





Brunel Counselling Service Annual Report 2014 – 2015

Contents

Counselling Team	3
Client Intake	4
Counselling Service Profile	<u>5</u>
Clinical Population	6
Use of CORE	7
Client date	8
Presenting Problems	9
Client Ethnicity	10
Student age and mode of Study	11
Widening Participation	12
Service Evaluation Feedback	13-15
Brunel Counselling Service in the Media	16-17
Graduate School Liaison	18
Brunel Bibliotherapy Scheme	19
Mindfulness	20-21
Evening Counselling	22
Cognitive Hypnotherapy	23-24
Trainee Counsellor Unit	25
Training, Workshops and Induction	26
Our training word cloud	27
Accessing Counselling	28
Contact information – Referring to Counselling	29

Counselling Team



Dr Ruth Caleb, Head of Counselling

Doctorate in Psychotherapy, Postgraduate Diploma in Applied Research Studies, M.A. Counselling and Psychotherapy, BSc (Hons), BACP and UKCP registered



Peter Eldrid, Deputy Head of Counselling

BSc (Hons), Advanced Diploma in Counselling, Diploma in Solution Focused Practice (BRIEF), BACP accredited



Alan Clarke, Senior Counsellor

MSc Psychodynamic Counselling, Postgraduate Diploma Careers Guidance, BSc (Hons), Cert. Ed, BACP accredited



Paramjeet Kaur, Counsellor

Diploma in Person Centred Counselling, Diploma in Eating Disorders, Certificate in Clinical Supervision, BACP accredited



Martyn Lloyd, Counsellor

Postgraduate Diploma in Counselling, Diploma in Group Counselling, BACP accredited



Irène Stone, Counsellor, Cognitive Hypnotherapist and NLP practitioner

BA (Hons) in Person Centred Counselling, MBACP (accred.), HPD, DipCHyp, NLP Prac, MNCH



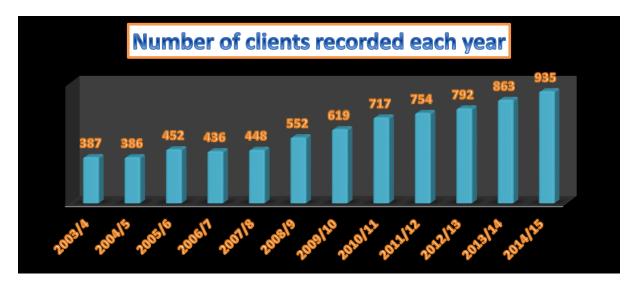
Kieron Allford, Counselling Service Administrator

BA (Hons) in Business & Tourism Management, HND Travel and Tourism.

Many thanks go to our trainee and associate counsellors Dee Albert, Roula Barlika, Natalie Brincklow, Liz Driscoll, Sarah Ferguson, Marie Fernandes, Louis Hook, Sonja Kormann, Ranjit Kaur, Jane Lovatt, Marie Plose and Lindsey Randol for their valuable contribution to the Counselling Service during the last academic year.

Client Intake

The intake number for clients presenting at the counselling service this year was **935**, including **66** staff clients. This demonstrates an overall increase of **8%** compared with the **863** clients in 2013-14.



The chart above shows that over the past 12 years the Counselling Service clientele has more than doubled. At the same time the overall Brunel University student numbers have slightly decreased. However, this does not mean that mental wellbeing at Brunel University has deteriorated for students and staff.

The Service's higher profile within Brunel, improved publicity and constant attempts to find creative ways to increase accessibility may explain the rising number of clients. Rather than assume that more staff and students have mental health issues than in previous years, we believe that having found ways to make counselling acceptable, accessible, available and confidential, more people wish to access the service.

Research evidence suggests that at any given time 1 in 4 British adults experience at least one diagnosable mental health symptom in any one year.

A major issue that clients bring to counselling is that their studies or jobs are suffering as a result of their problems, and they are keen to resolve them as quickly as possible. BCS offers short-term counselling to support this aim. On average during this 10 year period clients have been seen for 5 sessions.

Our clinical evidence using the CORE outcome measure over the past 8 years (see page 6 and Page 7) shows an average of 91% of clients reporting overall improvement in their psychological and functional symptoms. Due to this improvement they are better able to study, work more effectively and enjoy a better quality of life overall.

Counselling Service Profile

- The average wait for new clients for an initial assessment was only 1.5 days.
- 81% of clients were seen within 7 days of their request for counselling. 37% of new clients were seen on the same day as their initial presentation. Those waiting longer were often at their request.
- The total number of counselling sessions offered was **4,589**, a **36%** increase on the previous year.
- Clients were seen on an average of 5 sessions, similar to previous years.
- The student male/female client split was 41% male and 59% female. While this is not representative of the percentage of male students in the overall Brunel profile, it is very positive in terms of the national trend of around 33% of male clients and an improvement on last year by 3%.
- International and EU students constituted **26%** of the clientele, which is similar to the university profile.
- 33% of student clients disclosed a disability, three times the profile of Brunel disabled students and 10% more than last year. This demonstrates evidence for our target to reach students from widening participation groups.
- Students aged 21 or over at the start of their course constituted around 55% of the student clientele. This offers evidence of our good connection to mature students, another widening participation group.

Clients at risk of suicide, self-harm or harm to others

Management of clients at risk

On initial presentation, **57%** of student clients assessed themselves as having risk factors (including risk of self-harm, causing harm to others or suicide), as indicated by the CORE OM questionnaire.

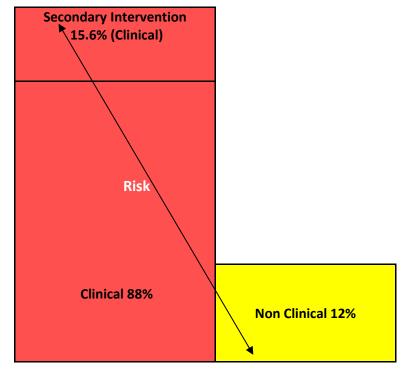
Clients who are assessed to be at risk of suicide or severe self-harm are prioritised for counselling.

Improvement in Symptoms

An overall improvement in mental health symptoms was shown by **93%** of clients with **75%** demonstrating a clinically significant improvement in their previous mental health symptoms as a result of their counselling according to the outcome measure analysis. This is likely to result in clients' ability to function at a higher level and progress better in their studies.

Clinical Population

The chart below shows data on the **683** clients who completed the questionnaire at the start of their counselling.



The chart demonstrates an increasing level of risk (see arrowed line) from the non-clinical to the clinical population and those who may require secondary intervention.

Risk is identified in terms of suicidal ideation and plans, self-harm and potential harm to others.

57% of clients indicated at least some level of risk but there is clearly a range from: 'I have occasionally thought of hurting myself' through to 'Most of the time, I am making plans to end my life'.

- The vast majority of our client group, 88%, are in the clinical population (red), and are likely to benefit from on-going counselling.
- Included in this group are 15.6% who may require a medical intervention such as psychiatric treatment.
- 12 % were in the non-clinical population (yellow). They could be at risk of failing
 to reach their academic potential, but are likely to have had low levels of risk in
 terms of harming themselves or others.

Impact of Counselling on CORE Score 2014/15

- 160 clients completed a second CORE at the end of their counselling and thereby gave us data to evaluate the impact of their counselling.
- On-going clients experienced an average improvement of **32** points. Any change over 19 points demonstrates clinical significance.
- An overall improvement was shown by 93%.
- 75% of clients showed an increase of 19 points or more after counselling, demonstrating a major clinically significant improvement in their previous mental health symptoms. This improvement has a great impact on retention and or reaching academic potential.
- Deterioration was shown by 7%. Unfortunately deterioration is to be expected in a small minority of clients who may be experiencing the onset of serious mental health problems. Or it may be that for a few clients, counselling was not useful to them at this at this point in their lives.

Use of CORE Outcome Measure

Background

CORE (Clinical Outcome of Routine Evaluation) was devised by a research team to measure psychological problems experienced by clients needing counselling or psychotherapy. The CORE Outcome Measure is a clinically validated, reliable evaluation tool used by the National Health Service, many statutory and voluntary counselling services, and increasingly in universities. Thus when used by the Brunel University Counselling Service, CORE enables us to benchmark students' psychological functioning to the wider population.

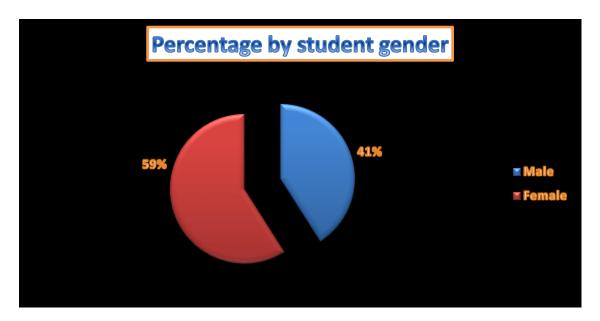
The CORE Outcome Measure takes the form of a questionnaire with 34 questions and offers a self-assessment by the client / patient of their symptoms over the previous week. The CORE Measure, used before counselling, acts as an indicator of risk and allows a service to triage its clientele and prioritise those considered to be at risk of self-harm, suicide or violence to others. Used before and after counselling it may demonstrate areas of change that are of importance for quality assurance and retention issues.

Use of CORE by the Brunel University Counselling Service

The CORE Outcome Measure is scored at the initial assessment session with the Counselling Service; for those clients who continue their full counselling contracts, this process is repeated at the end of counselling, thereby giving a detailed evidence-based record of change.

During the academic year 2014-15, the Brunel University Counselling Service developed its eighth full year of CORE Outcome Measure data. Using CORE is particularly helpful in offering comparisons with the overall population. The severity of the score is deemed to reflect the severity of the client's problems. For example those scoring under 40 (the non-clinical population) would be considered less in need of on-going counselling and would not be prioritised on a waiting list, whereas those scoring over 85 (the clinical population) might need to consider some form of secondary intervention such as psychiatric help. The questionnaire also alerts the counsellor to any risk of suicide, self-harm, or violence to others.

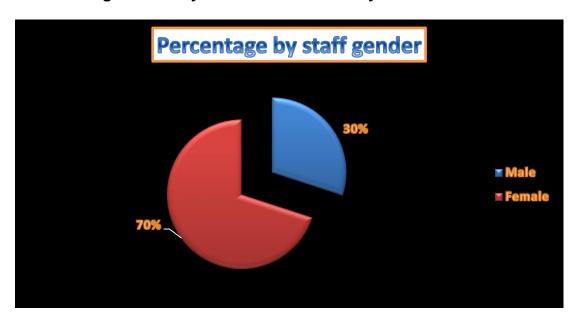
Client Data



The percentage of male student clients has increased from last year by 3% to 41%. While this is still lower than the male student profile at Brunel it is encouraging that more men are seeking help.

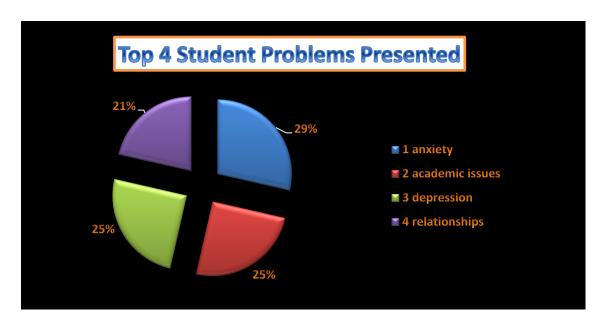
Not surprisingly women find it easier to come for counselling than men. Yet men are at far greater risk, being three times more likely to commit suicide. Many may have been prevented from doing so by timely GP support, medication and talking therapies such as counselling.

So encourage the men you know to talk - it may save their lives.

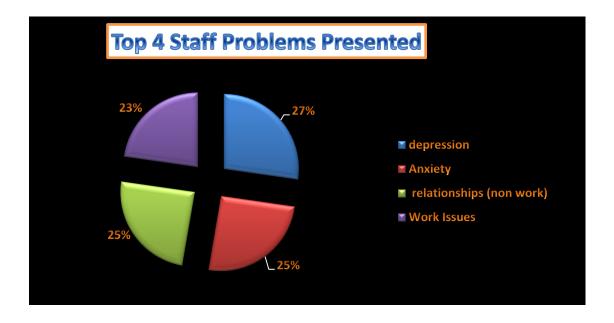


It may be that older men still find it difficult to seek help. The Counselling Service will continue to encourage staff to access counselling.

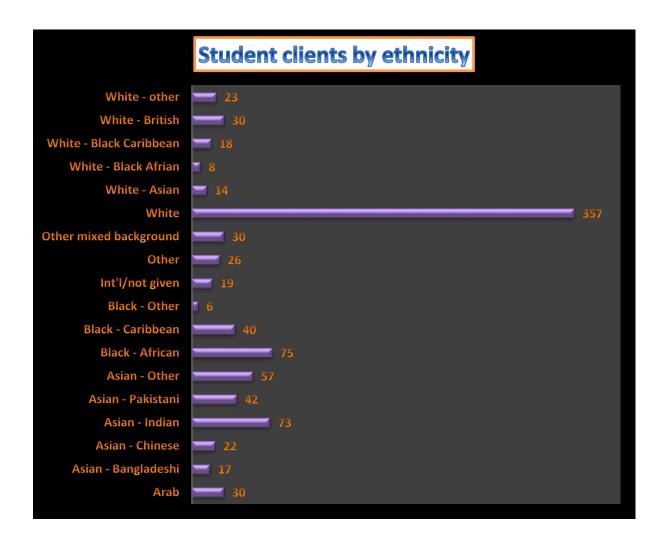
Presenting Problems



Why do people come to counselling? Most want change: to manage better, feel happier, have better relationships, deal more effectively with everyday life, be more productive and feel more positive. Interestingly staff and students seem to want the same kind of change; to be less anxious, less depressed, improve their relationships and feel more satisfied in their studies and their work.



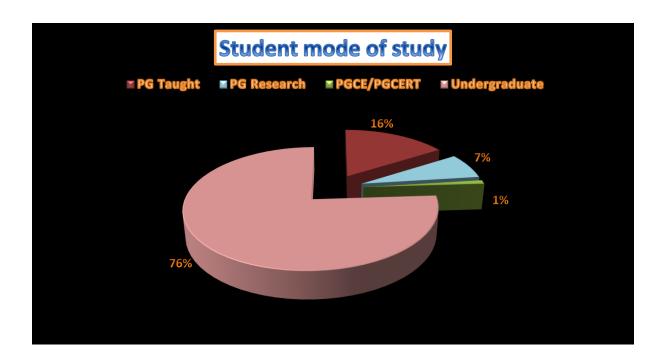
Client Ethnicity

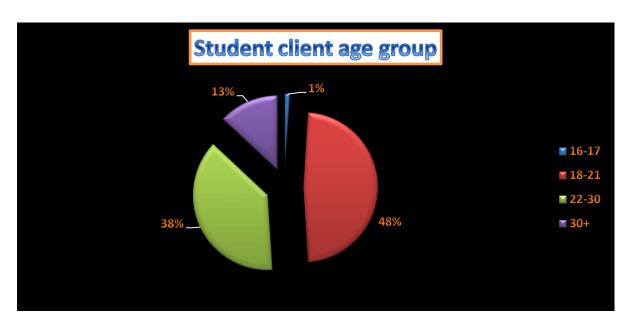


The ethnic profile of our clientele largely reflects the university profile, as does the take up of counselling from international students. This has been achieved by the service continuing to talk regularly to international students at their inductions and continuing to ensuring that different ethnic groups are encouraged to apply for training placements.

In the past 10 years we have worked with 110 different nationalities of the 130 represented at Brunel.

Student Age and Mode of Study





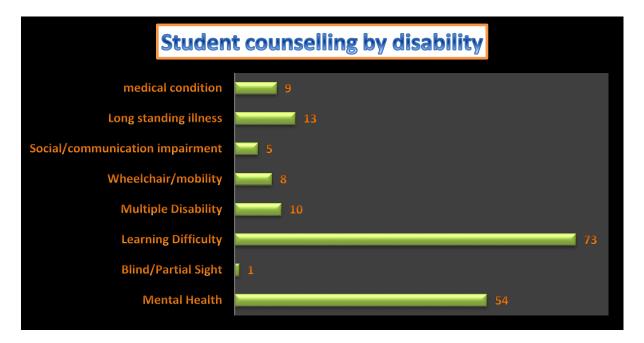
Students aged 21 and over at the start of their course constituted around 51% of the student clientele.

Widening Participation

The Counselling Service is proud of its close relationship with the Widening Participation Unit, and enormously grateful for the previous financial support offered to increase our ability to support to students who are in one or more widening participation categories.

Our commitment to widening participation means we are continually finding new ways to reach mature undergraduate students, care leavers and disabled students.

The table below demonstrate our success at this.



33% of clients disclosed a disability, three times the Brunel profile of 10% and higher than last year.

Care leavers

Those students who have been 'cared for' by local authorities are a small but potentially vulnerable group. We are aware that the difficulties that being looked after may engender could make University life even more difficult to manage. However the excellence of our award-winning Widening Participation team in ensuring that these students are supported and made aware of all the student services reduces this difficulty.

The counselling team is committed to offering a flexible and responsive service, with a wide range of early and late counselling face to face, Skype or telephone sessions, workshops and groups, aiming to reach those care leavers who live off campus.

Service Evaluation Feedback 2014/15

'Got me through a difficult year. Would not have done it without the help I received here.'

From the feedback from student clients below counselling is clearly a highly positive experience for BUCS clients.

Clients' description of their negative feelings before and after counselling

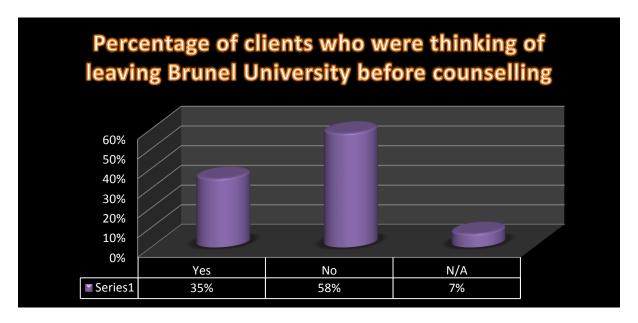
Negative feeling	Before counselling	After counselling	
Anxious	83%	14%	
Sad	78%	10%	
Stressed	73%	7%	
Depressed	65%	5%	
Lost	63%	4%	
Alone	58%	10%	
Frustrated	58%	4%	
Tired	58%	14%	
Confused	54%	6%	
Unmotivated	51%	4%	
Distraught	29%	0%	
Angry	21%	6%	

Clients' description of their positive feelings before and after counselling

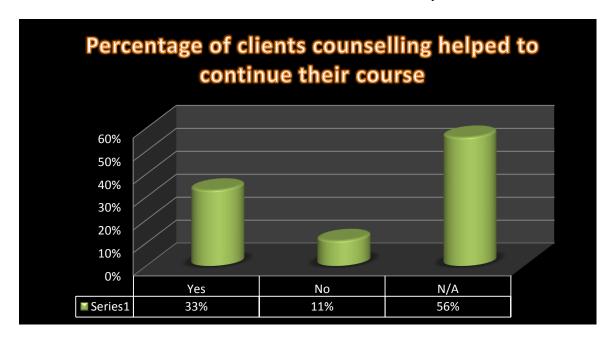
Positive feeling	Before counselling	After counselling
Coping	7%	71%
Motivated	3%	51%
Relieved	0%	50%
Confident	3%	46%
Understood	0%	45%
Satisfied	1%	44%
Insightful	1%	41%
Нарру	0%	40%
Focused	1%	36%
Relaxed	0%	35%

Service Evaluation Feedback

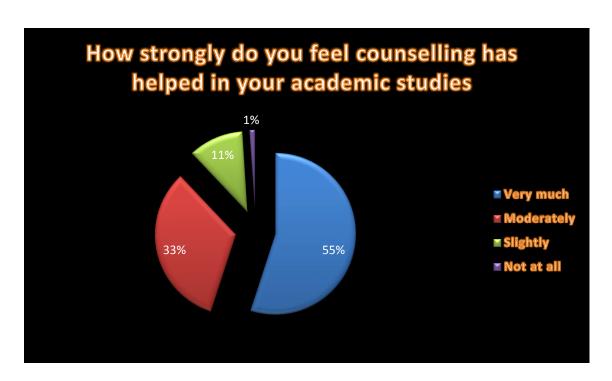
'Very happy with the Counselling Service and so glad I came to it. Don't know where I would be without it. Thank you.'



The charts above and below clearly demonstrates that counselling makes a strong contribution to the retention of students at Brunel University.

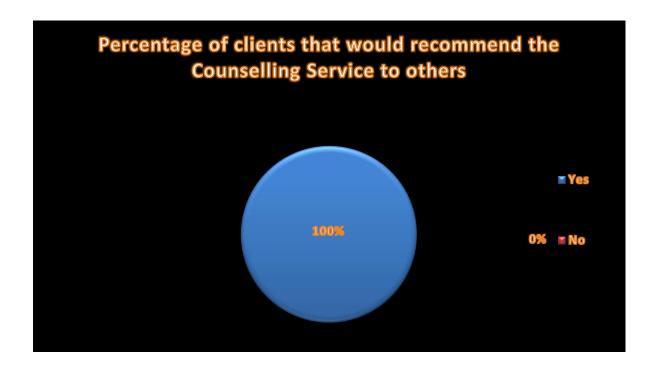


At a time when student retention is more important than ever these tables indicate that without counselling intervention Brunel could lose over 250 students every year, at a conservative cost of over £2.6million pounds to the university (assuming that they were all undergraduate home students paying £9,000 per year).



Retention and supporting students to reach their highest potential also ensures that our alumni remain committed to Brunel, due to their own valuable experience. The chart below is evidence that counselling contributed greatly to helping students reach their potential

'I couldn't have finished University without it!'



Brunel Counselling Service in the Media

The Head of Counselling, Ruth Caleb, has an external role as the Chair of the Mental Wellbeing in HE Working Group, supported by Universities UK and Guild HE. In this capacity she has been asked to speak at several conferences and discuss the mental wellbeing of students in the media this year.



Media appearances have included the BBC 1
Breakfast programme, with presenters Bill Turnbull
and Louise Minchin, discussing the support
offered by universities for students with mental
health issues, with a former student who had
experienced severe mental ill health while at
university.

Ruth also appeared on the Radio 4 programme 'Woman's Hour' with Jane Garvey, discussing the transition from school or college to university and how universities could reduce the stress on new students. Further interviews included Radio 4 Today' programme, BBC Radio 1 Newsbeat and BBC 3 counties Radio.



The quote below is from one of two interviews Ruth had with the *Guardian* this year which prompted a debate in June 2015 in the House of Commons called by Valerie Vaz MP, and responded to by the Minister of State for Universities and Science, Jo Johnson.

'Ruth Caleb, who runs the counselling service at Brunel University in west London, has been listening to students' problems for 25 years. Since 2005, the number of students seeking her help has more than doubled. When she started, the most talked about subjects were "homesickness, first boyfriends, learning to live with new people". Now, the problems are: depression, eating disorders, self-harm. At the same time, many universities have cut back spending on counselling services for students with mental health problems.

Professionals such as Caleb have been sounding the alarm for some time. In 2011, the Royal College of Psychiatrists reported a steady increase in both the incidence and severity of mental distress among students over the previous decade. At that time, around 4% of the student population was seen by a counsellor; this year, that is closer to 8%, according to Patti Wallace, the British Association of Counselling and Psychotherapy's lead adviser on university and college counselling.'

You can read the parliamentary debate in full at http://www.publications.parliament.uk/pa/cm201516/cmhansrd/cm150611/debtext/15 0611-0004.htm

Further External Workshops and Trainings by BCS Staff

Harrow Bereavement Care Conference presentation, workshop and panel member (Ruth)

Mental Wellbeing in HE /Universities UK Conference on Student Mental Wellbeing: Policy, practice and future directions (Ruth co-chair)

HEPI / HEA House of Commons seminar presenter (Ruth)

Solution Focused Counselling Training for both Dundee and Glasgow Universities (Peter J Eldrid)

Publications

Bager-Charleson S, Caleb R, Goss S, du Plock S, McKenzie-Mavinga I (2015) Developing Doctoral-level Training that Responds to the Unique Requirements of Therapy Professionals, *The Psychologist*

Student Mental Wellbeing in HE Good Practice Guide 2015, 2nd edition, UUK (written by members of the UUK Working Group for the Mental Wellbeing of Students in HE with a forward by UUK CEO Nicola Dandridge and an introduction by myself as Chair). To download the report, go to:

http://www.mwbhe.com/inc/files/documents/publications/studentmentalwellbeinginhe.pdf

Caleb R (2015) Student mental wellbeing: whose responsibility? BACP University and College Journal (May)

Barden N & Caleb R (2015) Fitness to Practise in Tribe R & Morrissey J (eds) *The Handbook of Professional and Ethical Practice for Psychologists, Counsellors and Psychotherapists* (Second Edition) Routledge

Caleb R (2015) Challenging the ivory tower in Goss S and Stevens C (eds) *Making Research Matter* Routledge

Caleb R (2015) Anxiety and depression - universities must respond to demand, Daily Telegraph, February 13

Graduate School Liaison

The Brunel Counselling Service is working with The Brunel Graduate School in offering small, confidential group sessions for post-graduate students where concerns about coping with life in a new environment can be discussed and shared to support graduate students in the process of building confidence, and establishing productive working relations. This forum is to assist new graduates in making the transition to life at Brunel and for those graduates new to this country and life in the UK.

Many issues are addressed including codes of behaviour, expectations, obligations and different ways of relating. It is hoped the exploration and sharing of these concerns will work to ease transition and foster a sense of belonging. This in turn should enhance the quality of student experience and academic performance. Working closely to the Performance Indicators stipulated by the Researcher Development Programme gives students who choose to attend the sessions an opportunity to develop, demonstrate and log a series of 'soft' skills of an interpersonal nature that are so valued by employers. For example, involvement in the group will offer students the opportunity to demonstrate core competences in the realm of exploring and evolving interpersonal relationships and building strategies for negotiation and compromise in working relationships.

For many students the main challenges will focus on the need to make changes. For some, at least initially, drawbacks to making changes can be perceived as too daunting. Engaging with these fears and concerns with others can lead to a reduction in anxiety and pave the way for new approaches.

Styles of interaction and expectations flowing from a range of differing cultural and educational contexts are discussed and shared in the group. One aim being to identify and dissolve fears and anxieties and open up the possibility for a reworking of habits and thought patterns along the way to achieving more productive working relations. Students are encouraged to become pro-active in contributing to the fashioning of their working relations in order to promote their educational goals.

Finding Your Way Through Series 26.11.14 11 students 10.12.14 4 students 14.01.15 9 students 18.02.15 4 students 11.3.15 9 students

We will continue to develop this work with the Graduate School in the 2015/16 academic year.

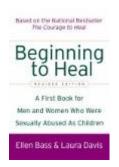
Alan Clarke - Core Team Counsellor.

Brunel Bibliotherapy Scheme (Books Can Help)

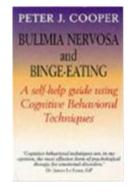
Bibliotherapy is a term used to cover the use of self-help books to help people deal with various psychological and emotional difficulties. It can be very effective, especially for people who are highly motivated. Self-help materials, which can be borrowed by students or staff from the Library, can be used independently, or alongside support from a counsellor.

72 books are currently on the list of Bibliotherapy titles

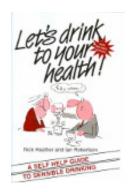
Below are some of the books that received "likes" on our Bibliotherapy web page.



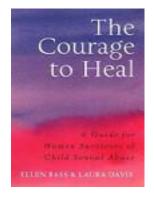
Beginning to Heal: A first book for men & women who were sexually abused as children



Bulimia nervosa and bingeeating: A guide to recovery



Let's drink to your health: A self-help guide to sensible drinking



The Courage to Heal: A guide for women survivors of child sexual abuse

To check out the list of books and for more information, go to:

http://intranet.brunel.ac.uk/counselling/StuSelf-help.html.

Martyn Lloyd - Core Team Counsellor

Mindfulness

What is Mindfulness?

John Kabat-Zinn, who is credited with bringing together eastern meditative practices and western scientific research in his work with people experiencing chronic pain, defines mindfulness as:

- Paying attention
- With purpose
- In the present moment
- Without judgement or preference

He often adds "as if your life depended on it" (and then adds "which it probably does")

There is a myth that mindfulness means freeing your mind of thoughts. This is impossible as anyone who has tried to free their mind of thoughts can readily testify. Mindfulness can be practised 'formally' in time set aside for specific exercises, or informally. Formal mindfulness practice involves training the wandering mind to repeatedly return to a specific reference point or anchor. Such a reference point might be the breath, the body, sounds or an object for example. Informal mindfulness practice involves bringing a quality of presence to everyday activities (coming out of auto-pilot). Mindfulness practices are underpinned by an attitude of "kindly curiosity" towards ourselves and others – an attitude that is rooted in acceptance, rather than change.

Mindfulness groups

A pilot project was set up to run 2 mindfulness groups. These were open to the general student population and not just clients of the counselling service. Two 4-week groups were offered with a possible 15 places each and both groups filled up very quickly.

About 80% of participants had never experienced a mindfulness or meditation course / class before.

Content covered

A variety of basic mindfulness exercises were explored over the 4 weeks including:

- Mindfulness of the breath
- Mindfulness of the body
- · Mindfulness of an object
- · Mindfulness of sound
- Mindfulness of thoughts

Suggestions for home practice were a key component of the course and helped participants integrate mindfulness skills into everyday life. Participants were encouraged to keep a journal of their experiences over the course.

Evaluation

Each participant was asked to complete a short survey which aimed to rate their levels of mindfulness before and after the course:

Average "mindfulness scores"	Average score before	Average score after	%-age change
1 st group	26	34	+ 30%
2 nd group	30	35	+17 %

- 100% of participants scored the course as either 4 or 5 (on a 1 to 5 scale) in terms of the course's usefulness
- 100% of participants aid that they would be interested in a follow-up
- 100% would recommend the course to a friend



Martyn Lloyd - Core Team Counsellor

Feedback

Below are some comments from participants about what they valued from the course

Being able to explore mindfulness in a guided way and having opportunities to reflect on things with others in a similar position

Learning to pay attention to the small things that we can miss in life and learning how to observe thoughts without becoming caught up in them.

I am amazed at the impact that the course has had on me. I have genuinely experienced a difference in mood and stress management since starting and am making an effort to incorporate the practise daily.

Evening Counselling

"Extremely useful that I could use this service in the evening. I'd have had nothing without that option. Having counselling at Brunel meant I had an immediate source of help when an awful event happened in my life that affected Uni/work life."

(evening client)

After the summer break the evening service in the Library resumed on 7th October 2015 until the End of May, offering students and staff one-to one support sessions through drop-in's, assessments and one-to-one counselling sessions. As in previous years this 'out of office hour' service was highly frequented as many students on placements or staff who do not wish to attend counselling during their work hours got the opportunity to seek support when needed.

The popularity of the evening service has steadily grown since it first started in 2009:



And it is due to the steady increase in demand from student and staff members to access evening sessions that the Brunel University Counselling Service decided to keep after-hour sessions running for the whole of the year. The pilot ran from June till the end of August 2015 by offering two appointments for assessments and/or on-going clients with almost 95% up-take of all sessions offered!

Throughout the year (Beginning of October till End of August) 46 clients accessed the service for counselling support. On-going client work averaged with an up-take of 3 sessions (between 1 and 7 sessions).

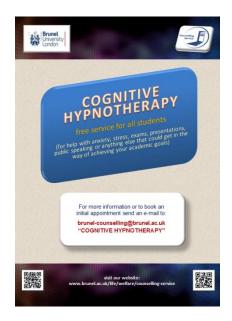
The FUTURE > academic year 2015 / 2016

A new pilot has been launched for the first term with the evening service expanded from 1 to 3 counsellors, offering assessments, on-going face-to-face therapy and drop-ins. As all our developments and efforts to improve the service are client led, the service will re-evaluate this pilot at the end of term 1 and if there is sufficient attendance, the expanded evening service will run till end of May 2016.

Cognitive Hypnotherapy for Students

"Cognitive hypnotherapy has helped me to discard outdated negative perceptions of myself based on reality and facts. This has helped me to grow as a person feeling more confident, happy and able ©. I would highly recommend cognitive hypnotherapy to anyone who is finding difficult to achieve goals their goals whether they are related to their personal life and/or academic life."

(cognitive hypnotherapy client)



During the last academic year students had the opportunity to attend free Cognitive Hypnotherapy sessions conducted at the Brunel University Counselling Service.

Throughout phase 1, to avoid putting more pressure on the waiting list of the overall service, Cognitive Hypnotherapy was offered through internal referral by the Counselling service only and was not widely publicised.

A few statistics

attendees: 10

gender: 7 female, 3 male age: between 20-40

On campus: 3 Off campus: 8

So what is Cognitive Hypnotherapy?

Cognitive Hypnotherapy is a modern approach developed to help people make the changes they want to make in their lives.

At times all of us find ourselves locked into beliefs, habits and patterns of behaviour which have a negative impact on the quality of our lives and yet somehow we feel powerless to make positive changes.

Cognitive Hypnotherapy considers the unconscious capable of making decisions and producing its own behaviour as a separate entity of the mind with the sole purpose of maintaining our safety. It creates and stores patterns to that effect which run outside of our awareness. It is also where negative or problem patterns are kept (our unconscious does not differentiate between solution patterns and/or problem patterns as it is only occupied with safety.

Cognitive Hypnotherapy works with the assumption that problems arise due to our unconscious mind protecting us from situations that in the past have brought about an

unpleasant experience. When a similar situation occurs, people can get emotionally hijacked by the unconscious mind which can result in behaviour that seems unexplainable or even out of control (i.e. "Why did I panic when I know it's just a little spider that cannot harm me?).

Cognitive Hypnotherapy uses a relaxed, light trance state which all people experience on a daily basis (i.e. daydreaming or being engrossed in a book and missing the stop on the bus) and works with ideas from the schools of Hypnotherapy, Neuro-Linguistic Programming (NLP), Evolutionary Psychology and Positive Psychology to form a powerful method of reprocessing unwanted thoughts or behaviour patterns.

In Cognitive Hypnotherapy each client is looked at as a unique being with individual problem patterns and solution states. It therefore does not use general treatment plans but instead seeks to devise a tailor made script, underpinned by an audio wordweaving file which allows the most effective and permanent change to take place in the shortest time possible.

Phase 2 of this exciting new department will see an increase in advertising the service to the whole student population through our website.

Irène Stone

Core Team Counsellor/Cognitive Hypnotherapist BA(Hons), MBACP (accred.), HPD, DipCHyp, NLP Prac, MNCH

Trainee Counsellor Unit

During the last academic year, the service offered placements and the opportunity to gain counselling experience to 12 trainee and associate counsellors. They are offered clinical supervision and termly training days. Many thanks go to all of them for their excellent work with our clients.



"Having the opportunity to work at Brunel Counselling Centre as a trainee counsellor has been instrumental in helping me pass my formal qualifications as a fully qualified counsellor this year. The professionalism of the staff and the support they give to trainees is first class, I have learnt so much, not only within my work with the clients, but also in the fortnightly supervision and regular CPD that is offered throughout the year. I cannot recommend the service enough, I have been made to feel like part of an amazing team, and I hope to continue on at the service for a song as I am able to. Thank you BCS!"

Marie Plose – Trainee counsellor (now graduated)



"I have very much enjoyed my year working at the Brunel Counselling Service. It has been a great privilege to work with a diverse range of clients who have shown huge talent, commitment and courage to engage in the counselling process. I have received excellent support from my supervisor and the whole team has been welcoming and friendly. It has been a very valuable experience for me both in terms of completing my studies for my Diploma and the opportunities and support I have received in order to develop my skills as a practitioner.

With warm regards and many thanks."





"I have had an enjoyable and educational year as a trainee counsellor at Brunel University. Working with students has been interesting and challenging. My client work has encouraged me to explore the ways in which I work and steered my learning in new directions. Regular supervision has been invaluable in guiding my development as a counsellor and a source for insights and encouragement. I have also felt welcomed and supported by the wider team. Being part of the Counselling service has been, for me, a great experience."

Marie Fernandes - Trainee counsellor.

Training, Workshops, Inductions and Presentations to staff and students 2014-15

Brunel Counselling Service offered **42 training, workshops, inductions and presentations** to **877** students and a further **21** to **256** staff.

We continue to offer training to those in a peer support roles like the **student mentors** who work Monday – Thursday evenings helping support new students living in halls. We also are continuing to work with the **LGBT peer support group** and the **parents and carers peer support group**.

Our group work with students ranges from helping those from widening participation to prepare for the pressure ahead in a formal workshop through the **Headstart** programme to enjoying a burger while chatting with new business students. Normalising counselling in an informal setting, helping students and staff to see us as part of the Brunel community, can go a long way to demystifying what we do and enable more people to access us.

Staff Training

We know that raising awareness amongst staff and students helps people to be signposted to the appropriate service. Mental health is everyone's business not just those in the health and well-being section. Tutors are also much more aware of their pastoral role and this is going to increase as **tutoring @brunel** is rolled out within the new colleges.



This is the second year of the buddy scheme set up through Brunel Volunteers to train those students who wanted to **buddy** new students helping them to settle into Brunel in their first 6 weeks or so. We now have over 200 student buddies.

Finding a fellow student like yourself, who understands how it feels to be a student and who is trained to support you, can be vital, especially if you are new and insecure. Our training helps the peer supporter or mentor to recognise their role and not impose their experience but to listen and let the student tell them how it is for them. They also know their limits and when to signpost to other student services and importantly, how to get support and supervision for themselves.

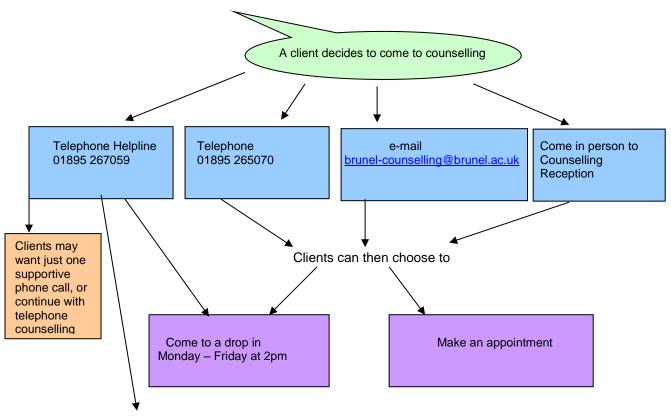
This training forms an important part of our continued commitment to widening participation enabling all students to make the most of their time at Brunel University London. Being a mentor or buddy also offers our students the opportunity to develop additional skills and experience to further enhance their employability.

OUR TRAINING WORD CLOUD

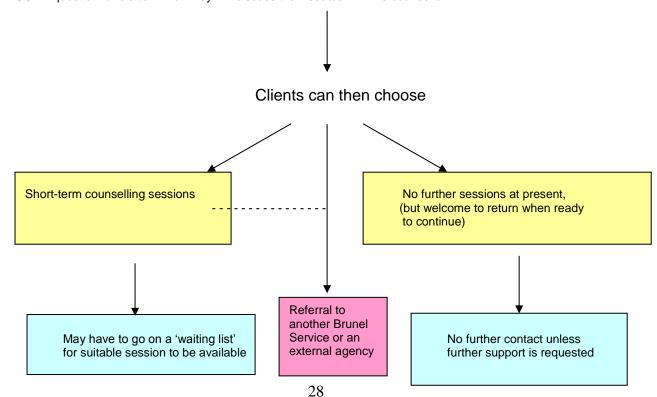
We are working throughout the university to reach as many staff and students who may need to know about us.

Student mentors Action Suicide management being women's day Sexuality Policy home Plans team Stress support training Staff MEN nightline less anxious Mindfulness hypnotherapy Gender harm Resilience Self boundaries Sports Well Refreshers keeping ARC group International Relationships bullying difference big white wall paper solutions listen Finding way Reduce Adapting LBIC joy Well being induction Samaritans 24/7 self harm Stress Freshers Styles Buddy action peer Changes Sabs Pressure support GTLP awareness staying Plans Handling Managing Headstart **Tutor** Relating **Residences** help Mental lecture mentor Graduate Making LGBT college Focused/Masters workshop train Better Fayre Distressed supporting Well

Accessing Counselling: Flow Chart



The first appointment is an ASSESSMENT at which clients are asked to complete an information sheet and a CORE questionnaire after which they will discuss their issue/s with the counsellor



To make an appointment with a counsellor:

- Call in person to the Counselling Reception opposite the Medical Centre.
- Phone 01895 265070 to book an appointment or leave a voicemail.
- Email us at: brunel-counselling@brunel.ac.uk

Office Opening Hours

 Monday
 11:00am to 4:30pm

 Tuesday
 09:30am to 4:30pm

 Wednesday
 09:30am to 4:30pm

 Thursday
 09:30am to 4:30pm

 Friday
 09:30am to 4:30pm

URGENT SUPPORT

When the unexpected happens or you need help quickly:

If you have an experience, which leaves you feeling distressed, such as a broken relationship, bad news from home, course failure, bereavement, or violent incident, come along without an appointment to the **Drop-in**:

Monday – Friday, 2pm – 3pm
(first come, first seen)

Phone our confidential Helpline: 01895 267059

You will be called back within 24 hours of a working day.

Further Support:

- Security 01895 255786 ext. 66943
- Brunel Medical Centre
 (If living on the Uxbridge campus or local area)
 01895 234426
- The Samaritans available 24 hours a day: 116 123 www.samaritans.org.uk
- Nightline available to all students 6pm to 8am every night of term 020 7631 0101
 www.nightline.org.uk (also free internet-based calls on Skype via website).
 Email listening service: listening@nightline.org.uk.
- Big White Wall

Free anonymous online support for all Brunel students having a tough time - go to www.bigwhitewall.com/university and use your university email address to login.

 Get Connected a free and confidential helpline for young people, plus email and webchat services
 1pm to 11pm daily
 www.getconnected.org.uk

www.getconnected.org.uk 0808 808 4994

