via a competitive national search and matching process. These are doctoral candidates in psychology in their final year of PhD programs from across the country. They complete a 12 month, 2000 hour UCC internship providing individual, group and couples therapy, intake assessment and crisis intervention services, psychological testing services, campus community outreach and clinical supervision to less-experienced campus graduate student therapists. They also teach credit-bearing undergraduate classes and complete Diversity Initiatives on campus.

While Dr. Steven Lucero directly administered the psychology internship training program, the ten licensed psychologists at UCC collectively recruit, select, orient, train, supervise and evaluate these interns across their internship year. Supervision involves a personal mentorship model. The intern practices under the license of the supervising psychologist who incurs full professional liability for the intern's actions. Professional internship accreditation standards require that interns each receive at least 4 hours of weekly training and supervision. In turn, each intern provides approximately 22 hours per week of direct service to the agency and university community. UCC permanent clinical staff provided an average of 8 hours of individual supervision and 5 hours of training/clinical seminars to psychology interns weekly including the UCC Training Seminar, Psychology Training Seminar, Supervision Seminar, Clinical Consultation Hour, Teaching Supervision and Staff Development Seminar.

- a. Outcome: Facilitate trainee skill development in accordance with APA accreditation standards.  
Refer to Tables below to see documentation of intern skill development in reaching APA accreditation standards for doctoral internship completion.

**TABLE 8: PSYCHOLOGY INTERNS' CLINICAL CONTRIBUTIONS (2017 – 2018)**

Psychology Interns' Contributions 2017-2018 (N=4; Total FTE = 4.0)	
Intake Sessions	376
Crisis Interventions	19
Couples Sessions	38
Individual Psychotherapy Sessions	932
Group Psychotherapy Sessions	196
Campus Outreach Presentations & Teaching (Hours)	71.08
Teaching (Hours)	87
UCC Mindfulness Clinic Offerings (Hours)	45.5

**TABLE 9: PSYCHOLOGY INTERNS' SUPERVISOR EVALUATION SUMMARY DATA (2017 – 2018)**

Psychology Intern Comprehensive Evaluation Summary Data 2017-2018	
Internship Goal Area	End-of-year Mean
<b>FOUNDATIONAL DEVELOPMENT</b>	<b>7.30</b>
Ethical and Legal Standards	7.11
Professional Values, Attitudes, and Behaviors	7.32
Individual and Cultural Diversity	7.49
<b>PROFESSIONAL DEVELOPMENT</b>	<b>7.26</b>
Communication and Interpersonal Skills	7.26
Consultation and Interprofessional/Interdisciplinary Skills	7.19
Research	7.35
<b>CLINICAL DEVELOPMENT</b>	<b>7.32</b>
Intervention	7.29
Assessment	7.36
Supervision	7.30
<b>CUMULATIVE AVERAGE</b>	<b>7.30</b>

**Note:** The following scale is used for the evaluation ratings immediately above:

Rating	Training Level Expectation
0	Practicum student
1	Beginning of internship
2	
3	
4	Internship mid-point
5	
6	
7	Internship completion
8	
9	Post-doctoral residency completion
10	Advanced practitioner
-	Not enough data

- a. *Outcome: Provide effective supervision.* UCC licensed psychologists provided weekly clinical supervision to all four psychology interns. Each intern receives 2.0 hours of primary individual clinical supervision; 1.0 hour of small group supervision of supervision; 1.0 hour of small group supervision for training in professional development, group, evidence based practice, and assessment; .5 hours individual supervision with a group co-leader; and .5 hours supervision for teaching. Therefore, UCC licensed staff provided an average total of 16 hours per week of clinical supervision during Fall and Spring semesters and 10 hours per week during summer term. UCC permanent clinical staff members also provide an average of 2.5 hours of training/clinical seminars to these trainees weekly including the UCC Training Seminar, Clinical Consultation Hour and Staff Development Seminar. This makes it possible for the psychology interns to collectively provide more than 2000 hours of total professional service and 500 hours of direct clinical service and outreach to University students, as in Table 9 above.

- b. *Outcome: Provide training seminars that adhere to APA accreditation standards.*

In addition to the clinical supervision described above, the UCC psychology internship maintains a program of training seminar consistent with APA accreditation standards. All UCC permanent clinical staff members contribute to these seminars, which include:

- **Orientation & Training:** Agency clinical training spanning much of August and part of September
- **UCC Training Seminar:** A weekly seminar for psychology and social work interns offered Fall and Spring comprised of the following 1 hour long segments:



- Couples Therapy Training seminar (5 sessions)
  - Group Therapy Training (6 sessions)
  - Crisis and Trauma Seminar (3 sessions)
  - Consultation/Outreach Training (4 sessions)
  - Ethics in Applied Mental Health (4 sessions)
  - Diversity Training (10 hours of sessions)
- **Psychology Training Seminar:** A weekly seminar for psychology interns offered year-long comprised of the following segments:
    - Assessment Training (7 sessions)
    - Empirically-supported Treatments (7 sessions)
    - Professional Development (7 sessions)
    - Licensing Standards, & Credentialing Seminar (8 two hour sessions)
  - **UCC Staff Development Seminar:** A monthly seminar series for the entire UCC clinical staff comprised of guest speakers on a variety of topics.
  - **Clinical Case Consultation:** A weekly forum for clinical consultation regarding clients who present with high severity and/or complexity.
- c. Outcome: Work collaboratively with national organizations (APA, APPIC, ACCTA) to administer the program, as well as interfacing with psychology doctoral faculty locally and nationally. In addition to maintaining APA-accreditation of the psychology internship, the UCC is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and the Association of Counseling Center Training Agencies (ACCTA). Dr. Steven Lucero maintained memberships in each of these national organizations and interacted with them and academic programs in the following ways:
- i. APA:
    - Filed an Annual Report Online (ARO) of demographic and outcome data related to the current and past year's psychology intern cohorts.
    - Participated in the national APA Minority Fellowship Program to recruit diverse intern applicants to UCC.
    - Drs. Steve Lucero, Glade Ellingson, and Lauren Weitzman served as APA Accreditation Site Visitors.
  - ii. APPIC:
    - Registered for the annual APPIC Internship Match, a computer-based matching service whereby national internship applicants and internship sites enter into binding placement agreements.
  - iii. Academic Programs & Faculty Members:

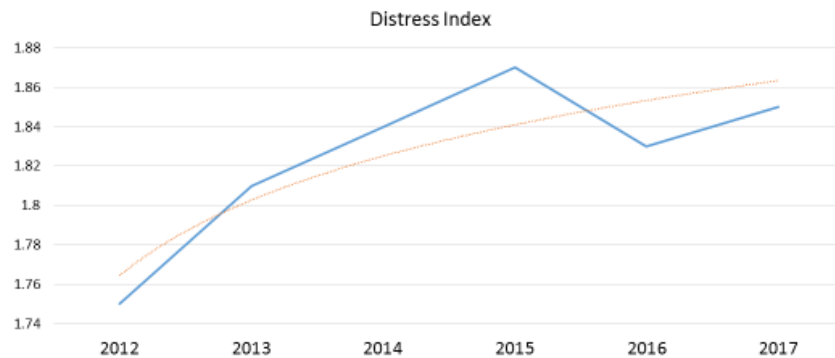
- Interacted regularly with faculty members in Clinical Psychology and Counseling Psychology on campus and across the country in recruiting and selecting interns.
- Corresponded with faculty Directors of Clinical Training (DCTs) regarding the performance of current psychology interns.

This involvement in professional organizations and with academic programs has raised awareness of the UCC psychology internship nationally and has helped ensure a steady stream of applicants for UCC psychology internships, averaging 53 applicants per year for our four psychology internship slots across the past three years.

### UCC PLAN FOR THE FUTURE

UCC ANTICIPATED CHALLENGES. The ***severity of presenting concerns for clients seeking services at the UCC*** continues to represent an area of challenge as illustrated in the figures below.

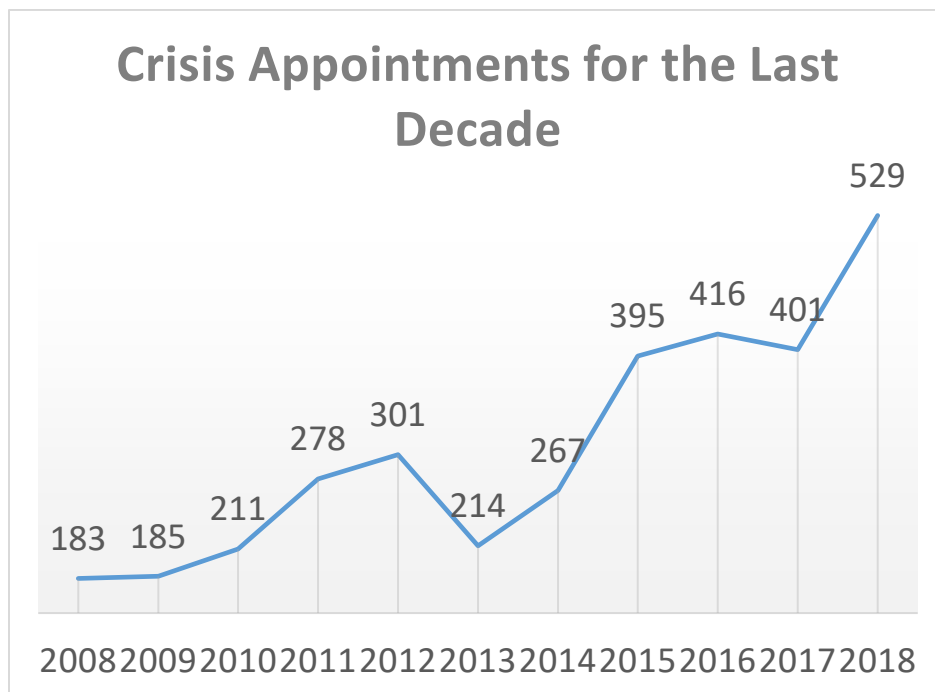
### 6 Year Overall UCC client Distress Trend



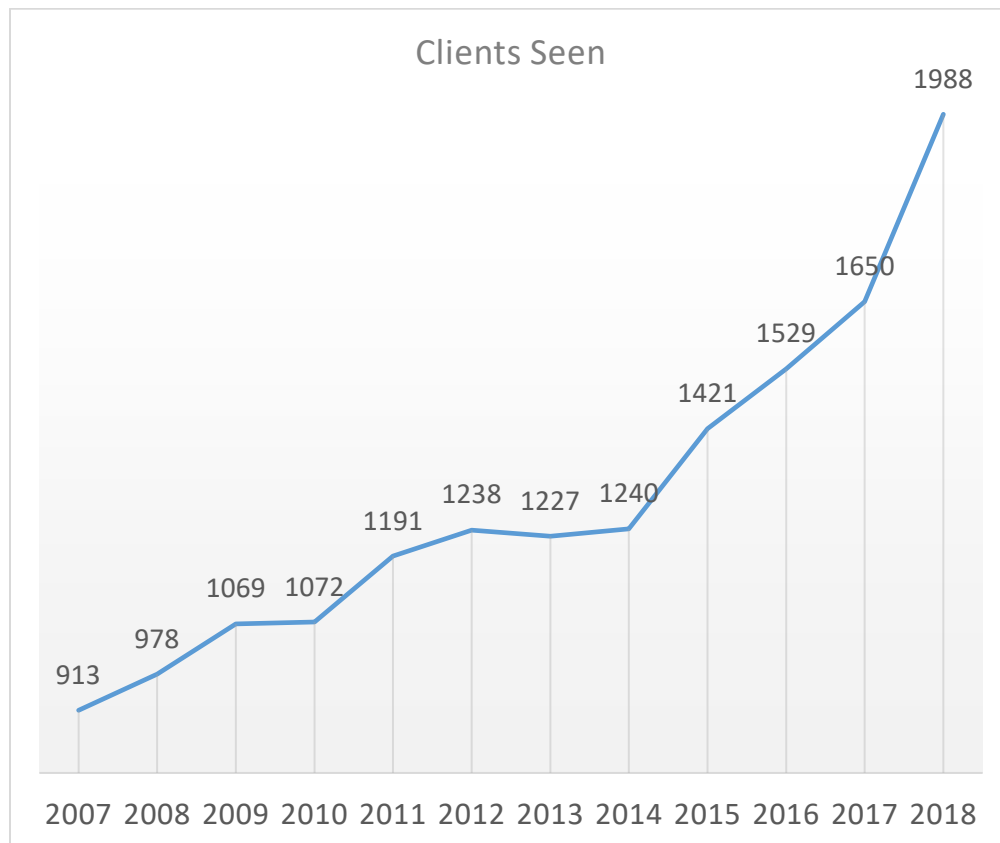
## UCC CCAPS 6 Year Upward Trending

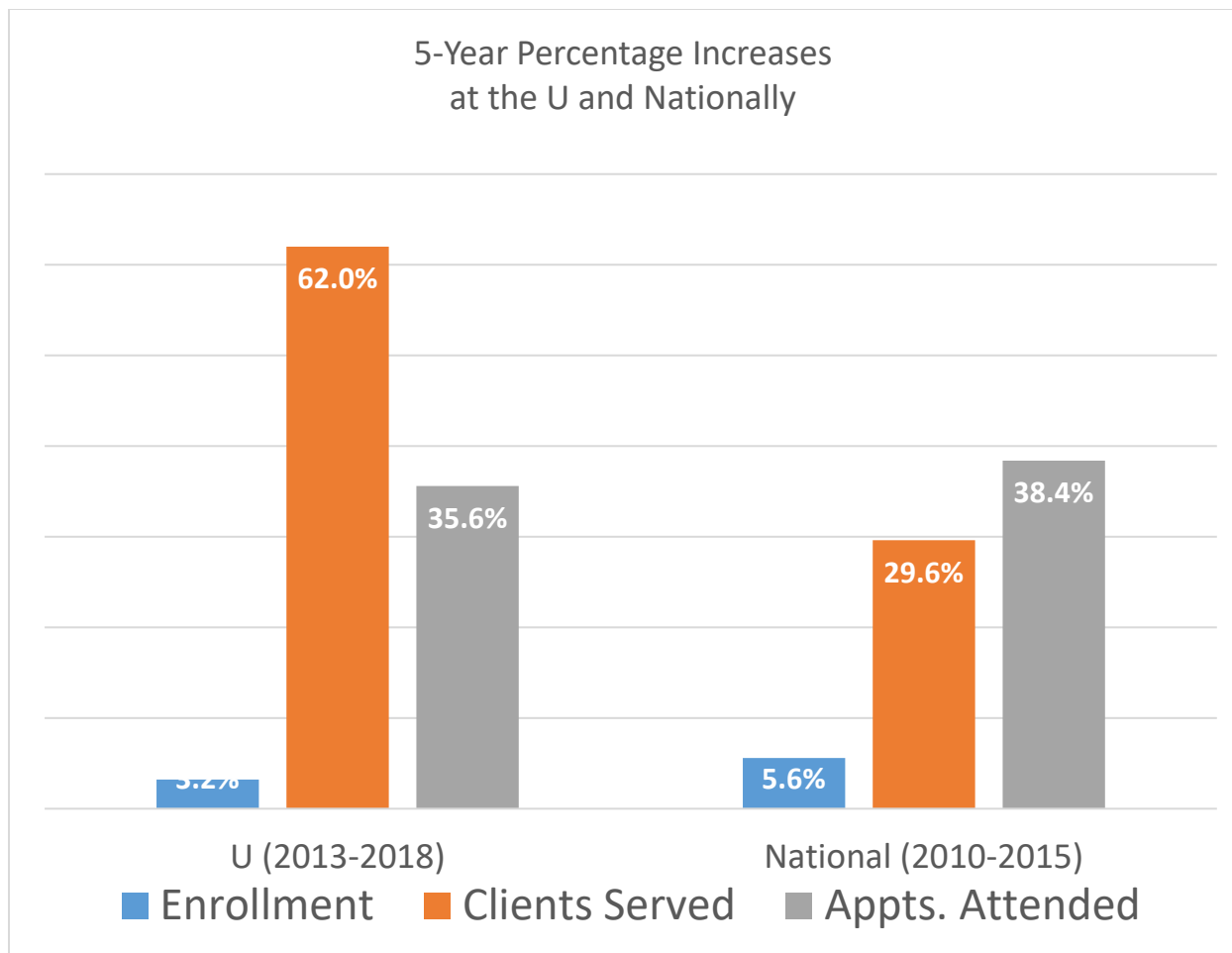


The addition of our Mental Health Intervention Specialists has enhanced our ability to respond to clients who present at the UCC in crisis and more effectively get them into our clinical system. At the same time, we continue to experience an increase in the number of crisis sessions, with a 31.9% increase in 2017 – 2018 compared to the previous year for crisis intervention and crisis intake sessions. The figure below represents the increase in crisis appointments since 2008.



***We continue to see greater numbers of students each year, with a 20.5% increase in the number of clients seen in 2017 – 18 compared to the previous year.*** This requires that we continue to accommodate how we provide individual counseling as the number of students we see each year continues to increase, scheduling counseling appointments further apart with the norm of seeing clients every 2 – 3 weeks. The figures below show the continued increase in number of clients seen since 2008 and demonstrate how this increase outpaces institutional enrollment growth both here at the University of Utah and nationally.





Even with our success in receiving a \$4 Student Mental Health fee beginning Summer 2018 that has allowed us to hire two 1.0 FTE social workers and increase our total psychiatric APRN FTE from 1.375 to 1.625, ***our clinical staffing levels continue to fall below International Association of Counseling Services (IACS) standards, which recommend a 1.0 FTE professional staff member for every 1,000 – 1,500 students.*** As of Fall 2018, we are at 18.46 FTE, which translates to 1:1833 counselors per students at current enrollment levels. We require an additional 3.54 clinical FTE to obtain the recommended 1:1500 level.

As we acquire new positions, we continue to face the challenge of having ***sufficient office space*** to accommodate our new clinical staff members. We were able to solve our space problem this year by having our two APRN staff move to the third floor, and to open up an additional fourth floor clinical office with Katy Riney moving into a Testing Center position once she took over the Clinical and Training Executive Secretary position in August 2018. Our ***waiting room continues to have insufficient space during busy periods***, resulting in clients needing to stand while waiting for their appointment during these peak times. We have attempted to partially address this problem by scheduling returning client appointments on both the hour and half-hour.

UCC ANTICIPATED OPPORTUNITIES. We were fortunate to receive ***new central administration funding*** for the 2016 – 17 budget cycle, which allowed us to hire Stacey Pearson for a .50 FTE psychiatric APRN, which increased our total APRN FTE to 1.375 in 2016 – 2017. This has ***improved our ability to provide sufficient and consistent psychiatric medication services*** to UCC clients as demonstrated by the 50.9% increase in psychiatric medication appointments in 2017 – 18 compared to the previous year. We were also able to hire Christina Kelly LeCluyse, LCSW for a 10-month Clinical Social Worker position. Ms. Kelly LeCluyse works 40 hours/week during the academic year (August – May).

***A significant accomplishment in 2017 – 2018 was the approval of a new \$4 student mental health fee.*** This was the culmination of several years of collaboration with the ASUU Administration, which included the passing of a Joint Resolution by the ASUU Assembly and Senate in favor of a \$7 - \$12 student mental health fee. We presented our student mental health fee proposal to the Student Fee Committee in December, 2017, and the fee was subsequently approved by the Board of Regents. With the approval of this fee, we funded Jack Haden, LCSW, a full-time Mental Health Intervention Specialist (MHIS). This allowed Danielle Fetty, PhD, currently in an MHIS role, to move to a staff psychologist position. We also funded a full-time Clinical Social Worker with MHIS duties on Fridays, hiring Claudia Reyes, LCSW in this role. Mr. Haden and Ms. Reyes began their positions in August 2018. Additionally, we increased Stacey Pearson, APRN to .75 FTE. As we did not obtain the level of student mental health fee funding we were striving for, we plan to continue to collaborate with ASUU this next year and hope to be able to return to the Student Fee Committee to ask for additional student fee funds.

UCC GRANTS/CONTRACTS: The UCC has been fortunate to receive annual funding from the Student Affairs Parent Fund. In Spring 2017, we received a \$2000 grant to create a new video about UCC Services for the UCC website. We also received \$10,000 for an “invitation only” Parent Fund grant to support the development of our new peer mentoring program, currently called Resilient U. We will receive \$5000 per year for two years for this initiative.

UCC GIFTS/NEW REVENUE: As noted above, we were successful in receiving approval for a \$4 student mental health fee beginning Summer semester 2018. In addition to the increase in psychiatric APRN time and two new clinical hires mentioned above, we plan to fund Roula Sargetakis, Office Assistant from student mental health fee monies. Ms. Sargetakis will begin spending all of her .75 FTE working at the UCC front desk, after formerly splitting her time between the UCC front desk and the Testing Center. Remaining funds for this first year of the student mental health fee will be targeted to fund a stipend for our two new Social Work practicum students and to upgrading the UCC waiting room. We did not receive any other new gifts in 2017 – 2018.

## LEARNING SUCCESS CENTER

### LSC MISSION AND SERVICES

The Learning Success Center (LSC) is an academic support program designed to give students the assistance they need in order to have a successful academic experience. The program is made up of two primary components: Associated Students of the University of Utah (ASUU) Tutoring Services and Supplemental Instruction (SI). Both were coordinated by Leslie Giles-Smith with Riley Larsen as office manager/executive secretary over tutoring and Brenda Flynn as executive secretary over SI. Steven Lucero, Ph.D. took over as interim program manager for the LSC after the end of the reporting timeline for this report and was responsible for its production as no elements of the LSC annual report for 2017-2018 were updated prior to his taking on interim responsibilities. The LSC works collaboratively with many other Student Affairs offices and other campus programs to provide study skills, learning assistance, and tutoring for college level learners.

In addition to the permanent staff mentioned above, the LSC is supported by one graduate assistant, Kassidy Giggey, and a number of undergraduate student workers who function as 2 office clerks, 2 SI supervisors, 16 SI leaders; and approximately 70 tutors. This report will describe in detail the departmental core objectives of the LSC along with goals and outcomes for each.

### ALIGNMENT WITH THE STUDENT AFFAIRS STRATEGIC OBJECTIVES

All LSC activities are intended to assist students in the development of content knowledge and study skills consistent with the Student Affairs Learning Domain of *Academic Persistence and Achievement: Skill acquisition and knowledge which will facilitate continued academic learning and contribute to the completion of a program and graduation of students.*

The LSC aligns most closely with the following Student Affairs Strategic Objectives:

2. Provide education that ensures all staff is properly trained to provide professional and competent service.
6. Utilize a coordinated assessment, evaluation and research approach to promote data driven decision-making.
8. Promote the effective use of best practices in Student Affairs departments, programs and services.

## LSC CORE OBJECTIVE #1: ONE-ON-ONE, SUBJECT SPECIFIC TUTORING

The primary goal of ASUU Tutoring Services is to provide students with high quality, affordable tutoring for the most “in-demand” lower division, general education courses. To that end, the LSC employs an average of 70 tutors with an annual turnover of approximately 30%.

ASUU Tutoring Services functions as a referral service. Students struggling in their courses are given the name and contact information for multiple tutors with expertise in the needed subject area. By providing more than one name, the student is assured of finding a tutor whose schedule is compatible with their own. It is the responsibility of the student to call and schedule their own appointment.

Tutoring sessions are held at any time and location that is agreed upon by both the tutor and the student, provided that the session is held in a public building during public access hours to facilitate safety for both tutor and student.

Tutors must have a GPA of 3.0 or higher and have earned a B or better in the course(s) they wish to tutor. In addition, each tutor is interviewed and screened for appropriate communication and interpersonal skills. Tutors who are hired by the LSC are required to attend a two hour orientation designed to reinforce departmental policies and procedures as well as provide suggestions on effective tutoring techniques. Additional training is available for tutors interested in earning their College Reading and Learning Association (CRLA) certification.

Thanks to a generous subsidy from ASUU, the cost of tutoring is kept at an affordable rate of \$7.00 per hour for individual tutoring and \$4.00 per hour for group tutoring. Students purchase time cards to pay for their tutoring sessions. These time cards function as vouchers, allowing the student to use them for one hour of tutoring.

Every effort is made to assure that tutors are available in the most “in-demand” lower division, general education courses. These courses are listed in the accompanying table.

Most “In-Demand” Courses	
Subject	Course #'s
Math	1010, 1030, 1050, 1060, 1070, 1090, 1210, 2210, 2250
Chemistry	1110, 1120, 1210, 1220, 2310, 2320, 3510, 3520
Physics	2010, 2020, 2210, 2220
Biology	1210, 2030, 2325, 2420, 3510, 3520
Economics	2010, 2020, 4010, 4020
Writing	1010, 2010, or assistance with writing assignments for other courses
Spanish	1010, 1020, 2010, 2020
French	1010, 1020, 2010, 2020
Accounting	2600, 3600
ESL	Assistance with writing, speaking, and cultural acclimation
OIS	2340, 3440
Finance	3040
Computer Science	1410
History	1700
Statistics	Econ 3640, Psych 3000, Soc 3112, Business 3440

In addition to subject specific tutoring, ASUU Tutoring Services also offers academic skills tutoring. This option is ideal for students who have not yet developed college-level study skills. Tutors provide



assistance with time management, concentration, taking effective lecture notes, textbook study, efficient reading, writing basics, test preparation, and test taking.

ASUU Tutoring Services also sponsors a drop-in tutoring facility housed in the Marriott Library. This drop-in center provides assistance with math, chemistry, physics and other courses five nights a week. Any University of Utah student may take advantage of this resource. It is free of charge and no appointment is necessary. This service is the result of collaboration with the Marriott Library, ASUU, and the office of the VP of Student Affairs.

ASUU Tutoring Services strives to provide students with the best possible academic support for their situation. Recognizing that there are other tutoring programs on campus that can contribute to this goal, ASUU Tutoring Services continues to work with student groups and other learning assistance programs to inform students of their options. To that end, ASUU Tutoring Services continues to update and publish a master list of alternative tutoring services. This list is posted on the LSC website <http://tutoringcenter.utah.edu/alternative-tutoring-services.php> and is widely shared with academic departments, Student Affairs offices and other student groups.

## **TUTORING GOALS AND OUTCOMES**

The activities described above are intended to help ASUU Tutoring Services achieve its goal to provide students with quality, affordable tutoring for the most “in-demand” lower division, general education courses.

The LSC effectively provides services for students seeking out tutoring. Approximately 61% of students who visited the LSC to inquire about tutoring followed through and participated in a tutoring session.

Not all students who inquire about tutoring are looking for paid, pre-scheduled, one-on-one tutoring. In these cases the LSC staff assisted the student by making referrals to other LSC services (Marriott Drop-In Tutoring, Supplemental Instruction, Study Skills Seminars, etc.) Referrals are also made to academic assistance programs within other departments and organizations (Math Lab, Writing Center, etc.). Many of these students may actually have received the help they needed as a result of their inquiry, but are not accounted for in ASUU Tutoring Services utilization data.

## ASUU TUTORING SERVICES UTILIZATION DATA

Based on the number of requests for tutoring, the most in-demand subjects for one-on-one tutoring are:

- Math – 50%
- Science – 30%
- Social Sciences – 7%

Tutoring service usage can be understood via the data presented below. Please note that the 2017 – 2018 numbers represent a 33.3% decrease in the total number of students served by one-on-one tutoring services and a 20.9% decrease in total hours compared to the previous year.

**LSC TABLE 1: TUTORING USAGE (2017-2018)**

Semester	# of Students	# of Hours
Fall 2017	153	717
Spring 2018	140	868
Summer 2018	33	190
TOTAL	326	1805

**LSC TABLE 2: USAGE BY YEAR (2017-2018)**

Tutoring by year in school	%
First year	26%
Sophomore	25%
Junior	26%
Senior	16%
Other/Undeclared	7%

**LSC TABLE 3: REPORTED GPA OF STUDENTS USING TUTORING (2017-2018)**

Reported GPA	%
0.0 - 1.5	0%
1.6-2.0	2%
2.1-2.5	6%
2.6-3.0	19%
3.1-3.5	24%
3.6-4.0	25%
No Answer	23%

### **LSC CORE OBJECTIVE #2: SUPPLEMENTAL INSTRUCTION**

The Supplemental Instruction (SI) program assists students in improving understanding of course content and improving grades through regularly scheduled, out-of-class group study sessions. SI is offered in a number of lower division courses including accounting, biology, chemistry, history, math, physics, and psychology. Group study sessions are facilitated by undergraduate students who 1) have satisfactorily completed the relevant course or who can demonstrate competency in the subject area; 2) demonstrate effective interpersonal and communication skills; and 3) have a good academic record.

The SI model originated at the University of Missouri--Kansas City in 1973. Rather than targeting “at risk” students, SI aims to help with “at risk” courses. These courses are typically lower division, general education courses that have high enrollment and high D, E, W rates. SI sessions are regularly-scheduled, informal review sessions in which students compare notes, discuss readings, develop organizational tools, and predict test items. Students learn how to integrate course content and study skills while working together in a collaborative setting.

During the 2017-2018 year, the SI program had sixteen undergraduate student instructors and two student supervisors. SI leaders are trained in discussion-leading techniques, study skills, collaborative learning techniques, classroom management and the SI model of instruction. Ongoing training was made a priority throughout the year through monthly staff development meetings. SI leaders recognize the value of the leadership experience they are receiving and many have reported highlighting this experience on resumes and graduate school applications.

### **SI GOALS AND OUTCOMES**

The activities described above are intended to help the Supplemental Instruction program achieve its goal to assist students in improving understanding of course content and improve grades through regularly scheduled, out-of-class group study sessions. Historically, students consistently participating in SI receive a course grade .50 higher than those who do not. Based on past performance and anecdotal

feedback, it would appear that SI participants continue to outperform their peers who do not participate.

The LSC effectively provides supplemental instruction services. In a survey of 294 student respondents who had used SI services during the spring semester of 2018, most students indicated satisfaction with SI services:

**LSC TABLE 4: SPRING 2018 SUPPLEMENTAL INSTRUCTION SURVEY RESULTS (2017 – 2018)**

<b>% of Students indicating “Strongly Agree”</b>	
My SI Leader gives helpful tips for improving study skills.	75%
My SI Leader is knowledgeable about course content.	93%
My SI Leader is organized and well prepared.	89%
Overall, my SI Leader was effective.	85%
SI helped me get a better grade in this class.	67%
The skills I developed in SI will help me in future classes.	53%
I would recommend SI to other students.	81%

#### **SUPPLEMENTAL INSTRUCTION UTILIZATION DATA**

Utilization information is taken from actual attendance rolls taken at each SI session. Using Tutor Trac software, 1235 and 1052 students attended supplemental instruction during the Fall 2017 and Spring 2018 semesters, respectively.

Additional information about students utilizing SI is self-reported by students participating in a Campus Labs Survey administered at the end of every semester. Students who responded to the SI Spring Semester survey mentioned above reported the following demographic information:

**LSC TABLE 5: DEMOGRAPHIC DATA OF STUDENTS USING SI IN SPRING 2018**

<b>Percent</b>	<b>Year in School</b>
<b>31%</b>	First year
<b>34%</b>	Sophomore
<b>25%</b>	Junior
<b>11%</b>	Senior
<b>7%</b>	Transfer student

### **LSC CORE OBJECTIVE #3: TRAINING**

In keeping with the Student Affairs Strategic Plan (Strategic Objective #2---*Provide education that ensures all staff is properly trained to provide professional and competent service.*), all LSC programs provide quality training and on-going evaluations for academic assistance providers.

#### **ASUU TUTORING SERVICES TRAINING**

All tutors new to ASUU Tutoring Services, are required to participate in a New Tutor Orientation session. During the 2017-2018 academic year the LSC continued to partner with academic success colleagues in academic departments to provide a campus-wide tutor training coalition. In this larger forum, tutors learned about the role of the tutor, effective communication strategies, dealing with students in distress, and respecting diversity. Optional training modules were held throughout fall semester and covered learning styles, group dynamics in tutoring, and diversity awareness.

#### **SUPPLEMENTAL INSTRUCTION TRAINING**

Training and evaluation are key components of the SI instructional model. Training for SI is accomplished in three strategic ways. First, all SI leaders participate in two full days of training each August. This training allows experienced SI leaders and supervisors to share knowledge with new leaders on a variety of topics including SI goals, theory, research and benefits, as well as collaborative teaching techniques. The two day training also allows SI leaders to get to know one another and develop a sense of community among SI team members. The two day training culminates with each leader facilitating a mock SI session with feedback provided by their fellow SI leaders and SI supervisors. This activity assures that SI leaders approach their actual SI sessions with an additional sense of confidence.

The second method of training is accomplished through monthly staff development meetings. Some staff development meetings are open discussions held in small groups and facilitated by the SI supervisors. These supervisors are highly skilled students who have been successful SI leaders themselves and are knowledgeable about the SI model and best practices in pedagogy. Other staff development meetings are an opportunity for all SI leaders to meet together for presentations on education related topics presented by LSC staff or other invited presenters

The final component of SI training is the observation and evaluation. Twice each semester, SI supervisors visit SI sessions for each of the SI leaders making note of strengths and weaknesses of each leader in their interaction with students. Following the observation, the supervisor and leader sit down together to discuss their findings. Through these one-one-one discussions, SI supervisors are able to personalize their feedback, addressing those specific issues with which the SI leaders might be struggling.

## **LSC TRAINING GOALS AND OUTCOMES**

The activities described above are all intended to help the training component of the LSC achieve its goal to provide quality training and on-going evaluation for all LSC academic assistance providers.

Each of the SI leaders was observed twice during the course of the semester. Following the observation they met with their SI supervisor to discuss instructional strengths and weaknesses.

Written reports were submitted following each observation summarizing the observation, interview and goals. Written reports generally addressed the following topics:

- Attention to administrative details
- Use of effective instructional strategies
- Following the SI model
- Comfort zone/relationship with students
- Recommendations for improvement

These observations, along with feedback from a Campus Labs survey, were used by leaders to develop individualized improvement plans.

## **LSC CORE OBJECTIVE #4: OUTREACH**

The success of the LSC's academic support programs is contingent upon the greater campus community developing an awareness of the services provided. Faculty and staff need to be well informed in order to make appropriate referrals to their students. Students need to be well informed in order to choose to participate in academic support programs. Consequently, outreach is a significant part of the mission of the LSC.

This outreach is accomplished in a variety of ways. Sharing program information with new students is done primarily through presentations and tabling at summer orientations. LSC staff joined representatives from the Math Lab and Writing Center for a panel discussion on Academic Support Services for incoming students and their parents, thus giving them more detailed information in a small group setting. Since many incoming students do not yet realize that they might need academic assistance, these outreach efforts continue throughout the year in a number of different forums.

The LSC graduate assistant and program manager provided learning strategies workshops and one-on-one consultations as requested. This personal contact resulted in improved relations and collaborations with academic advisors and leaders of other campus groups. During one-on-one consultations, students were able to seek help in developing strategies for improving their academic performance. They received general advice and personalized recommendations regarding resources that might prove helpful to them.

## **LSC OUTREACH GOALS AND OUTCOMES**

The activities described above are all intended to help the Outreach component of the LSC achieve its goal to increase knowledge and awareness of resources for academic success within the campus community.

LSC staff presented and tabled at New Student Orientations prior to the beginning of Fall Semester. Staff members also presented or tabled at additional events for multiple organizations and departments on campus. All workshops are held free of charge and are open to interested students within the organization.

LSC staff met with several individual students. During these sessions, advice was given on improving study skills and additional resources were shared with students.

## **LSC OUTREACH UTILIZATION DATA**

The table below lists all of the outreach that was undertaken by the LSC staff organized by the type or the focus of the presentation. Through 57 outreach events offered by LSC staff, more than 2500 students learned about LSC services or identified academic skills that could be helpful for their academic skills.

**LSC TABLE 6: LSC OUTREACH UTILIZATION DATA (2017-2018)**

<b># of Events</b>	<b>Type of Event or Focus of Presentation</b>
26	New Student Orientation
7	Metacognition
5	Time Management
2	Learning Styles
5	Test Taking
1	Student Success
2	Open House
7	LSC Services
7	Study Skills
2	Test Anxiety

## **RELATION OF GOALS AND OUTCOMES TO RETENTION AND GRADUATION**

The activities of the LSC are intended to help students have a more successful academic experience both while they are participating in the activity and during subsequent semesters. The skills learned through these activities are transferrable.

## **LSC STUDENT TESTIMONIALS**

The following quotes regarding students' experiences with the LSC are taken directly from student evaluations and surveys regarding their interactions with LSC services:

*"...is a very knowledgeable, smart, and kind instructor. He explained complex concepts in a very understandable way. I am pretty confident that his SI helped my grade tremendously."*

*"...did a fantastic job on preparing us for the test and understanding concepts. She was wonderful and im really glad I took advantage of SI."*

*"...was a great SI leader. He answered last minute questions over email, frequently stayed past SI sessions to answer questions, and organized reviews before each exam. He explains things clearly and will spend as much time with you as needed to understand the material."*

*"...did a great job with her SI sessions. She worked with our schedules and provided multiple reviews for each of our exams. She is very knowledge with the material and showed me new ways to study for the future. I enjoyed having her as an SI leader."*

*"...is absolutely fantastic. She is so friendly and knowledgeable. Whenever I have questions I can reach out to ... via email and she gets back to me very quickly. Her test reviews absolutely improved my exam scores."*

## **LSC FUTURE DIRECTIONS**

Steve Lucero, Ph.D. began providing interim administrative oversight of the LSC after the 2017-2018 reporting year. He will assess strengths, growth areas, and service offerings of the LSC to make recommendations about potential long-term directions and staffing for the LSC.



## TESTING CENTER

### TESTING CENTER MISSION AND SERVICES

Testing Center Services. The University Testing Center delivered paper-based and computer-based tests, serving both the curriculum-based and non-curriculum-based campus and the broader community. It administers psychological, career, academic, and national tests for a fee. The Testing Center works closely with the Center for Disability and Access (CDA) to provide proctoring and testing space to meet student testing accommodations. In addition, the Testing Center houses several individually administered tests for use by UCC staff.

Testing Center Staff. Jake Van Epps, Ph.D. coordinated the Testing Center as a whole. David Lund continues in his role as University Testing Center coordinator; Jean Young continued her role as Prometric Coordinator, and Kara Melody is a full-time Prometric Test Center Administrators (TCAs). In addition to the permanent, full-time staff, the Testing Center employs 6 proctors and (TCAs) to administer paper-based and computer-based testing. This is down from 10 the previous year.

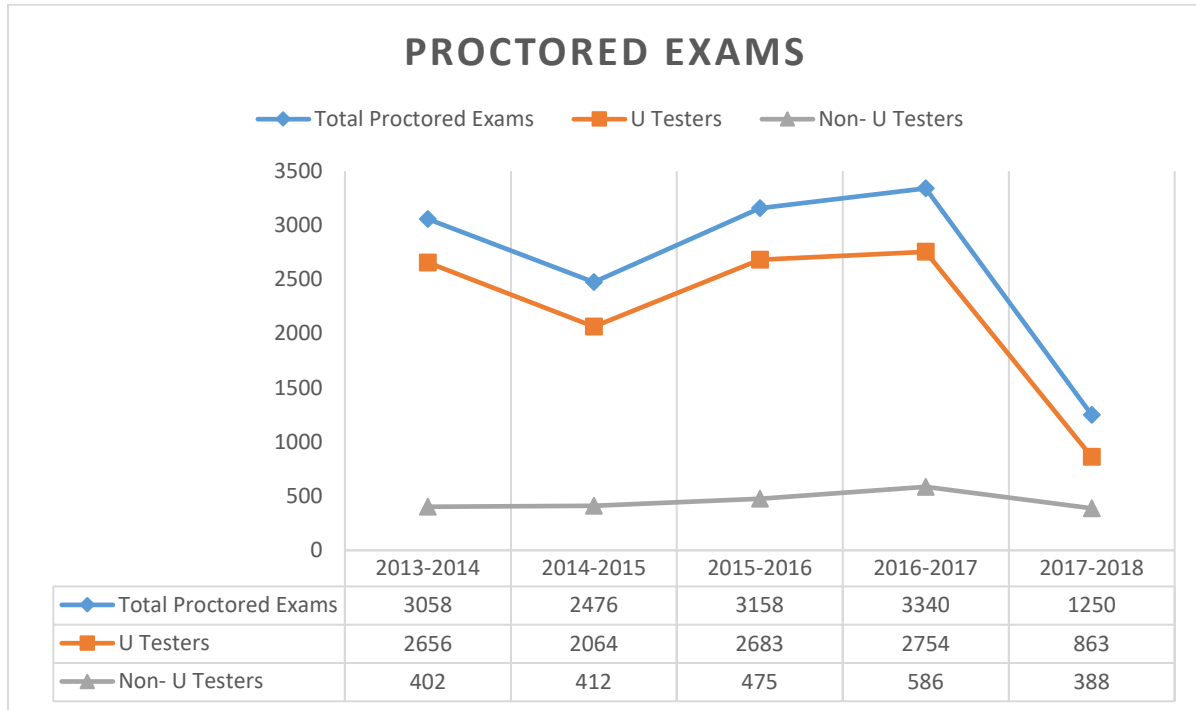
Testing Center Hours. This past year the Testing Center was open 7 days a week. On Saturdays and Sundays, Prometric computer-based testing is conducted in the Testing Center. National paper-based testing is done in classrooms on campus, often on the weekends.

### TC CORE OBJECTIVE #1: PROVIDE PROCTORING SERVICES FOR THE CAMPUS AND COMMUNITY

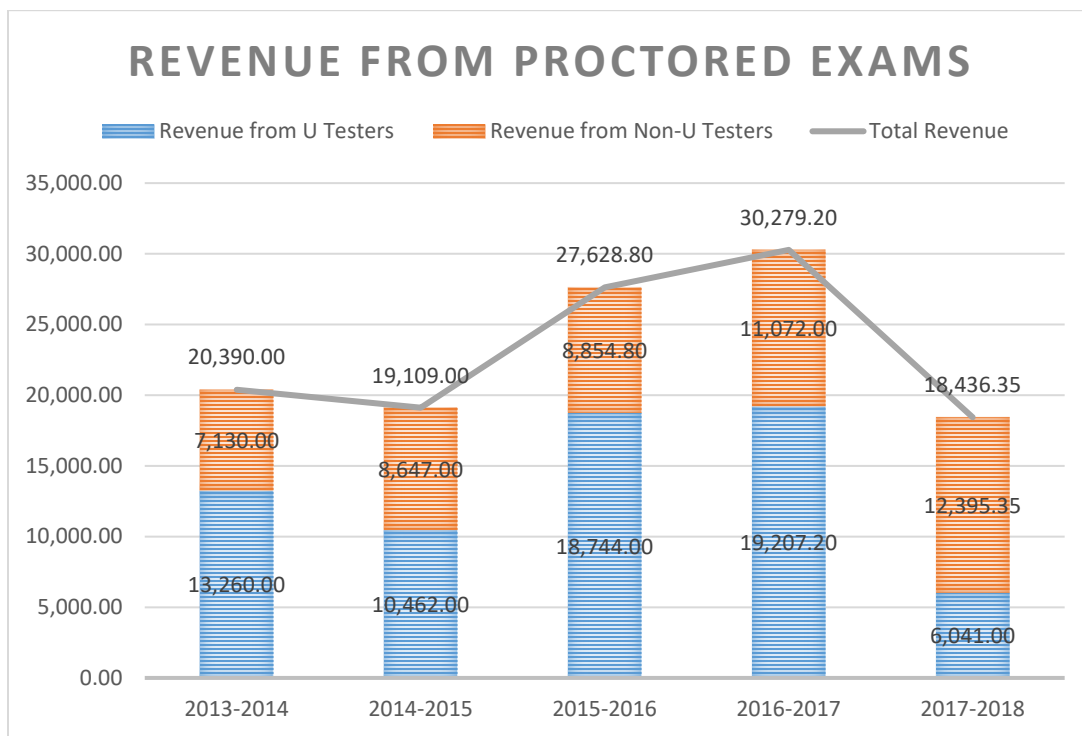
The Testing Center administers two main types of testing for the university community. First, the center delivered curriculum-based proctored tests for students who are unable to take a test when it is administered in class as well as Scantron scoring services. Instructors were able to use this service to give make-up exams, optional exams, and other exams outside of normal classroom time. This service was transferred to the UOnline Exam Services under the Teaching and Learning Technologies department in the Marriott Library. The transfer was made to better serve the campus community by offering larger and more comprehensive facilities and moving curriculum-based proctoring out of Student Affairs and into Academic Affairs. The transition started in August of 2017 and was mostly complete by October of the same year. University Testing worked closely with UOnline to develop a plan and implement it in a way that minimized disruption for faculty and students.

In addition to services transitions, structural changes were made to cost for services for non-U students to more closely align with labor costs. Instead of flat rates for all non-U testers for all tests (\$20 flat fee for previous years), cost for service was adjusted to an hourly cost where first hour is \$20 (plus a platform charge of \$3.50) and \$10 additional for each added hour. Non-U student proctored testing revenue shifted from being close to 35% last year to being close to 70% this year. Overall, revenue from proctored exams dropped 39% from \$30,279.20 last fiscal year to \$18,436.35 this this year (See Figure 2).

**TC FIGURE 1. PROCTORED EXAMS OVER PAST FIVE YEARS (2013 – 2018)**



**TC FIGURE 2. REVENUE FROM PROCTORED EXAMS OVER THE PAST FIVE YEARS (2013 – 2018)**



In addition, the Testing Center provides testing for the Center for Disability Services, Distance Education, and Independent Study. This service is open to University of Utah students and faculty, but a number of students from other universities and colleges also complete proctored testing at the Testing Center. In 2017-2018, the Testing Center administered 1250 proctored exams (a decrease of 63% from the previous year). Out of those proctored exams, it is estimated that 863, or 69% of testers being proctored were University of Utah students, the remaining were students from other colleges or universities (See Figure 1).

The Testing Center has both quiet and private testing space for the Center for Disability and Access (CDA) accommodated testing. The Testing Center provided accommodations for 396 CDA referred testers. This represents an 88.6% increase in proctored services offered for CDA students. CDA students represented 46% of our proctored exams for U students and 32% of our total proctored exams. Next year we expect CDA students to be 100% of our proctored exams for U students since we no longer offer curriculum-based proctoring services for U students not referred from CDA.

#### **UNIVERSITY TESTING GOALS**

- 1) Provide outstanding customer service
- 2) Highest level of test security
- 3) Excellent value to students and faculty.

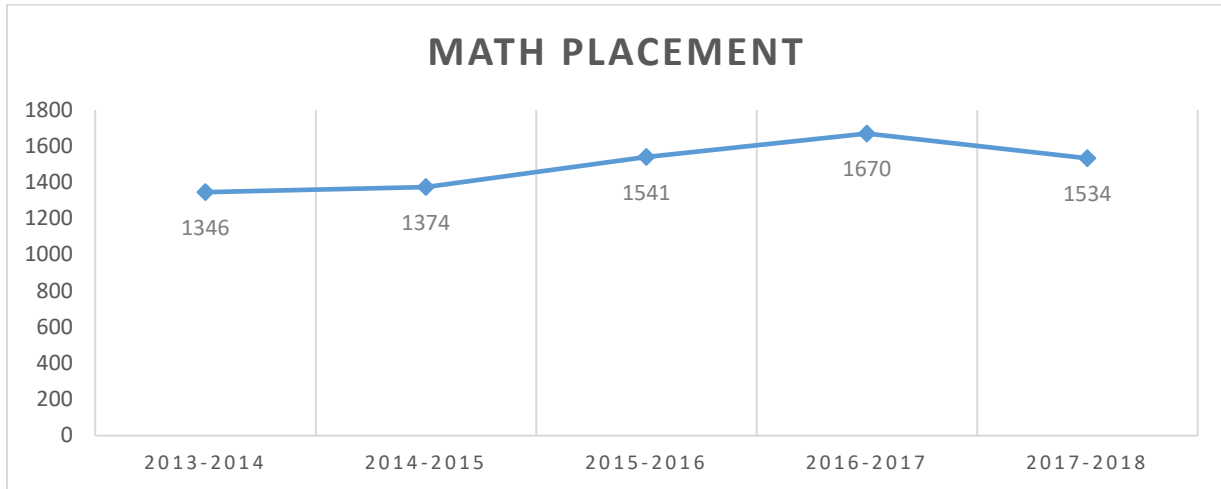
#### **UNIVERSITY TESTING OUTCOMES**

1. High level of satisfaction of those using our services
2. No tests lost, stolen, or otherwise compromised
3. Costs were kept at an affordable rate

#### **TC CORE OBJECTIVE #2: PROVIDE ADMISSIONS AND PLACEMENT TESTING**

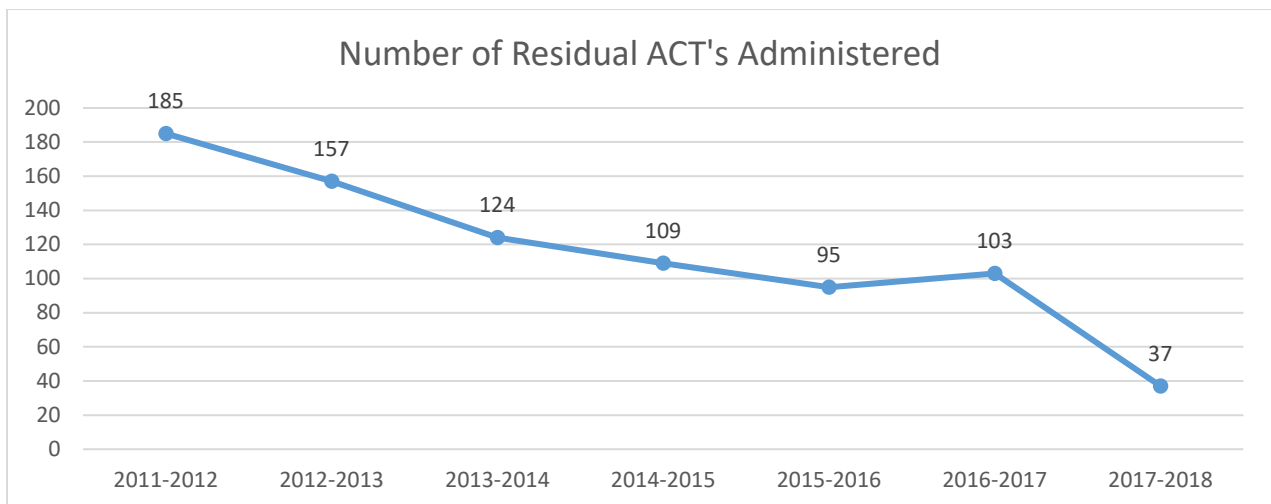
A second major type of university testing administered is placement and credit-by-exam tests. Placement tests offered by the Testing Center include math placement and the writing placement essay. The math placement and writing placement tests are utilized by students who either want to challenge their placement based on their ACT score or do not have a valid ACT score. Math placement constitutes one of the principle tests administered by the testing center and accounted for 36% (6 percent increase from the previous year) of our academic testing. We decreased math placement tests administration by 8.9% over the previous year from 1670 to 1534 but consistent with a 5-year running average of 1493 per year. The math placement and writing placement tests are given via computer on one of our 13 testing stations.

**TC FIGURE 3. MATH PLACEMENT ADMINISTRATIONS OVER THE PAST 5 YEARS**

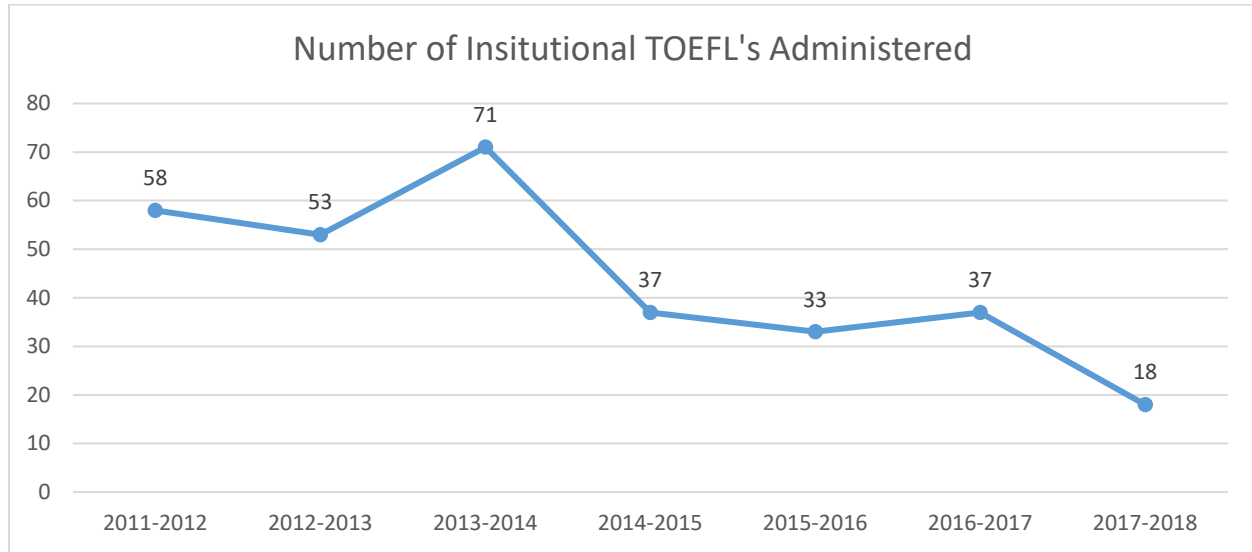


Credit-by-exam tests include CLEP, which provides students 3 credit hours and a waiving of a liberal education requirement when passed successfully and the Foreign Language Assessment Test (FLAT's). In addition to these placement and credit-by-exam tests, the Testing Center administers the Residual ACT and the Institutional Test of English as a Foreign Language (TOEFL) exam. These admissions tests are alternatives for the national based tests and are valid only at the University of Utah. However, due to changed scoring processes, and the availability of more affordable nationally based exams, student utilization of the Institutional TOEFL and the Residual ACT have decreased precipitously over the past few years. This may lead to an evaluation of the service and possible cancellation in the upcoming fiscal year. Both Residual ACT's and Institutional TOEFL's require significant specialized training for administration and utilize a significant amount of Testing Center labor and time.

**TC FIGURE 4. RESIDUAL ACT ADMINISTRATIONS BY YEAR**



**TC FIGURE 5. INSTITUTIONAL TOEFL ADMINISTRATIONS BY YEAR**



The Testing Center also offers the computerized Miller Analogies Test (MAT). This test is used by some departments on campus for admission into graduate programs, often as an alternative to the Graduate Records Exam (GRE). This is a national based exam; therefore, students from other institutions also use the center for this test.

#### **PLACEMENT TESTING AND CREDIT-BY-EXAM GOALS**

1. Provide easy and timely access to placement testing for students
2. Provide excellent customer service
3. High Quality proctoring and test security services
4. Timely results
5. Maintain Data base.

#### **PLACEMENT TESTING AND CREDIT-BY-EXAM OUTCOMES**

1. The University Testing Center moved to an online scheduling and payment system in October of the 2018 Fiscal Year. Students can now create an account, schedule an exam, and pay for those services should it be required with no interaction from Testing Center staff. The scheduling software has set time limits for each testing seat for each test so that it can adequately fill seats through open hours. This has significantly increased ease for student registration and decreased labor demands in the office. Most scheduling happens online not in the Testing Center. However, even during peak test administration times, student walking in for services were typically accommodated immediately by utilizing our private testing rooms as overflow testing environments.

2. As a university service we provide quality relationships with both student testers and university instructors. We take personal calls and go above and beyond in helping students and instructors get the positive experience they are looking for.
3. No tests were lost or compromised.
4. Results of Math placement testing are given to the student immediately upon completion of testing and are posted within 1 business day to the PeopleSoft database. Writing placement exams are forwarded to the English Department for scoring and results are posted by the department. CLEP exam results are given to the student immediately upon completion and are maintained by CollegeBoard. FLATS are scored by computer; however, it will likely shift to web-based proctoring soon. Residual ACT are sent into the testing company and scored within a couple of weeks. Institutional TOEFL exams are scored and posted by the testing center within two weeks of test taking.

### **TC CORE OBJECTIVE #3: PROVIDE PSYCHOLOGICAL TESTING AND ASSESSMENT SERVICES**

The Testing Center provides psychological testing services to the UCC and other qualified off-campus professionals. We provide a significant amount of career personality and conflict style testing to university HR services. In addition, most clinically based testing from the University Counseling Center is run through Testing Center services. Finally, community therapists order psychological and career testing for their clients through the Testing Center Services. Although we did not offer LD/ADHD testing standalone services this year, we hope to build the service in the upcoming fiscal year.

#### **PSYCHOLOGICAL TESTING OUTCOMES**

1. Test selection will be adequate for basic psychological assessment.
2. High level of customer satisfaction.
3. Results available within 3 business days for psychological and career tests.

#### **PSYCHOLOGICAL TESTING OUTCOMES**

1. The Testing Center offers a wide selection of psychological assessments and continually updates inventory as new testing is offered. We offer the major intellectual, achievement and personality tests being used in the field and update our inventory yearly.
2. No formal satisfaction data was collected from students or faculty using our services, and we are not aware of any complaints related to our customer service.
3. All psychological and career tests were scored and available within 3 business days of being completed by clients.
4. A total of 503 career assessments were completed for the 2017-2018 fiscal year. In addition, only 11 psychological assessments were completed for the fiscal year.

#### **TC CORE OBJECTIVE #4: PROVIDE COMPUTER-BASED PROMETRIC TESTING SERVICES**

Prometric revenue this year decreased by 6.9% compared to last fiscal year (\$193,601.87 in 2018 versus \$207,866 in 2017). The Testing Center signed a new 5 year contract that began on January 1st, 2018. The new contract continues a quality bonus program that affords the opportunity to increase compensation. We also hired on and trained 5 new Prometric employees and had 5 resign. Jean Young, our current Lead, and Kara Melody are Level 2, benefited positions.

##### **Prometric Center Goals**

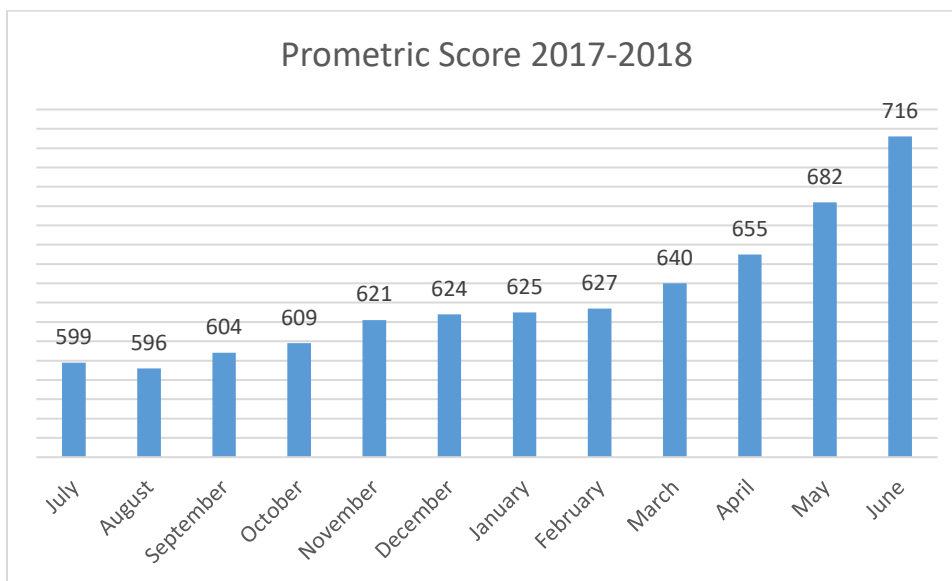
1. Provide outstanding customer service
2. Provide the highest level of test security
3. Increase profitability

##### **PROMETRIC CENTER OUTCOMES**

For fiscal year 2017-2018, the Prometric Center has been adapting to changing industry standards and competition in terms of test security. As Prometric corporate office institutes tighter controls, our Prometric Center continues to adapt and update security protocols.

1. We provided quality customer service. However, there is room for future improvement. Our current score for Successful Test Rate is 80%. The area identified as most likely to bring this score down was "Late Starts." Training must occur to bring this score higher as it is better than only 10% of global testing center.
2. Security performance is audited by Prometric Corporate. They evaluate center practices on three important indices, DVR Check, Secret Shops, DM Site Audits. During the 2016-2017 fiscal year, several DVR Audits and a Secret Shop were considered failing. This brought the center's score down from a previous high of 661 to a low of 573. Training and accountability measures were taken and since then scores have steadily climbed throughout the year, except in July when a small dip occurred. Currently the center's score is 716 (out of 850), the highest it has been in over two years and a 22.4% improvement over the score this time last year. This score represents performing better than 40% of all Prometric sites globally.
  - a. Three out of four DVR Audits were passed this year. DVR Audits are audits of Proctors testing the system before opening. The one failed was at the end of July 2017. Since then all audits were passed.
  - b. One secret shop was passed.
  - c. One District Manager Audit was passed.

**TC FIGURE 6. PROMETRIC SECURITY AUDIT SCORE**



3. No tests lost, stolen or otherwise compromised.
4. Prometric revenue this year decreased by 6.9% to last fiscal year.

#### **NATIONAL PAPER-BASED TESTING**

The Testing Center is also responsible for coordinating the national paper-based testing at the university. Testing occurs on most Saturdays and includes, among others, testing for the SAT, the Law School Admission Test (LSAT), and the national ACT. The Testing Center utilizes a strong pool of qualified proctors to supervise and administer these exams.

#### **TEST SCANNING SERVICES**

Test scanning services were transferred to the UOnline center in September 2017 along with other curriculum-based testing services. As a result, only \$277.10 worth of services were administered representing a 95% loss of revenue this fiscal year.

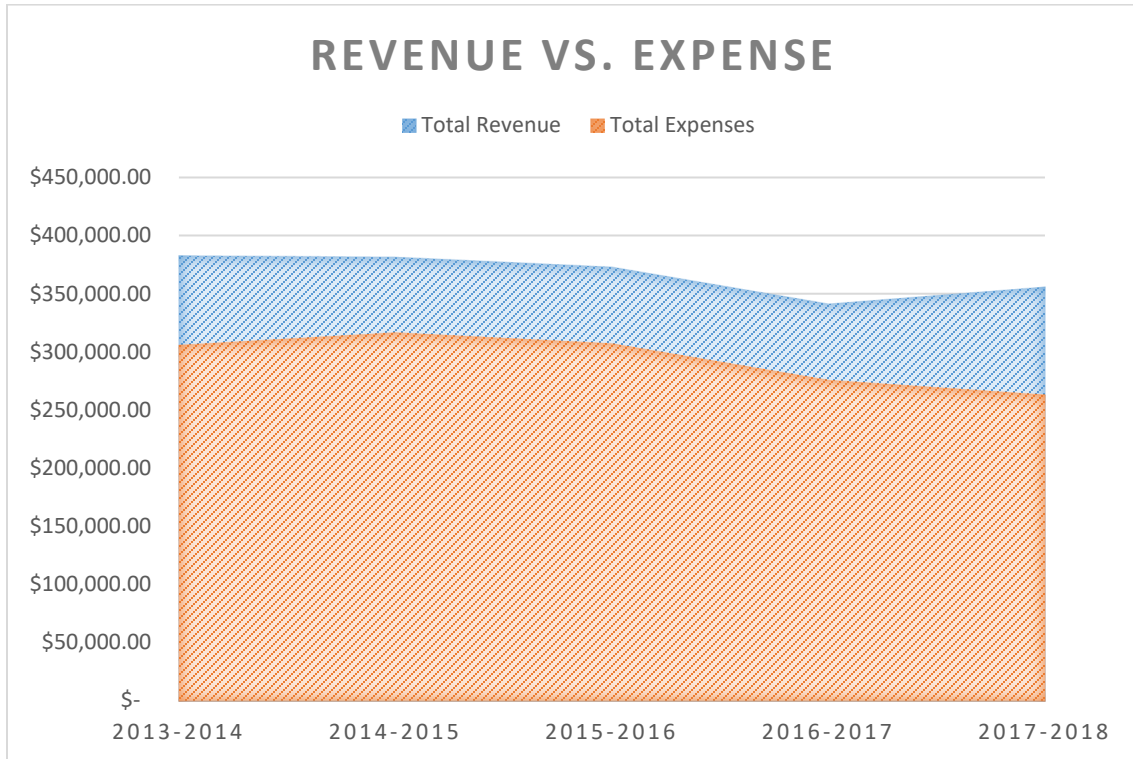
#### **TESTING CENTER REVENUE**

Overall testing center revenue increased by 5.89% compared to last fiscal year from \$335,976.49 in 2017 to \$355,764.80 in 2018. In addition, expenses decreased by 4.62% compared to last fiscal year from \$276,107.40 in 2017 to \$263,341.15 in 2018 (See Figure 7). This resulted in a 41% increase in net from \$65,175.73 in 2017 to \$92,423.65 in 2018 (See Figure 8). This is the result of several initiatives throughout the year. The transfer of curriculum-based testing provided the Testing Center with an opportunity to restructure the physical space and start using technology assisted registering, scheduling, and payment. This in turn, allowed for a reduction of staffing and overall labor costs. In addition, costs of testing of non-U students was restructured to better represent true labor value which increased

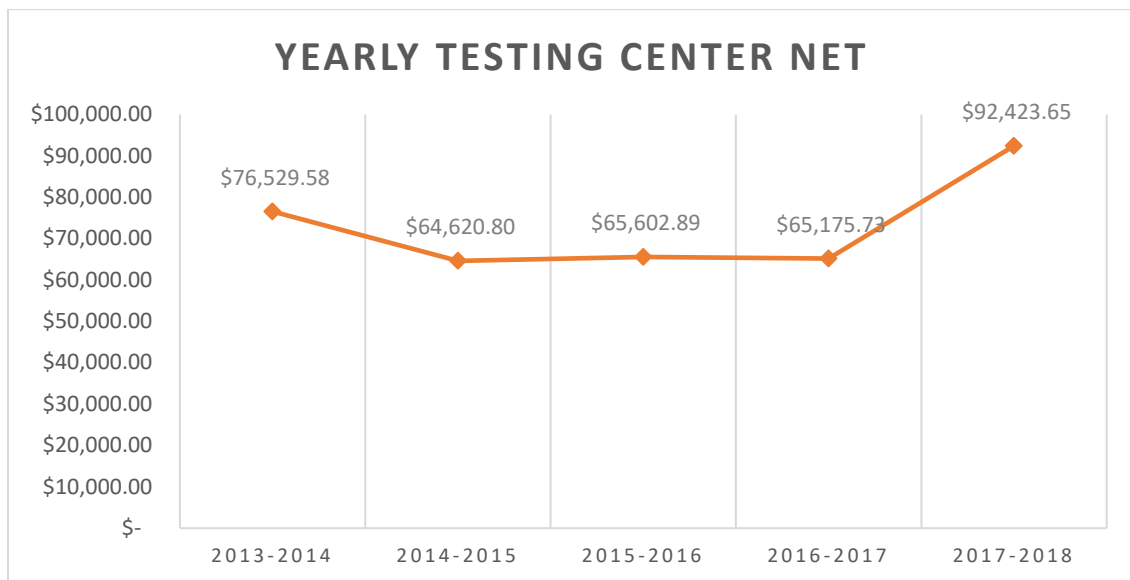


revenue. Finally, full time staff were given raises to market value to increase labor stability at the Testing Center.

**TC FIGURE 7. REVENUE VS. EXPENSE OVER THE PAST FIVE YEARS (2013 – 2018)**



**TC FIGURE 8. YEARLY NET OVER THE PAST 5 YEAR (2013 – 2018)**



**TC TABLE 1: SUMMARY OF TESTS PROVIDED (2016 – 2018)**

<b>Academic Tests</b>	<b>2016-2017 Qty.</b>	<b>2017-2018 Qty.</b>	<b>% change</b>
<b>Core Objective 1: Curriculum Based Exams</b>			
Curriculum Based Proctored Exams	3340	1250	-63%
Tests Scanned and Reported	25030	640	-97%
Total Students Served:	28370	1890	-93%
<b>Core Objective 2: Placement and Entrance Exams</b>			
ACT	102	44	-57%
CLEP	102	100	-2%
Institutional TOEFL	44	18	-59%
FLATS	37	33	-10%
MAT	125	91	-27%
Math Placement	1670	1534	-8%
Writing Placement	165	226	37%
Total Exams Given:	2245	2046	-9%
<b>Core Objective 3: Professional Tests</b>			
NEO	3	0	-100%
MBTI	386	318	-18%
MCMI	6	3	-50%
MMPI-2	7	7	0%
SII	30	35	17%
SCL-90-R	0	1	100%
TKI	128	150	17%
Other	1	0	-100%
Total Psychological Tests Provided:	561	514	-8%
<b>Core Objective 4: Prometric</b>			
People Tested	10,390		N/A

### TESTING CENTER CHALLENGES AND OPPORTUNITIES

Testing Center Challenges. Several challenges and opportunities exist for the Testing Center. A central challenge facing the Testing Center is the difficulty related to staffing. This issue is twofold. In the University Testing Center, staff reductions are still needed. It is unclear at this point to what level. Too much reduction may result in ineffective workload management and too little reduction may reduce net profits below sustainable levels. In addition, low pay positions in Prometric have led to staffing volatility.

This not only takes a significant amount of time to manage, it also has the potential to negatively affect security protocols which require extensive training. Strategic analyses are needed to stabilize and secure optimum staffing levels. In addition, in Prometric, increased focus on timeliness of admittance is needed to improve the center's customer satisfaction.

*Testing Center Opportunities.* The Testing Center has gone through a large shift in the services it offers over the past year. This has afforded the center to reconceptualize its services and service delivery model. Instead of academic test proctoring being the primary service delivered, services have shifted toward professional, academic, and psychological assessment. Continued focus on this and clarification of services from other campus agencies (i.e., UOnline) may benefit students and the community. Consideration of a name change may be beneficial. One service that may be dropped due to increase cost to administer alongside significantly dropping student utilization are the Institutional TOEFL and the Residual ACT exams.

Another opportunity facing the testing center this year is developing a sustainable program to offer LD/ADHD testing for the university community. Previous LD/ADHD testing services had high burnout rates of testing staff and was not financially self-sustaining. Potential avenues include building a training program filled yearly by both U grad students and Counseling Center trainees. This will continue to align Testing Center services with the core mission of the University Counseling Center. A plan is being developed to create a strategic partnership with CDA that will better serve both U students seeking accommodations on campus and UCC Doctoral Interns in their assessment training, as well as create a possible new revenue stream.

**UCC STAFF EXCELLENCE  
(2017 –2018)**

**UCC AWARDS AND RECOGNITIONS**

<b>STAFF</b>	<b>AWARDS AND RECOGNITIONS</b>
Arczynski, Alexis	Outstanding Publication of the Year, Supervision & Training Section, American Psychological Association, Society for Counseling Psychology (Division 17)
Cone-Uemura, Karen	Student Affairs Travel Scholarship 2018 University of Utah Staff Council Scholarship Recipient
Ellingson, Glade	SADC Diversity Training Certificate
Harling, Cindy	Student Affairs Vice President’s Award for Service Excellence

**UCC COMMITTEE MEMBERSHIPS**

<b>STAFF</b>	<b>COMMITTEE</b>
Arczynski, Alexis	Women’s Resource Center Training Coordinator Search Committee (Member)
Cone-Uemura, Karen	Utah University And College Counseling Centers Annual Conference Planning Committee (Member) American Group Psychotherapy Association Racial & Ethnic Minority Special Interest Group (Tri-Chair) Four Corners Group Psychotherapy Society (Board Member) American Group Psychotherapy Association Diversity and Social Justice Steering Committee (Member) American Group Psychotherapy Association Open Session Committee (Member)
Ellingson, Glade	American Psychological Association Site Visit Committee (Member) Utah Board of Psychology, Department of Occupational & Professional Licensing
Fetty, Danielle	Center for Disability & Access Case Manager Search Committee (Member)
Giles-Smith, Leslie	College Reading & Learning Association (State/Region/Chapter Coordinator)
Harris, Frances	Department of Chemistry Curie Club Planning (Member)
Harling, Cindy	University of Utah Behavioral Intervention Team (Member) University of Utah Resilient U (Member)
Huebner, Lois	Pet Partners/Therapy Animals of Utah (Certified Animal Partner)

Lucero, Steve	American Psychological Association Site Visit Committee (Member)
Martinez, Roberto	Homeless Student Task Force (Member) Student Affairs Diversity Council (UCC Representative; Member)
Van Epps, Jake	LGBT Affirmative Therapists Guild of Utah Leadership Committee (Member)
Weitzman, Lauren	University of Utah Edie Kochenour Memorial Lecture Subcommittee (Chair) University of Utah Edie Kochenour Memorial Lecture Fund Advisory Board (Co-chair) University of Utah Presidential Task Force on Campus Safety (Member) University of Utah Fall Enrollment Working Group (Member) American Psychological Association Site Visit Committee (Chair) Association of University and College Counseling Center Directors Salt Lake City 2016 New Directors and First Time Attendees Orientation Committee (Co-chair)

## UCC PRESENTATIONS AND PUBLICATIONS

### Publications

**Arczynski, A.V.** (2017). Multicultural social justice group psychotherapy training: Curriculum development and pilot. *Training and Education in Professional Psychology, 11*, 227-234. doi:10.1037/tep0000161.

**Lucero, S.,** Rigas, J., Rood, K., Lawver, R., Warnick, B. (2017). Social integration of veterinary students in transfer veterinary medicinal programs. *North American Colleges and Teachers of Agriculture 61*(4), 284-289.

### Presentations

**Arczynski, A. V.** (2017). Anticipating and managing the complexities of power in psychotherapy supervision (invited keynote). *Department of Counseling Conference: Counseling and Psychotherapy with Diverse Communities*, California State University, Fullerton.

Hoover, S. M., **Arczynski, A. V.**, & Christensen, M. C. (2017, August). Critical multicultural feminist mentoring to manage power-laden dilemmas and inequities. Symposium presented at the annual convention of the *American Psychological Association*, Washington, District of Columbia.

**Jenkins-Lloyd, R.** (2017). Psychiatric Medications 101. Staff Development Presentation for UCC Clinical Staff, Salt Lake City, UT.

- Lord, S. P., **Van Epps, J.** (2018, August). Technology-assisted motivational interviewing training for University of Utah Counseling Center. Workshop for the DEPTH Project at University of Utah Counseling Center, Salt Lake City, UT, August 14th, 2018.
- Martinez, R.**, Brenes, D. & Frost, A. (2018). *Filling the gap: Exploring mental health on campus*. Utah Academic Advising Conference, Salt Lake City, UT.
- Newbury, J.** (2018). Male survivors. *Rape Recovery Center 40 Hour Training*, Salt Lake City, UT.
- Newbury, J.** (2018). Psychological consequences of neoliberalism, *Westminster College Special Topics Course Presentation*, Salt Lake City, UT.
- Newbury, J. & Van Epps, J.** (2017) *Losing the ground from under our feet: a shifting clinical/social landscape and "best practices" for clinical work with sexual orientations and sexual identities*. Presented in the LGBTQ Affirmative Psychotherapy Guild of Utah In-Service CEU Training, Salt Lake City, Utah
- Nordmeyer, K., **Van Epps, J.**, Oxborrow, J., & Fowler, L. (2018) *From A to Ze: An Exploration of Gender and Domestic Violence*. Presented at Salt Lake Acting Company, Salt Lake City, Utah
- Van Epps, J.** (2018) *Family Therapy Factors that Work*. Presented at the Psychology Intern Didactic Seminar at University Neuropsychiatric Institute, Salt Lake City, Utah.
- Weitzman, L.M., Harling, C. & Van Epps, J.** (2017). Mental health challenges at the U and how you can help. Presented at the monthly University of Utah Student Affairs Diversity Council Seminar, Salt Lake City, UT.
- Weitzman, L.M.** (2017). Consulting directors on duty. Presented at the annual meeting of the *Association of University and College Counseling Center Directors*, Denver, CO.

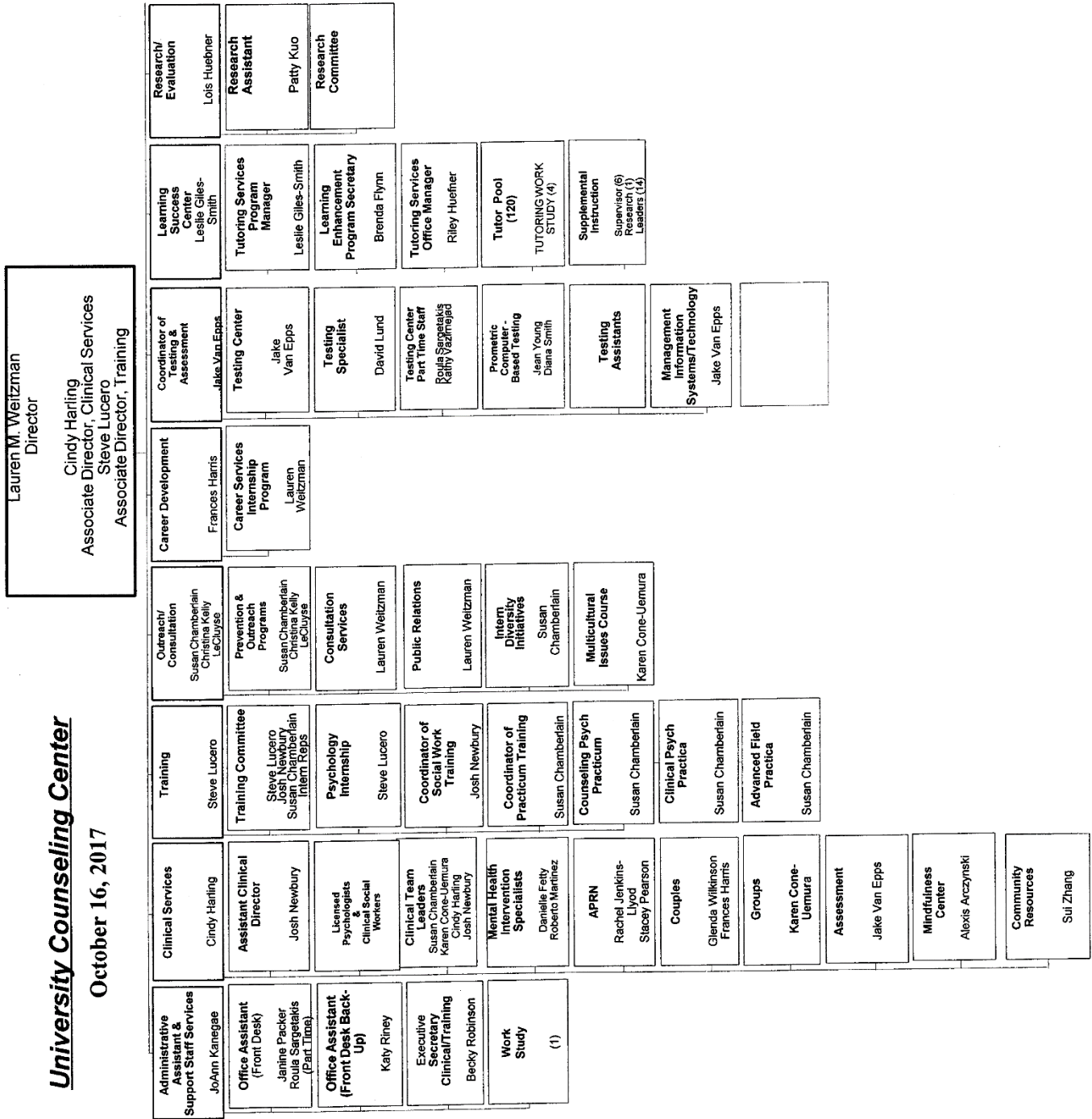
## UCC FACULTY APPOINTMENTS

<u>Name</u>	<u>SA Department</u>	<u>Position</u>	<u>Academic Department</u>
Ellingson, Glade	UCC	Adjunct Professor Adjunct Professor	Educational Psychology Psychiatry
Harling, Cindy	UCC	Clinical Instructor	College of Social Work
Harris, Frances	UCC	Adjunct Professor Adjunct Professor	Educational Psychology Psychiatry
Huebner, Lois	UCC	Adjunct Professor	Educational Psychology
Martinez, Roberto	UCC	Field Instructor	College of Social Work
Newbury, Josh	UCC	Field Instructor	College of Social Work
Van Epps, Jake	UCC	Adjunct Professor	Educational Psychology
Weitzman, Lauren	UCC	Adjunct Professor	Educational Psychology
Wilkinson, Glenda	UCC	Field Instructor	College of Social Work
Zhang, Sui	UCC	Field Instructor	College of Social Work

# APPENDIX A: UCC ORGANIZATIONAL CHART

## University Counseling Center

October 16, 2017





## **APPENDIX B: UNIVERSITY COUNSELING CENTER STAFF (2017 –2018)**

### **UCC EXEMPT STAFF**

#### **UCC Executive Committee**

##### **Lauren Weitzman, Ph.D.**

*Director*

*Psychologist*

*Adjunct Professor, Educational Psychology*

*Ph.D. - University of Illinois, Urbana-Champaign, Counseling Psychology*

*M.S. - University of California, Santa Barbara*

*B.S. - University of Utah, Psychology*

##### **Cindy Harling, L.C.S.W.**

*Associate Director for Clinical Services*

*Licensed Clinical Social Worker*

*Clinical Instructor, College of Social Work*

*M.S.W. – University of Utah School of Social Work*

*B.A. – University of Utah, Spanish*

##### **Steven Lucero, Ph.D.**

*Associate Director for Training*

*Psychologist*

*Ph.D. – Bowling Green State University, Clinical Psychology*

*M.A. – Bowling Green State University, Clinical Psychology*

*B.A. – University of Wyoming, Psychology*

#### **Psychiatric Advanced Practice Registered Nurse (APRN)**

##### **Rachel Jenkins-Lloyd**

*M.S. – University of Utah, Psychiatric Nursing*

*B.S. – University of Utah, Nursing*

##### **Stacey Pearson**

*M.S. – University of California, San Francisco, Psychiatric Mental Nurse Practitioner*

*B.S. – The Ohio State University, Nursing*

#### **UCC Licensed Clinical Social Workers**

##### **Christina Kelly LeCluyse, L.C.S.W.**

*Co-Coordinator, Outreach*

*M.S.W. – University of Texas at Austin, Social Work*

*B.A. – Oberlin College, Psychology*

**Roberto Martinez, L.C.S.W.**

*Mental Health Intervention Specialist*

*M.S.W. – San Jose State University, Social Work*

*B.A. – University of California at Santa Barbara*

**Josh Newbury, L.C.S.W.**

*Assistant Clinical Director*

*Coordinator, Social Work Training*

*M.S.W. – University of Utah, School of Social Work*

*B.S.W. University of Utah*

**Glenda Wilkinson, L.C.S.W.**

*Clinical Social Worker*

*Co-Coordinator, Couple Counseling*

*M.S.W. – University of Utah, School of Social Work*

*B.S. – University of Utah, Sociology*

**Sui Zhang, L.C.S.W.**

*Coordinator, Case Management*

*Coordinator, Community Resources*

*M.S.W. – University of Utah, School of Social Work*

*B.A. – East China Normal University, Mass Communications*

**UCC Staff Psychologists**

**Alexis Arczynski, Ph.D.**

*Coordinator, Mindfulness Center*

*Co-Coordinator, Resilient U*

*Ph.D. – University of Utah, Counseling Psychology*

*M.S. – California State University, Fullerton, Department of Counseling*

*B.A. – Chapman University, Psychology Department*

**Susan Chamberlain, Ph.D.**

*Co-Coordinator, Outreach*

*Coordinator, Practicum Training*

*Co-Coordinator, Resilient U*

*Ph.D. – West Virginia University, Morgantown, Counseling Psychology*

*M.S. – Indiana University, Bloomington, Counseling and Counselor Education*

*B.A. – Brigham Young University, Anthropology: Sociocultural Emphasis*

**Karen Cone-Uemura, Ph.D.**

*Coordinator, Groups*

*Ph.D. – University of Utah, Counseling Psychology*

*M.A. – San Jose State University, Counselor Education*

*B.A. – University of California, Berkeley, Nutrition and Clinical Dietetics*

**A. Glade Ellingson, Ph.D.**

*Adjunct Professor, Educational Psychology*

*Adjunct Professor, Psychiatry*

*Ph.D. - University of Utah, Counseling Psychology*

*M.A. - University of Minnesota, Counseling and Student Personnel Psychology*

*B.A. - Brigham Young University, Psychology*

**Danielle Fetty, Ph.D.**

*Mental Health Intervention Specialist*

*Ph.D. – University of Southern Illinois, Counseling Psychology*

*M.A. – University of Southern Illinois, Psychology*

*B.A. – University of Tennessee, Knoxville, Psychology*

**Frances Harris, Ph.D.**

*Coordinator, Career Development Programs*

*Co-Coordinator, Couple Counseling*

*Adjunct Professor, Educational Psychology*

*Adjunct Professor, Psychiatry*

*Ph.D. – University of Utah, Counseling Psychology*

*M.A. – University of Utah, School Counseling*

*B.A. – Duke University, Psychology & English Literature*

**Lois Huebner, Ph.D.**

*Coordinator, UCC Research Team*

*Adjunct Professor, Educational Psychology*

*Ph.D. – Colorado State University, Counseling Psychology*

*M.S. – Colorado State University, Psychology*

*B.A. – Wheaton College, Mathematics & Psychology*

**Jake Van Epps, Ph.D.**

*Testing Center Coordinator*

*Ph.D. – Pennsylvania State University, Counseling Psychology*

*M.Ed. – University of Georgia, Guidance and Counseling Community Counseling*

*B.A. – Castleton State College, Psychology*

**UCC TRAINEES****Psychology Doctoral Interns**

*Michelle Farrell, M.A., University of Missouri-Kansas City*

*Joshua Goodman, M.A., University of California, Santa Barbara*

*Krista Robbins, M.A., University of Nebraska-Lincoln*

*Jayden Thai, M.Ed., University of Louisville*

**Social Work Interns (from the University of Utah)**

*Cristina Aguayo-Romero, BSW*  
*Derek Cragun, BSW*  
*Kalani Nelford, B.S.*  
*Katie Ovrom, B.A.*

**Counseling Psychology Doctoral Practicum Students (from the University of Utah)**

*Halleh Hashtpari, M.S.*  
*Allie Kolaski, B.A.*  
*Patty Kuo, M.Ed.*  
*Hannah Wright, B.S.*

**Clinical Psychology Assessment Practicum Students (from the University of Utah)**

*Colin Adamo, B.A.*  
*Mallory Kidwell, B.A.*  
*Lucybel Mendez, B.A., B.S.*  
*Hide Okabe, ALM*  
*Kim Parkhurst, B.A.*  
*Brianna Wellen, B.A.*

**Clinical Psychology Doctoral Practicum Students (from the University of Utah)**

*Colin Adamo, B.A.*  
*Mallory Kidwell, B.A.*  
*Lucybel Mendez, B.A., B.S.*  
*Hide Okabe, ALM*  
*Kim Parkhurst, B.A.*  
*Brianna Wellen, B.A.*

**Research Assistant (from the University of Utah)**

*Patty Kuo, M.Ed.*

**Learning Success Center Professional Staff**

**Leslie Giles-Smith, B.A.**  
*Program Manager, Tutoring Services and Supplemental Instruction*  
*B.A. - Brigham Young University*

## UCC NON - EXEMPT STAFF

JoAnn Kanegae, *Administrative Assistant to the Director*  
Janine Packer, *UCC Receptionist*  
Catherine Riney, *UCC Administrative Secretary*  
Becky Robinson, *UCC Executive Secretary*  
Roula Sargetakis, *UCC Receptionist & Testing Clerk*  
Brenda Flynn, *Executive Secretary, Learning Success Center*  
Riley Larsen, *Office Manager, Learning Success Center*  
David Lund, *Project Coordinator*

## UCC STAFF ASSOCIATES

Kristy K. Bartley, Ph.D.  
*Women's Resource Center*  
Katie Baucom, Ph.D.  
*Psychology Department*  
Craig Bryan, Ph.D.  
*Psychology Department*  
Debra S. Daniels, LCSW  
*Women's Resource Center*  
Christopher Davids, Ph.D.  
*Westminster College*  
Rob Davies, Ph.D.  
*Graduate Medical Education*  
David S. Derezotes, LCSW, Ph.D.  
*College of Social Work*  
Uma Dorn, Ph.D.  
*Educational Psychology Department*  
Elizabeth Duszak, Ph.D.  
*Assessment, Evaluation & Research*  
Donna Hawxhurst, Ph.D.  
*Women's Resource Center*  
Zach Imel, Ph.D.  
*Educational Psychology Department*  
Kim Meyers, Ph.D.  
*Utah State University*  
Sue Morrow, Ph.D.  
*Educational Psychology Department*  
Mark Pfitzner, M.D.  
*Student Health Center*  
Amy Powell, M.D.  
*School of Medicine*  
Jonathan Ravarino, Ph.D., LCSW  
*Athletic Department*  
Jim Struve, LCSW  
*Clinical Social Worker*  
Mike Tamana, Ph.D.  
*College of Social Work Research Institute*

Karen Tao, Ph.D.

*Educational Psychology Department*

Sommer Thorgusen, Ph.D.

*Psychology Department*

Steve Varechok , LCSW

*Clinical Social Worker*

Elizabeth Walker, LCSW

*College of Social Work*

Claudia Zafran-Rona, CMHC

*Independent Practic*

## **APPENDIX C: LOCAL AND NATIONAL WORKSHOPS AND CONFERENCES ATTENDED BY UCC STAFF (2017 – 2018)**

### **LOCAL/REGIONAL CONFERENCES, WORKSHOPS & TRAININGS**

- Acculturation and Attachment Theory with Mexican Immigrants
- American College of Surgeons Committee on Trauma *Stop the Bleed* Training
- Acceptance & Commitment Therapy Boot Camp
- Building a Great Marriage Gottman Workshop
- Complex Trauma Intervention Strategies
- Dialectical Behavioral Therapy Boot Camp
- Ethics and Risk Management in the New Era of Social Work
- From Margin to Center: A Panel Discussion Honoring Women of Color
- Hope & Resilience Conference on Intimate Partner Violence
- Keeping Secrets: The Complicated Ethics of Conditional Confidentiality
- Legal and Ethical Issues
- LGBT Affirmative Therapists Guild of Utah Workshop: Best Practices for Work with Sexual Orientation and Sexual Identities
- LGBT Affirmative Therapists Guild of Utah Workshop: Beyond White-washed trans narratives
- Mindfulness Based Stress Reduction Training
- Risk Management with Suicidal Patients
- Sexual Assault Awareness Month Panel
- Suicide Prevention
- Treating Trauma and PTSD: A New Frontier of Scientific Evidence & Practical Interventions
- University of Utah Edie Kochenour Annual Memorial *Expanding Leadership Horizons* Keynote Panel
- University of Utah Student Affairs Diversity Council Diversity Modules
- University of Utah Student Affairs Diversity Council Seminar Series
- University of Utah Student Affairs Professional Development Exempt Staff Retreat
- Utah Chapter Association for Women in Psychology Workshops
- Utah Psychological Association Cross Cultural Mental Healthcare of Non-Binary and Transgender Adults
- Utah Psychological Association Psychopharmacology Update Workshop
- Utah Psychological Association Risk Management Workshop
- Utah University and College Counseling Centers Annual Conference
- Working with Couples and Families

### **NATIONAL PROFESSIONAL CONFERENCES & TRAININGS**

- American Association of Sexuality Educators, Counselors & Therapists
- American Group Psychotherapy Association
- An Intimate Conversation of the Relevance of Spiritual Awareness and Understanding for Professional Counselors
- Association for the Coordination of Counseling Center Clinical Services (ACCCCS)
- Association of Counseling Center Training Agencies (ACCTA)
- Association for University and College Counseling Center Directors (AUCCCD)
- Compassion, Mindfulness and Wisdom
- Eye Movement Desensitization & Reprocessing (EMDR) Levels 1 and 2
- Neuroscience Education Institute National Psychiatric Prescribers Conference
- Psychopharmacology Update Conference

**APPENDIX D: RATINGS OF STAFF DEVELOPMENT PRESENTATIONS  
(2017 – 2018)**

<b>Presentation</b>	<b>Information</b>	<b>Presenter's Style</b>	<b>Overall Rating</b>
September 20, 2017 "An Introduction to Psychiatric Medications." Rachel Jenkins –Lloyd, MSN, APRN,PMHNP-BC., University of Utah	5.0	4.8	5.0
September 20, 2017 "Title 9" Lori McDonald, Ph.D., & Sherrie Havashi, J.D., University of Utah	4.0	4.0	4.0
October 18, 2017 "Travel Ban Update: Impact on our Campus and Community" Faeiza Javed, LCSW, Nora Abu-Dan, Satin Tashnizi & Gini Revuelta	3.8	3.4	3.6
November 8, 2017 "Mental Health Challenges at the U and How You Can Help" Lauren M Weitzman. PH. D., Cindy Harling, MSW/LCSW, Jake Van Epps, PH. D., University of Utah	5.0	4.75	5.0
November 15, 2017 "Historic Trauma and American Indian Students Today" Franci Taylor, M.A.	4.54	4.36	4.63
January 24, 2018 "Impact of Japanese-American Incarceration" Kimiko Miyashima, BFA	4.75	4.25	4.50
February 21, 2018 "Crisis Response Planning for Suicidal Patients: An Introduction" Craig Bryan, PsyD, ABPP	4.87	4.52	4.82
March 9, 2018 "Unpacking the Backpacks We Carry to find the 21-foot Ladder for Life's 20-foot Borders" Cesar A. Cruz, Ph.D.	4.6	5.0	5.0
March 21, 2018 "Racial Battle Fatigue" William Smith Ph.D., M.S.	5.0	5.0	5.0
April 18, 2018 "OCD: Commonly Misdiagnosed , Misunderstood, and Mistreated" Kate Rogers, Ph.D. & Deanna Smith MSW	4.38	4.30	4.38
May 16, 2018 "Understanding Journalism and Bias in Tumultuous Times" Kevin Coe, Ph.D.	4.66	4.66	4.83



## APPENDIX E: SAMPLE FACULTY LIAISON LETTER (2017 – 2018)



February 23, 2018

Dear David Eccles School of Business Deans and Department Chairs,

We are reaching out to the School of Business to share Counseling Center resources to support you and your faculty. As you know, trusted professors are often “first responders” when working with distressed students. We can assist you in referring students to appropriate Counseling Center services, provide consultation and workshops regarding distressed or disruptive students, and coordinate presentations to students and faculty on mental health topics.

Please take advantage of the following counseling center resources, all of which can be found on our website:

- **“For Faculty & Staff” Webpage:** Here you will find several resources to assist you in identifying and working with student distress <http://counselingcenter.utah.edu/faculty/index.php>. You can also identify the Counseling Center staff member who is your department faculty liaison at <http://counselingcenter.utah.edu/faculty/department.php>
- **“Tips for Working with Students in Distress”:** A 90 – 120 minute workshop to assist faculty in identifying signs of distress in students and in referring to appropriate campus resources, developed in collaboration with the Dean of Students Office and the Center for Student Wellness can be requested by emailing Allison Frost at [afrost@sa.utah.edu](mailto:afrost@sa.utah.edu)
- **Mental Health Workshops by Request** may be requested online at <http://counselingcenter.utah.edu/forms/request-presentation.php>
- **University Counseling Center Homepage:** <http://counselingcenter.utah.edu/index.php>
- **General coping information and referral resources** for students, friends, and family members: <http://counselingcenter.utah.edu/self-help/coping-stress/index.php>

If you would like to consult with one of our staff, please contact the Counseling Center at 581-6826 and ask to speak with your faculty liaison or the counselor on call during our regular business hours (8:00 am – 5:00 pm). Information for how students can schedule an initial appointment may be found at <http://counselingcenter.utah.edu/services/appointment.php>

We would greatly appreciate your forwarding this email directly to all faculty and graduate teaching assistants in your department as well as the graduate students who have teaching responsibilities so that they will be aware of the resources available from the Counseling Center.

The assignment of a Counseling Center staff member as the liaison to your department is meant to create a consistent and collaborative relationship between our departments and is not meant to limit who you can contact. Please feel free to contact any member of our staff as you see fit.

***Finally, I would like to remind you about the Open House for the School of Business faculty and advisors on Monday, March 5, in the Counseling Center Mindfulness Center, Room 344 Student Services Building from 3:30 – 5:00 pm.*** You, along with designated faculty and academic advisors, should have received an Evite invitation for this Open House last week.

Thank you for the opportunity to let you know about the services available to you and your faculty at the University Counseling Center.

Sincerely,  
Lauren Weitzman, Ph.D., Director  
[lweitzman@sa.utah.edu](mailto:lweitzman@sa.utah.edu) 801.581.6826

## **APPENDIX F: UCC SOCIAL MEDIA USER TERMS AND CONDITIONS (UPDATED 4/9/14)**

### **SUMMARY:**

The University Counseling Center (UCC) sponsors a photo sharing, video sharing, and other social media sites to further its mission to meet the cultural, educational, and informational needs of the campus community. Fans, followers, members, likers, and/or friends of our social media pages are encouraged to share, post, like, rate, upload videos and images, and converse with other fans and with content posted on this page. At times, the UCC's sponsored sites are also a place for the public to share opinions about the center, mental health, and related subjects/issues. Comments are welcome and will be reviewed prior to publishing. The UCC reserves the right not to publish any posting, or to later remove it without notice or explanation.

The UCC offers crisis services M-F 8-5. If you are a U of U student, staff or faculty member and need to talk with someone immediately, a UCC staff member is available to assist. Call us at 801-581-6826 or walk into the Center at 426 Student Services Building. For more urgent situations and after hours, please go to the University Neuropsychiatric Institute, 501 Chipeta Way, or to the Emergency Department at the University Hospital. The UNI CrisisLine: 801-587-3000 offers crisis response 24/7, including: crisis support over the phone, a mobile outreach option (MCOT) that will respond to persons in their home, and the Receiving Center where individuals from Salt Lake County can access a safe and supportive environment to help individuals work through their crisis situation. Individuals may spend up to 23 hours at the Receiving Center, at no cost.

### **FULL POLICY STATEMENT:**

In keeping with its mission, the University Counseling Center (UCC) may participate in the use of various "social media" sites or applications. The goals of UCC sponsored social media sites are:

- To increase the campus community's knowledge of and use of UCC services;
- To promote the value and importance of the UCC's services among university faculty, students, staff, administrators, and the general public;
- To maintain open, professional, and responsive communications.

The UCC's social media platforms are public sites used for educational purposes only and are not designed as a forum for provision of clinical care. Therefore, becoming a "friend" or "fan" does not indicate you are a client of our services or participating in therapy. If you have questions about your mental or physical health, please consult directly with your physician or other treating provider.

The UCC does not collect, maintain or otherwise use the personal information stored on any third party site in any way other than to communicate with users on that site. Users may remove themselves at any time from the UCC's "friends" or "fan" lists. Users should be aware that third party websites have their own privacy policies and should proceed accordingly.

Comments, posts, and messages are welcome on the UCC social media sites. Users are strongly encouraged to check facts, cite sources, and show respect in expressing their opinions. While the UCC recognizes and respects difference in opinion, all such interactions will be monitored and reviewed for content and relevancy. Having stated that, the UCC is not obligated to take any actions, and will not be responsible or liable for content posted by any subscriber in any forum, message board, or other area within these services.

The UCC offers crisis services M-F 8-5. If you are a U of U student, staff or faculty member and need to talk with someone immediately, a UCC staff member is available to assist. Call us at 801-581-6826 or walk into the Center at 426 Student Services Building. Faculty and staff may also contact the University EAP at 801-587-9319. For more urgent situations and after hours, please go to the University Neuropsychiatric Institute, 501 Chipeta Way, or to the Emergency Department at the University Hospital. The UNI CrisisLine: 801-587-3000 offers crisis response 24/7, including: crisis support over the phone, a mobile outreach option (MCOT) that will respond to persons in their home, and the Receiving Center where individuals from Salt Lake County can access a safe and supportive environment to help individuals work through their crisis situation. Individuals may spend up to 23 hours at the Receiving Center, at no cost.

## **CODE OF CONDUCT**

Comments and posts by fans to any of the UCC's social media sites should be relevant to the content posted on the page and its fans. UCC reserves the right not to publish any posting, or to later remove it without notice or explanation. Reasons for removal include, but are not limited to:

- Abusive, defamatory, or hate speech.
- Violations of copyright, trademark, or other intellectual property rights.
- Profanity or racial slurs.
- Illegal activities.
- Threats of violence.
- Pornographic or sexually explicit material.
- Information related to non-university related products or services.
- Spam or commercial advertising.
- Off-topic comments.
- Lack of space.
- Posts that become a nuisance.

In certain situations, the poster, as well as the content, could be blocked from the page or reported to authorities depending on the nature of the content. The UCC reserves the right to remove posts deemed inappropriate.

Posts that contain names (or identifying information) of specific individuals receiving care or working at the UCC may be removed if the individual has not consented to having information shared publically. Names of University of Utah employees identified as part of a complaint, concern, or compliment will be handled on a case-by-case basis. Depending on the circumstances, at the discretion of page administrators, the post or comment may be removed to protect the identity of individuals.

In addition, the UCC reserves the right to edit or modify any postings or comments for space or content (spelling, grammar, etc.), while retaining the intent of the original post. The UCC assumes no liability regarding any event or interaction created or posted by any participant in any UCC sponsored social media service, and does not endorse content outside the “pages” created by UCC staff. Participation in UCC social media services implies agreement with all University of Utah and library policies, including but not limited to University of Utah World Wide Web Resources Policy, Privacy Statement, Disclaimer, Information Resources Policy, and Terms of Service of each individual third-party services. The role and utility of social media will be evaluated periodically by UCC staff, and may be changed or terminated at any time without notice to subscribers.

*Adapted from University of Utah Spencer S. Eccles Health Sciences Library Social Media Policy; and the University of Utah Health Care Social Media User Terms and Conditions.*