

Sector  
Overview  
003

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# University and College Counselling Services

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**Sector Resource 003**  
**University and College Counselling Services**

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## Context

This resource written by a BACP UC working group, is one of a suite of resources prepared by BACP to enable members to engage with BACP's *Ethical Framework for the Counselling Professions* [www.bacp.co.uk/ethics/EFfCP.php](http://www.bacp.co.uk/ethics/EFfCP.php) in respect of counselling in university and college settings.

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## Using the Sector Resources

BACP members have a contractual commitment to work in accordance with the *Ethical Framework for the Counselling Professions*. The Sector Resources are not contractually binding on members, but are intended to support practitioners by providing general information on principles and policy applicable at the time of publication, in the context of the core ethical principles, values and personal moral qualities that BACP promotes.

Specific issues in practice will vary depending on clients, particular models of working, the context of the work and the kind of therapeutic intervention provided. As specific issues arising from work with clients are often complex, BACP always recommends discussion of practice dilemmas with a line manager, supervisor and/or consulting a suitably qualified and experienced legal or other relevant professional.

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## 1. Introduction

BACP UC was founded in the 1970s as the Association for University and College Counselling and has become the largest professional body for counsellors working in UK colleges and universities. The BACP UC division offers a range of benefits to its members, including a quarterly journal, a dynamic and well-used email-based networking and resource sharing group, an annual conference and an advisory service. As well as responding to individual requests for help from its members, the advisory service publishes good practice guidance to inform counsellors and senior managers in colleges and universities about the nature of counselling and the conditions that need to be in place if counselling is to be offered in a safe, professional and ethical way. This resource is the latest in a series published by the advisory service over the past 30 years and takes into account new working practices, such as multi-disciplinary working in counselling wellbeing services, new delivery modes such as online counselling and BACP's *Ethical Framework for the Counselling Professions*.

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## 2. The role of the counselling service in universities, sixth-form and further education colleges

In January 2014, at one of its termly meetings, the Heads of University Counselling Services (HUCS), a special interest group (SIG) within BACP UC, considered what was distinctive about counsellors, given the increase in the number of mental health advisers, wellbeing consultants and other staff in further and higher education institutions who often use some counselling skills in the course of their work.

A distinctive feature is that while counsellors offer psychological and/or emotional support to clients, this is done in the context of the university or college where they work or study. The counsellors also work actively with clients, using a variety of skilled interventions, to facilitate lasting change. Counselling can enable clients to develop insights into their situation and help them to put effective strategies in place to build better personal resources and greater resilience. This leads to a reduction in problems and risk, increased wellbeing, better functioning and improved work or study effectiveness (Broglia, 2015). Counselling offers clear benefits to the individual student or staff member and, to the institution where they study or work.

In university and college settings counselling is usually a systematic process of reflection and action, which often takes place over a number

of sessions. While many services offer a range of services to see clients quickly, counselling is not usually considered an acute/emergency intervention and if that is needed, other services such as a GP, the local crisis mental health team or NHS Accident & Emergency department would be better placed to assist.

The cost-effectiveness of counselling interventions now has a clear evidence base. Patti Wallace, formerly BACP's Lead Advisor for University and College Counselling, conducted research on counselling and academic outcomes, which showed that students considered counselling to have helped them to stay at university or college (81%), to do better in their academic work (79%), to improve their overall experience of being at university or college (82.8%) and to develop skills useful for obtaining employment (78.1%) (Wallace, 2012, pages 6-11). Focusing on staff, a study by Collins, Dyer and Shave (2012) compared a treatment (counselling) group with a control group and concluded that there was 'clear evidence that workplace counselling represents an effective way of improving functioning within a workforce by reducing distress, dysfunction and underperformance' (page 17). Research conducted by Dailey (2012), amongst college and university staff, also showed that the majority of those who accessed their institution's counselling service reported positive benefits.

The core work of a counsellor is to engage with clients who seek help because their wellbeing and effectiveness have been compromised, either by past events or by their current circumstances. Presenting issues from both student and staff clients might include work or study related issues, stress, relationship and family problems; bereavement; issues around sexual, personal or gender identity; anxiety, including phobias and obsessions; depression, including those who have made suicide attempts or who have suicidal ideas; eating disorders, including bulimia and anorexia; cultural issues; and difficulties arising from childhood abuse.

Nigel (2017) writes about adolescence and brain maturation, and indeed some student clients present with difficulties relating to the psychological stages of development; problems associated with study and learning; problems associated with leaving home or living away from home; and/or concerns about the transition to working life or further study. Staff clients may bring workplace issues, such as the implications of institutional restructuring, ill health, bullying, stress, and grievance or disciplinary proceedings. Much of the work undertaken by counsellors will be delivered on a one-to-one basis, but therapeutic or psycho-educational groups can be beneficial for some clients.

The British Association for Counselling and Psychotherapy (BACP) Annual Survey of Universities and Colleges 2013/14 showed that 82% of student referrals and 71% of staff referrals were attributed to high-intensity interventions, for example, individual counselling and psychotherapeutic groups, rather than low-intensity one-off workshops and psycho-education (Broglia, 2015, p8). This suggests that students and staff are presenting with complex mental health needs and that counsellors are

likely to be more equipped to respond to these than wellbeing workers because of their rigorous professional training.

Counsellors in colleges and universities sometimes work with clients who have serious mental health or psychological difficulties. Careful assessment of clients is crucial and whether it is appropriate to offer counselling will depend on several factors, including risk assessment, access to psychiatric consultation and ease of access to local medical and psychiatric services. It will not always be appropriate to offer counselling, as some clients' needs will be better met by other support services. See Dufour (2016) for the multi-faced role of assessment for student counselling in higher education, as she writes that:

*It is important to ascertain if there is anything that can be put in place to help the student practically, signposting them to other support services, or perhaps working concurrently with other colleagues in the institution. When a student is struggling, this can be a complex issue requiring several different sources of help. (Page 71)*

Much work with clients will be conducted face to face on an individual basis, but services also make use of telephone and online technology where appropriate. Many counselling services offer groupwork, particularly where clients might benefit from being taught practical skills such as assertiveness, relaxation techniques and resilience building, or having regular access to a focused support group.

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## **2.1 How an embedded service adds value to an institution**

Discussing the severity of academic distress experienced by help-seeking students in the UK, compared to US students, Broglia (2017) points out that this:

*highlights the need for practitioners in student counselling services to be experienced in the student context. In effect, student counselling services need to be viewed as a specialist service embedded within university settings. (Page 10)*

An embedded service is one provided on the premises and staffed by counsellors who are directly employed by the college or university and managed by a senior figure within it. The counsellors know the institution's culture and act as a resource for the wider institution, such as engaging in preventative work with students who may not have accessed the counselling service, and providing training for academic/support staff on identifying signs of mental distress and how to respond to students or colleagues exhibiting these.

In an increasingly competitive market, it is clear that counselling services need to demonstrate the added value that an embedded service offers;

Wallace (2014) outlines these benefits. Financial cutbacks in some areas mean that strong cases need to be presented to show that the consequences of removing a counselling service can be greater than the cost savings; for example, if more students drop out of courses due to mental health problems and the institution suffers a loss of revenue from fees as a result. One university service (Brunel) calculated it saved the university at least £1.5 million because the counselling and groupwork it provided retained students who would otherwise have left the university (Caleb, 2015: page 7). Research conducted by Moore and Lane (2012) also illustrates the value of an embedded service.

Wallace (2014) writes about the positive wider impact of counselling provision at group and organisational levels as well as at the individual level:

*One of the advantages of an in-house counselling service is that the counsellors, because they are embedded in the institution, are in touch with issues and behaviours that arise for students and staff on a regular basis across the academic year, for example, homesickness and exam anxiety. (Page 24)*

Another example is the recognition that many students need to strengthen their emotional resilience to manage anxiety and deal with the pressures of their course, finances, living independently and building new relationships. In identifying this, Wallace refers to interventions that an embedded service can develop and deliver. This includes treatment interventions, such as psycho-educational groups and proactive preventative interventions for staff and students e.g. mindfulness groups. Counsellors working in embedded services are also on campus to provide consultation for staff to help them deal with particular issues or manage specific students, for example, supporting students affected by the self-harming behaviour of a housemate.

## **Organisational level**

'The most readily recognised organisational impact of an embedded counselling service is probably the protection of institutional reputation' (Wallace, 2014). For example, the offer of psychological support for students at risk, and the demonstration that the institution has made all possible offers of support, in the 'worst case scenario' of a student suicide. Proactive involvement of the counselling service in many aspects of the institution is desirable and demonstrates the value of an embedded service. Services can contribute towards colleges and universities being healthy institutions by promoting open discussion and understanding of the need for all of us to look after our mental health and wellbeing and to challenge stigma.

Embedded counselling services can contribute to this in a number of ways:

- involvement in Freshers' weeks and mental health awareness days.
- offering consultancy and support to departments and faculties to plan

and deliver programmes that develop students' life and employability skills such as assertiveness, confidence building and emotional resilience.

- sitting on working groups and committees to ensure that mental health awareness contributes to the development of university values, strategic plans, policies and procedures.
- collaborating in joint projects with other related services such as mental health advisers, chaplains, disability advisers, student union officers and occupational health.
- delivering staff training such as helping skills and offering consultation and signposting when students are in distress.
- liaising with external agencies where appropriate, such as GPs and community support groups.

It is not enough to be proactive: it is also vital to promote and publicise them within the institution to raise awareness of this work at senior management level. There are many ways in which this can be done such as use of social media, student union promotion and student/staff magazine articles, vibrant website information and producing and circulating annual reports, or newsletters. As Ruth Clowes, former Media and Communications Manager at BACP, stated it can help to find ambassadors who can be positive advocates for the service.

*Go out of your way to find a champion, find them and nurture them. They will keep you in mind when they're at the senior staff meeting. Arm them with the knowledge they need to stick up for counselling and wellbeing, so that, if someone suggests cutting the service, they can come back with the relevant facts. (Clowes, 2014, Page 6)*

See also Caleb (2015) who has written a very helpful article on the added value of embedded counselling services.

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## **2.2 Managing institutional expectations and professional requirements**

On occasion, tensions can arise between institutional expectations and professional requirements. Examples include:

- the institution expecting the counselling service to relinquish confidentiality without consent. This extends to a member of staff enquiring whether a student has attended counselling or not
- a request for a counsellor to attend a disciplinary hearing or comment on a fitness to study/practise issue

- a safeguarding officer deciding that a safeguarding issue needs to be reported, but the student (counselling client) is unhappy about this or reluctant for this to happen.

It is crucial that there is time for reflection on issues of this kind so that any actions are carefully considered and appropriate to the circumstances.

Counselling services working in accordance with BACP's *Ethical Framework* commit counsellors to 'putting clients first' (see Commitment 1). Other commitments include working to professional standards, and showing respect by protecting client confidentiality and privacy, together with principles such as being trustworthy and respecting clients' autonomy. See [www.bacp.co.uk/ethics/EFfCP.php](http://www.bacp.co.uk/ethics/EFfCP.php) (BACP, 2016) for further details. Following ethical standards is a professional necessity.

Confidentiality is an integral part of the BACP *Ethical Framework for the Counselling Professions* (2016) to which all members of BACP should adhere. The maintenance of confidentiality is essential both to those who seek counselling and to the institution seeking to offer a professional and effective service.

However, for legal and other reasons, it is not possible to offer absolute confidentiality. This should never be promised and should be addressed in the initial contracting/assessment stage of the counselling process and clients informed of this via a leaflet or information sheet, so that they are able to give 'informed consent'. This is a complex area, which cannot be covered fully in this resource, but there are excellent published resources with further details, including Good Practice in Action 014: *Managing Confidentiality* which can be downloaded at: [www.bacp.co.uk/ethics/newGPG.php](http://www.bacp.co.uk/ethics/newGPG.php) and other Good Practice in Action resources, which are listed in the Appendix. Services must inform themselves of both general limits to confidentiality, and ones particular to the context and client group with whom they are working.

It should be made clear to clients and to staff within the institution that any breaks in confidentiality are exceptional, and the service should work with management and staff to develop an informed understanding of confidentiality issues, with particular reference to current legal and ethical considerations.

The need to break confidentiality will be a rare occurrence; what is more common is that demands are placed on the service, which could compromise the scope of confidentiality offered, such as access to information for a wider student services team or providing client names to college finance departments to obtain extra funding. Some universities and colleges have 'students at risk' groups where the risks can be discussed by the staff supporting such students, information being shared on a need-to-know basis, and action being agreed about how best to proceed. These situations need to be carefully considered and practice informed by legal and ethical principles. If aspects such as confidentiality are perceived as weak, there is the likelihood of clients dropping out of counselling sessions or not coming forward to use the service at all. This

can result in an increase in distress and risk, and may lead to clients making a formal complaint that their confidentiality has been breached.

The issue of confidentiality can be even more contentious in the context of serious risk and/or suicide.

It is common for very strong feelings to surround any threat or actual incidence of suicide or serious self-injury. For more information see Good Practice in Action 042: *Working with suicidal clients*. Thus, the aim of risk assessment by counsellors is to minimise and manage risk, rather than to guarantee its total elimination. It will be important that counsellors keep accurate records of all actions taken to demonstrate that reasonable care has been taken. However, part of working responsibly with clients with severe mental health difficulties does involve acknowledging that there are limits to what can be done, given the very difficult and complex issues involved. It is recommended that counselling services have access to psychiatric consultation. This may be easier to achieve in universities than in colleges, where access to external mental health support may be restricted to an already stretched CAMHS or Crisis Response Team. Many HE institutions also employ their own mental health teams. In cases where the mental health advisers employed are clinicians (mental health or community psychiatric, or approved social workers), it is likely that they will also be involved in the care of students with severe or enduring mental health issues, or those who are actively suicidal.

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## 3. Working with vulnerable client groups

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### 3.1 Working with young people

Counsellors working in university and college settings frequently work with young people between the ages of 16-18; increasingly however, colleges of further education are admitting students under the age of 16.

Counsellors working with young people of any age need to be aware that there are a number of areas of law that will affect their work. These include practical issues to do with insurance, contracts, employment and provision of services, and practice-based issues including, safeguarding, reporting abuse, suspected terrorism, and confidentiality. BACP has developed a range of *Good Practice in Action Legal Resources* to support members, these can be downloaded at: [www.bacp.co.uk/ethics/newGPG.php](http://www.bacp.co.uk/ethics/newGPG.php).

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## 3.2 Vulnerable adults

Throughout the UK an adult is defined as anyone aged 18 years or older. The legal definitions of 'vulnerable' are more variable but typically regard an adult as vulnerable who is:

- dependent on others for care or support in their everyday life
- at risk of or currently experiencing neglect or abuse
- unable to protect themselves from significant harm or exploitation.

Some, or all, of these elements are present in how the law identifies situations in which adults are regarded as vulnerable and therefore requiring additional protection.

See Good Practice in Action 030: Legal Resource *Safeguarding vulnerable adults*, for further information.

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## 3.3 Safeguarding

As stated within section 3.1 the legal implications of safeguarding legislation for both children and young people under the age of 18, and vulnerable adults are complex. Further information and resources are available, see BACP Good Practice in Action 030 Legal Resource *Safeguarding Vulnerable Adults*, and Good Practice in Action 031 Legal Resource *Safeguarding Children and Young and People* and also Good Practice in Action 042: Fact Sheet: *Working with suicidal clients* and Good Practice in Action 057 Legal Resource: *Suicide within the counselling professions*.

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## 3.4 Reporting abuse

All colleges of further education are obliged to have a policy and procedures for dealing with disclosures of abuse by students under the age of 18 and vulnerable adults. Some universities now admit students below the age of 18 and may need to develop policies accordingly. It is good practice for counselling services to be involved in the drawing up of institutional policies on reporting abuse and to provide professional and consultative support to the institution in dealing with such issues. However, it is not appropriate for the counselling service to be assigned the responsibility for managing reporting concerns about abuse of students under 18 or vulnerable adults, as this could compromise counselling relationships with their clients.

**Policies for reporting abuse should consider:**

- a.** The reporting of abuse can never be an easy decision, nor can policies be written to cover every eventuality. It is important, however, that a service procedure be developed that gives due consideration to:
- the nature of the confidentiality contract with the client and the institution
  - children and young people's rights and child protection and safeguarding legislation (see *Good Practice in Action Legal Resources* for more information and useful disclosure lists see: [www.bacp.co.uk/ethics/newGPG.php](http://www.bacp.co.uk/ethics/newGPG.php))
  - the counsellor's ethical duty of trust and confidentiality to the client. (See the *Ethical Framework for the Counselling Professions* [www.bacp.co.uk/ethics/EFfCP.php](http://www.bacp.co.uk/ethics/EFfCP.php) for further information)
  - the public interest in reporting or preventing a serious crime (there are some occasions where there is a mandatory responsibility to report – e.g. in respect of female genital mutilation (FGM) or suspected radicalisation, see section 3.5)
  - the young person's own wishes and feelings if they are of 'sufficient understanding'
  - whether any children or vulnerable adults, such as siblings may be at current risk, even if the person making the disclosure is no longer at risk.
- b.** In making decisions on child protection issues or reporting to social services, a counselling service and its employing institution have to bear in mind a range of ethical and legal obligations. Further information about these can be found in the BACP *Good Practice in Action Legal Resources*, which can be downloaded at: [www.bacp.co.uk/ethics/newGPG.php](http://www.bacp.co.uk/ethics/newGPG.php).

The overriding principle in all decisions regarding reporting abuse is to make them with the 'best interest of the child (or young person)' in mind. However, this is far from simple, as risk can include risk to the client, but also that of a younger sibling. This is a complicated legal and ethical issue and all counsellors working with this age group are advised to read the literature published on this subject and consult with supervisors, service managers and local agencies.

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## 3.5 Prevent strategy

From 1 July 2015 specific authorities including schools, sixth-form, universities and FE colleges are subject to a duty under section 26 of the Counter Terrorism and Security Act 2015 (CTS) to have 'due regard' to the

need to prevent people from being drawn into terrorism. Prevent Duty Guidance papers for England, Scotland and Wales and specifically for FE and HE institutions (revised and updated in July 2015) can be found at [www.gov.uk/government/publications/prevent-duty-guidance](http://www.gov.uk/government/publications/prevent-duty-guidance).

This statutory guidance makes it clear that there is a requirement for frontline staff to understand the risks and indicators of radicalisation, to prevent people from being drawn into terrorism. Counsellors in colleges and universities must have Prevent training and clear guidance from their institutions in order to understand what is required of them. Clarity on the limits of confidentiality with regards to the Prevent duty must be provided to students who are engaging in counselling.

Counsellors will be aware of the importance of counselling to vulnerable children and young people who are at risk of radicalisation. Supporting the client through the referral process and continuing the relationship will be important in providing an additional protective factor in their lives.

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## 3.6 Managing clients at risk

It is important for counselling services to develop ways to appropriately manage and assess high-risk clients, and to anticipate a service response when a psychiatric or mental health crisis emerges. Some of the college or university population may be seen as more vulnerable and thus owed an enhanced duty of care by the institution. These categories generally include students under the age of 18, students and staff with disabilities or specific needs, and international students who may have little or no access to their usual support systems.

It is important to distinguish between behaviour the institution regards as rebellious, or challenging, and that which is a result of a serious emotional or mental health problem. Some difficulties may not be easily contained by the college or university and could result in threat or damage to self and others. Institutions need to plan a coordinated response for this possibility.

Fitness to practise, and the requirements of external professional bodies, may be additional factors in risk and need assessment. Educational institutions offering courses such as teacher training, nursing, social work, medicine and allied health occupations must incorporate the entry requirements of the relevant professional bodies into their own admission and assessment policies. If individuals from such courses are offered counselling, counsellors must be aware of the implications for duty of care, should questions arise regarding the client's mental health and/or their fitness to practise. There may also be implications for client confidentiality.

Counselling services should resist institutional pressures to accept clients who require other forms of help rather than counselling. Appropriate professional liaison, therefore, needs to be developed and maintained between the counselling service and other services, both internal and external, that may be necessary referral points for some clients.

The following questions may help with the appropriate assessment of a client:

- has the client chosen to come to the counselling service, either through self-referral or has this been agreed through a third party?
- what are the client's personal strengths, resources, and support networks?
- is counselling likely to be of benefit to the client? If so, what type of counselling and is the service able to offer this?
- does the client have realistic expectations of what the counselling service offers?
- does the client have a mental health condition that could entitle him or her to help or support from other agencies within the institution, either in addition to, or instead of counselling?
- is there any previous or current psychiatric or medical history, or other evidence which might contra-indicate counselling?
- are the capacity and resources available able to match the need, for example the expertise and training of the counsellors, limitations of time and space available, proximity to the end of the course, long breaks, etc.?

See Good Practice in Action 044: Fact Sheet: *Ethical decision making in the counselling professions* for more information.

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## 3.7 Client records/storage

Confidentiality of all information kept about a client is of paramount importance (*Ethical Framework for the Counselling Professions*, Commitment 3b).

Safeguards against the loss, misuse or misappropriation of confidential records must be implemented by the institution, the Head of Service, and the counsellor.

Many university and college counselling services now store client statistical data electronically, and some also keep digital records of client sessions. It is good practice that client information stored electronically should be on a secure server and password controlled, with access restricted to those staff who have a designated need to use that particular part of the file. There are sometimes difficulties for counsellors, who are committed to confidentiality as outlined in the *Ethical Framework for the Counselling Professions* if they work within support services departments who hold a different professional ethic in respect of confidentiality, and want all their staff to be able access all information about users of support services.

The counselling service, therefore, needs to agree clear procedures for client record keeping, including statistical information, cover sheets, process notes and any other form of sensitive data, for example audio or video recordings of counselling sessions, or diagrams and drawings generated during counselling sessions. Access to such data must be in accordance with legal requirements and ethical principles. This is a complex area and services should ensure they are more fully informed by accessing the excellent literature available, detailed in the section on Further Resources.

In deciding what records are to be kept, counselling services must balance their duty of care to their clients with the requirements of current data protection legislation. Services usually have their own in-house policy on record keeping and data access requests, given the particularly sensitive nature of counselling work, but this must also comply with the institution's policies on data protection. These apply to any identifiable record, whether hand or computer generated. Such a policy must be made public and clients informed of it. Under the Data Protection Act 1998 (DPA) a client must give 'informed consent' to the collection and storage of 'sensitive information' about themselves. Obtaining general consent about holding data at the time of enrolment on a course or at the start of employment is not sufficiently explicit to cover engagement with the institution's counselling service. See the Information Commissioner's Office (ICO) website for further information at: <https://ico.org.uk/for-organisations/guide-to-data-protection/>.

Because these issues are complex, a way has to be found of ensuring that a client has given his or her informed consent to the keeping of records. Obtaining written consent is not a requirement of the DPA. However, the Act does require counselling services to obtain a client's explicit consent for processing sensitive data and to make acceptance by the client of the service's record-keeping practices, part of the contract with the service.

There are different ways of addressing this obligation. Services will need to decide what best practice is for themselves and their clients. Many counselling services ask clients for their written consent at the time of first contact, during the services' contracting process. This can be useful as a way of registering that a discussion about record keeping has taken place and that the client's signature indicates his or her agreement. Contact with an external agency might also require written consent from the client in order to proceed.

Some services do not require their clients' signatures as policy, although explicit verbal consent is still obtained and a record is kept of when this was done. Arguments against obtaining written consent include concerns about the shelf life of such agreements, or that distressed clients may too readily sign a form without fully engaging in a discussion about record keeping and confidentiality. Whatever procedure is adopted, counsellors must remain aware that informed consent is a process. It begins at the first point of contact and continues throughout the counselling relationship. Because informed consent is negotiated on an ongoing basis, its validity

requires a continual assessment and re-assessment of the client's wishes. Obtaining consent is thus not simply a legal or administrative response. It also needs to take into account the changing and evolving nature of the counselling and the counselling relationship. *Good Practice in Action* resources are being developed to support practitioners in making the contract these can be downloaded at: <http://www.bacp.co.uk/ethics/newGPG.php>

Please note that a new General Data Protection Regulation (GDPR) will come into force in May 2018, and that this is likely to impact on counselling practice. <https://ico.org.uk/for-organisations/data-protection-reform/guidance-what-to-expect-and-when/>

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## 3.8 Access to records

Clients may have the right of access to records kept about their counselling sessions. Service policies on record keeping should detail how requests for access under the DPA will be managed, taking into consideration the institution's policy on access to personal records under the DPA. See the ICO website for more information at: <https://ico.org.uk/for-organisations/guide-to-data-protection/> and above changes to the DPA.

Where a counsellor is employed by an organisation such as a college or university, session notes are usually considered the property of the service, not the counsellor, and, as such, any session notes could be recovered by a court order. The guardianship, retention and disposal of session notes need to be an explicit part of the service's policy on record keeping, and overtly included in the services' contracting process with counsellors and also in the contracting process counsellors make with their clients.

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## 3.9 Retention of records

In making decisions as to how long to retain client records, services should take account of the sometimes conflicting considerations listed below:

- the Data Protection Act 1998, which states that sensitive data should not be kept for longer than is necessary
- the policy of the institution
- the ability of the service to store confidential records safely and securely over time
- the likelihood that a client's records could be needed in the future, for example, for a criminal case or civil suit, in a claim for compensation, or for an internal university or college procedure such as an academic appeal or formal complaint. The length of time needed to retain records in such scenarios is extremely difficult to predict.

Each service will need to decide a realistic timescale that can best accommodate these considerations and what best practice would be in their context. An alternative position would be to shred all session notes, keeping minimal factual information for a limited amount of time. What is important is that a service has a stated policy on the length of time notes are retained, that clients are aware of it, and that this policy is adhered to. See the ICO guidance for more information: <https://ico.org.uk/for-organisations/guide-to-data-protection/> and above changes to the DPA.

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## 4 Staffing

The staffing requirements of a counselling service will be determined by the particular needs and resources of the institution, including its geographical layout and location. Counselling provision in higher and further education is diverse. It ranges from single counsellors working on their own to large teams, which may include a Head of Service, administrative staff and full, part-time and trainee counsellors providing a variety of therapeutic approaches. Traditionally, one full-time counsellor to 3,000 students/staff has been seen as minimum provision, although this may need to be revised according to the particular population the service covers and the percentage uptake. This is particularly salient as access rates to counselling services have been rising steadily, or even very sharply in some institutions (see Mair 2014). In recent years, many services have experienced significant increases in demand, but staffing has not necessarily increased accordingly, or may have been reduced due to funding restraints. As a result, many services currently have a ratio that falls well short of the one above. Given the financial climate in some institutions, it is not always realistic to increase this ratio. However, if student or staff numbers increase significantly in an institution, a corresponding increase in investment in support services such as counselling would be good practice.

Some counselling posts have been changed and replaced with jobs carrying different titles, for example, wellbeing consultants or mental health advisers. Such provision can be useful in institutions. However, this does not replace the need for fully trained and qualified counsellors.

BACP is developing a competency framework and curriculum for counsellors working in university and college settings, which will enable services to match potential applicant skills with those seen as necessary for working within the sector. When available, these will be available on the BACP Ethics and Standards' webpage: <http://www.bacp.co.uk/ethics/EFfCP.php>.

A staff counselling service can be structured in various ways: as part of the service for students, using either the same counsellors or designated staff counsellors; as part of a service based elsewhere in the institution, for example, human resources or occupational health; as part of a service contract with a company providing an employee assistance programme,

or with counsellors working in private practice. The particular model adopted is usually determined by local factors and how the need for staff counselling has been assessed. An embedded counselling service has the advantage of familiarity with the structure, procedures and culture of the institution, the potential to create good working relationships with other departments and contribute to institutional policy making and staff training. Staff counselling services need to be accessible for employees working in all roles within the institution and for those whose work continues outside the usual office hours and term dates.

Student counselling provision needs to meet the needs of all potential users: international and postgraduate students, students living locally, attending part-time or evening courses, and those who are away from the institution on work experience or studying abroad programmes.

Thought also needs to be given to how the counsellors within the institution can access equivalent provision externally, should they wish to.

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## **4.1 Management of the counselling service**

An experienced counsellor, with management experience, is the ideal person to lead the counselling service. S/he is likely to be in the best position to undertake management responsibilities, both in relation to the professional aspects of the service and in its day-to-day running and have an important role in managing the interface between the client-focused work of the counselling service and the wider institution.

However, some services have managers who come from a non-counselling background. Where the service is managed by someone other than a counsellor, good practice would be to designate one of the counsellors to act as Senior or Lead Counsellor. This person should be recognised as holding clinical responsibility for the counselling undertaken within the institution. For BACP Service Accreditation this is a requirement, (see: <http://www.bacp.co.uk/accreditation/COURSE%20ACCREDITATION%20SCHEME/index.php> for more information about service accreditation), demonstrating that is a good practice standard to aspire to, even for non-accredited services.

If a senior or lead counsellor is appointed, they will need scheduled time for co-ordinating the policies and procedures of the service. Clear and supportive line management in this situation is particularly important.

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## **4.2 Administrative support**

Good administrative support is vital for the effective functioning of the service. It is desirable to have a designated person in this position. Where

this is not possible, thought needs to be given to how clients make their first approach to the service and how subsequent communications will be managed. It is good practice to protect counselling sessions from the threat of interruption, so a system is required to enable clients to apply to use the counselling service when a counsellor is not immediately available to respond to their enquiry. Administrative support is also needed for certain functions such as managing a waiting list, where it would not make sense to divert precious (and more expensive) professional time that is best used for counselling work.

A designated administrator provides the first point of contact for students, members of staff, concerned relatives, academic tutors etc. S/he must have the ability to work within tight boundaries where the maintenance of confidentiality is paramount, and to be experienced and confident in dealing with people in distress. This is a demanding role and thought should be given to the support and training needs of those fulfilling the post (Rowland and Aster, 2012). Ideally, receptionists who work with clients of the counselling service would not work in the institution in another role or context, as this dual role could lead to knowledge gained about the client in one context causing bias in decisions made about them in another setting. Similarly, it is best to avoid employing students from within the institution as part-time receptionists, or give work experience to those students in its counselling service to avoid the potential for confidentiality breaches, and undermining confidence in the service.

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## 4.3 Appointment of counsellors

It is desirable for the Head of the Counselling Service, or the Senior/Lead Counsellor to be on the appointing panel for all members of staff working within the service. If this is not possible, at least one qualified counsellor/psychotherapist, familiar with the work of the service, should be on the panel when interviewing for counselling posts. When interviewing for a Head of Service post, appointing panels usually include an experienced Head of Service or counsellor from a comparable college or university service. In order to maintain professional standards, it is important that counsellors have the necessary competency to work in this field. BACP is in the process of publishing a competency framework, which should enable services to ensure the counsellors appointed have the necessary skills for the work. (See <http://www.bacp.co.uk/ethics/EFfCP.php> for more information.) It is good practice and increasingly the norm for DBS (Disclosure and Barring Service) checks to be carried out and an enhanced check is recommended for those working as counsellors. This is essential when working with clients under the age of 18 or with vulnerable adults. Information is available at <https://www.gov.uk/disclosure-barring-service-check/overview>. The site has links to the provisions made in Scotland and Northern Ireland. There is also information on barred list checks for certain specific roles (DBS Adult and Child workforce).

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## 4.4 Salary structures

This is an area where it is difficult to be definitive. Salaries will be influenced by differing qualifications, the experience required for the post, the institution's geographical location and its employment policies. The BACP UC Annual Survey can provide a useful point of reference and comparison. The full results of this survey are available to participating institutions free of charge and a summary of the findings is published in the UC journal annually. See <http://bacpuc.org.uk/journal>.

The scale chosen should be carefully considered so that salary grades and conditions of service reflect the professional nature of counselling, the qualifications of the counsellor and the responsibilities undertaken. Recognition should be given for a management or co-ordinating role, with the salary of the post-holder being commensurate with his/her management and professional responsibilities. It is good practice for part-time counsellors to be paid at a rate pro rata to the salaries of full-time counsellors if they are undertaking equivalent work.

(See ACAS for more information on pay. This can be accessed at: <http://www.acas.org.uk/index.aspx?articleid=1366>.)

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## 4.5 Contractual issues

On its website, <http://www.acas.org.uk/index.aspx?articleid=1577> ACAS states that:

*It is best to put a contract in writing – it saves a lot of potential misunderstanding further down the line. In Acas' experience simple misunderstandings over what is or what is not in a contract are one of the main causes of employment tribunal claims.*

It is therefore good practice for institutions to provide clear contracts of employment as well as job descriptions that accurately reflect the role of the counsellor. (For more information on employment contracts see: <http://www.acas.org.uk/index.aspx?articleid=1577>.)

In the event of a conflict between the institution and the counsellor, the counsellor is advised to be clear as to what support s/he can expect from their professional association (for example, BACP), from trade unions (for example, The University and College Union (UCU) and UNISON) and from his/her own institution. For example, many institutions offer a mediation service and most have a complaints' procedure.

It is expected that the institution will provide insurance that covers both the general and particular needs of the counselling service, e.g. professional indemnity cover.

The *Ethical Framework for the Counselling Professions* commits members to be 'covered by adequate insurance when providing services directly

or indirectly to the public' (Good Practice, Point 19), so BACP UC recommends that counsellors check carefully with the institution to ensure that this is so.

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## 4.6 Part-time and temporary counsellors

Where part-time counsellors are members of the team, it is recommended that they are given opportunities to contribute to all aspects of the service, including attending staff meetings, policy discussions and strategic planning. It is advised that such counsellors are employed for at least one day a week to enable them to feel part of their immediate team and learn about the culture of the wider organisation. Contracts should be in line with current employment law. This is particularly important in the employment of sessional or locum counsellors. (See ACAS for more information at: <http://www.acas.org.uk/index.aspx?articleid=3603>.)

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## 4.7 Lone counsellors

There are occasions when a counsellor is employed as the sole counsellor in the institution. This is common for smaller institutions or in settings where resources are limited. Working as a lone counsellor can be rewarding, but also challenging at times. Especially if demand is high, or in a crisis situation where there is no other counselling colleague to consult.

Wheeler and Hewitt (2004) research on *Counselling in higher education: the experience of lone counsellors*, highlights the challenges faced by the lone counsellor. They state that the 'significance of the counsellor's involvement in the organisation was not to be underestimated'. Therefore, for lone counsellors, a time allowance needs to be made for the management and development of the counselling service and provision of additional professional support for the counsellor.

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## 4.8 Trainee counsellors

In recent years, the demand for counselling training placements has increased and many FE and HE counselling services offer them. There are positive reasons for the provision of training placements:

- established counselling services can be an ideal environment for a trainee, offering a firm structure, the potential for mentoring or supervision and a regular supply of clients. Due to the need for support and consultation, and the management of risk, it is advised that trainees should not be the only counsellors working in the service.

- trainees add a welcome diversity to services, often bringing a fresh perspective and valuable experience from outside the FE/HE sector.
- there is an opportunity to aid the professional development of trainees and to provide access to university or college counselling as a career opportunity.

However, providing placements for trainee counsellors can raise complex ethical issues:

- inappropriate pressure may be exerted on college, or university counselling services, to take trainees in order to support counselling courses offered elsewhere in the institution.
- complex boundary issues can arise when trainees from the institution's counselling course take up placements in the institution's counselling service. The situation becomes even more complex if course tutors also have some involvement in the counselling service, or if the trainee has another role in the institution.
- many counselling courses require their trainees to make audio or video recordings (with the client's permission) of some of the sessions they conduct while on placement for assessment purposes.

Senior managers may mistakenly assume that unpaid trainees can carry out the same work as qualified and experienced counsellors, thereby increasing the capacity of the service without expenditure. Further *Good Practice in Action* resources will be available towards the end of 2017 in respect of trainee placements. See [https://www.bacp.co.uk/ethical\\_framework/newGPG.php](https://www.bacp.co.uk/ethical_framework/newGPG.php) for more information.

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## 4.9 Voluntary counsellors

Some services offer opportunities to counsellors who have completed their basic training but are not yet eligible to apply for BACP accreditation and who want to develop their practice. Such counsellors are sometimes called associate or honorary counsellors, or interns. As with other part-time counsellors, it is good practice to enable volunteers to attend some team meetings and contribute to the wider work of the service, so that their particular skills and perspectives are utilised and their learning extends beyond purely engaging in client work. Appropriate arrangements should be made for volunteers' clinical supervision and, if possible, out-of-pocket expenses. See ACAS website for more information: <http://www.acas.org.uk/index.aspx?articleid=3603>.

It is important that the employment of trained voluntary counsellors is additional to a well-established core of permanent staff. Volunteers should not be put in the position of providing the bulk of the counselling work. (See BACP Service Accreditation criteria at: <https://www.bacp.co.uk/accreditation/Accredited%20Services%20Directory/>.)

## **Recommendations for trainee and voluntary counsellors**

- before taking on trainee or voluntary counsellors, it is important that counselling services are well established and adequately staffed. New services and those going through restructuring or re-organisation may not be able to provide the necessary stability, monitoring and support
- the head of the counselling service is normally responsible for the counselling provision in the institution and therefore accountable to his/her line manager for the quality of any work undertaken by trainees and volunteers
- it is good practice to allocate trainees and volunteers a designated, experienced mentor, holding a substantial post within the service, to provide a full induction and to support and monitor their practice on an ongoing basis
- consideration needs to be paid to the appropriate matching of clients with the level of expertise and experience of the trainee or voluntary counsellor. The responsibility for assessment and allocation of clients normally rests with the Head of the Counselling Service
- the caseloads of trainee and volunteer counsellors should be commensurate with their levels of training and experience. It is recommended that inexperienced trainees undertake no more than three contact hours per week, and that the work of such counsellors forms no more than 30% of the total work of the service. (BACP Counselling Service Accreditation)
- it is important that services have regular, formal links with training providers. Steps should be taken to ensure that a trainee's experience on placement is complementary to their academic and personal learning on the course
- there should be an explicit three-way contract between the training course, the trainee and the counselling service, making clear where responsibilities lie. This contract needs to address working structures and the supervision of caseloads
- written contracts for volunteers no longer in training can be useful, outlining what is expected of them and what the institution offers in return. Institutions often have their own policies about employing interns and counselling services' managers are advised to check this with their human resource department
- counselling services need to check that the insurance cover provided by the institution includes work undertaken by trainees and/or volunteers. If not they will need to arrange their own cover.

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## 4.10 Working in multi-disciplinary teams

Many counsellors in universities and colleges work as part of a multi-disciplinary team, rather than within a discrete counselling service. Such teams can offer a rich and responsive service for their clients but managers need to be aware of the challenges of establishing working practices and systems that practitioners from a range of professional backgrounds, governed by differing codes of ethics and practice, can all subscribe to. Assessment and referral procedures, record keeping and information sharing principles and a mutual understanding of the working practices and cultures of all colleagues in the team need to be developed and monitored.

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# 5 Working practices

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## 5.1 Equality, diversity and inclusion (EDI)

Acknowledging other cultures' ways of seeing the world is given more emphasis in the *Ethical Framework for the Counselling Professions*. BACP members are now required to demonstrate the personal moral quality of respect by 'showing appropriate esteem for people and their understanding of themselves' (Personal Moral Quality, Point 12). Also, members must:

*take the law concerning equality, diversity and inclusion into careful consideration and to strive for a higher standard than the legal minimum.* (Good Practice, Point 23)

Colleges and universities have diverse populations. The impact of widening participation and the globalisation of higher education have led to increased numbers of students from diverse social and ethnic backgrounds, as well as those with a range of disabilities. Inequality and discrimination can operate in direct and indirect ways, and services have a responsibility to monitor all aspects of their work to ensure that provision is accessible to all. To assist with this, services need to be fully aware of institutional policies in this area and of its own responsibilities under related legislation, such as the Equality Act 2010 which legally protects people from discrimination in the workplace and in wider society. (See the government guidance at: <https://www.gov.uk/guidance/equality-act-2010-guidance> for more information.)

Counselling services should seek to update themselves on current issues and thinking in this area, especially in relation to what is described by the Equality Act as 'protected characteristics', these include ensuring equality,

diversity and inclusion irrespective of: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation, in both their organisational and practice-based activities. A number of *Good Practice in Action* resources in respect of EDI will be published in 2018 including 062 Commonly Asked Questions: *Equality, Diversity and Inclusion*, and 080 Fact Sheet: *Equality, Diversity and Inclusion: Reasonable Adjustment*.

Staff training is needed to ensure that counsellors, administrators and receptionists are up to date on the relevant legislation, and services should ensure that this is embedded in their practice. Counsellors have a duty to work with clients in an open-minded way and ensure their knowledge of clients' backgrounds, identities, values and lifestyles is informed and accurate.

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## 5.2 Contact hours/caseload management

Tarren (2016) writes that:

*Working as a therapist in university counselling services is particularly challenging: demand for counselling continues to increase yet resources are often limited.* (Page 197)

It is essential that counsellors maintain high professional standards in their clinical practice in order to best support vulnerable clients. Given the emotionally challenging nature of this work, it is important to review how much clinical work counsellors should be engaged in per day. Clinical work in this context includes one-to-one counselling, groupwork, workshops, drop-in sessions, the supervision of associate or trainee counsellors, attending casework meetings and any administration directly connected with their client work.

The *Ethical Framework* commits members to working to professional standards by 'ensuring that our wellbeing is sufficient to sustain the quality of the work'. Yet, an informal survey of 26 universities on HUCS mailbase (Percy, 2014, unpublished) showed that the five-hour (clinical work) per day was the model that was most commonly used in practice. When determining an appropriate weekly caseload for a counsellor however, several factors need to be taken into account including:

- the degree of managerial, administrative and reception support available to the counsellor
- the roles and responsibilities the counsellor holds in the counselling service and the balance between workload during term and out of term
- the percentage of 'no shows' or cancellations experienced
- the training and experience of the counsellor

- the severity of the issues being presented (one or two services use a 'case loading' model which gives weighting to severity, complexity and risk in relation to the capacity of each counsellor)
- the level of demand on the service.

Surveying Heads of University Counselling Services, Mair (2016) shows how much demand for counselling has increased over a 10-year period (Page 14).

Some counselling services experience high demand all the year round and a low rate of missed sessions. This is often the experience of staff counselling services. Counsellors working in such situations are unlikely to be able to function effectively if their caseload is consistently too high, and will not be able to fulfil their commitment to working to professional standards.

When determining counsellors' caseloads, consideration needs to be given to the time required for follow-up work to counselling sessions such as administration; liaison with GP and community mental health providers, or with other support services in the institution; reading and research related to clients' presenting issues; the consultative support and professional development required by BACP's *Ethical Framework*. If counsellors deliver groupwork or staff training, preparation time for this needs to be taken into account. In order for a counselling service to make a full contribution to the institution, time needs to be allocated for discussion on policy matters and for building relationships with other relevant services.

In order to carry out their additional duties, the Head of Service or Senior Counsellor should have fewer client contact hours, the exact proportion determined by the range of responsibilities held.

Where counsellors are employed on a part-time basis, the balance between clinical work and other responsibilities needs to be maintained in consultation with the Head of Service or Senior Counsellor.

Where counsellors hold additional roles in the institution, the hours set aside for counselling should be organised in such a way that continuity of client work is not compromised. Arrangements need to be in place so that students and staff are not prevented from having access to counselling because of their contact with the counsellor in another role.

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## 5.3 Self-care

Doing predominantly brief work can be very demanding, even for very experienced counsellors, and it is important for counsellors and counselling service managers to bear this in mind and seek to alleviate the impact on counsellors if counsellor burn-out is to be avoided. Good caseload management is important as is adequate supervision, time for professional contact with colleagues and managers, as well as access to

good training and staff development opportunities. The *Ethical Framework for the Counselling Professions* commits members to work to professional standards by: 'ensuring that our wellbeing is sufficient to sustain the quality of the work' (Commitment 2d) and that personal moral qualities of resilience are needed to ensure we have 'the capacity to work with the client's concerns without being personally diminished' (Personal Moral Qualities 12). Members are also committed to 'care of self as a practitioner' in that:

*We will take responsibility for our own wellbeing as essential to sustaining good practice by:*

- a. *taking precautions to protect our own physical safety*
- b. *monitoring our own psychological and physical health*
- c. *seeking professional support and services as the need arises*
- d. *keeping a healthy balance between our work and other aspects of life*  
(*Ethical Framework, Good Practice, Point 75*)

Further *Good Practice in Action* resources in respect of self-care and fitness to practise will be available early 2018 at: [http://www.bacp.co.uk/ethical\\_framework/newGPG.php](http://www.bacp.co.uk/ethical_framework/newGPG.php)

## 5.4 Managing waiting lists

Demand for counselling has increased greatly within universities and colleges since the last guidance documents were produced (see Mair 2016, page 14). As resources have not kept pace in some institutions, this has meant an increase in waiting times for appointments and some services having waiting lists. The BACP UC annual survey 2013/14 (Broglia 2015) found the following most likely waiting times:

Type of service	Most likely wait for an initial session	Most likely wait for ongoing sessions
<b>FE: Students</b>	8 days	10 days
<b>FE: Staff</b>	6 days	8 days
<b>HE: Students</b>	6 days	14 days
<b>HE: Staff</b>	5 days	12 days

An important consideration is having a model that best fits the needs of the student population. To give two examples: a) having a certain number of assessment appointments available each week so students can be seen relatively quickly and then put on a waiting list for ongoing sessions, or signposted to other options such as workshops, groups or self-help as needed, or b) having students wait longer for an initial session but then offering continuity with the same counsellor.

Model	Advantages	Disadvantages
<b>Early assessment/ initial appointment</b>	<ul style="list-style-type: none"> <li>• Early intervention</li> <li>• May reduce drop out</li> <li>• May be a sufficient intervention or signpost to other options</li> </ul>	<ul style="list-style-type: none"> <li>• Continuity with the same counsellor may not be possible if ongoing sessions are needed</li> </ul>
<b>Ongoing from outset</b>	<ul style="list-style-type: none"> <li>• Allocated and stay with the same counsellor</li> <li>• Useful if ongoing counselling is the most common outcome from assessment, and/or there are a lack of other options</li> </ul>	<ul style="list-style-type: none"> <li>• Students may not be happy with waiting longer and could drop out</li> <li>• Risk needs to be considered with some students being prioritised if necessary or identified and signposted to their GP, mental health team etc.</li> </ul>

Many services have introduced a six-session limit, or even fewer. However, as demand and waits have increased, so services have found the need to be creative to effectively manage their waiting lists, for example, having a certain percentage of appointments reserved each week for assessments or urgent appointments. Other services have also introduced brief intervention models offering therapeutic consultations followed by a menu of options.

HUCS produced the following checklist of ideas at a meeting in 2014:

- funds for sessional counsellors to cover demand at peak times
- educating senior managers about waiting times, which tend to be less in this sector than for NHS counselling
- institutions understanding the nature of working with vulnerable students
- adopting brief models (e.g. a single one-and-a-half hour session plus a shorter follow up) at busy times
- moving to a more psycho-educational role – helping clients develop understanding of emotions and learn self-regulation techniques
- more integration with mental health advisers and mentors
- using brief interventions and range of options (exercise plans, mindfulness workshops, self-help material)

- focus on developing students' resilience, managing expectations: adopting a psycho-educational approach as the first step in the range of options offered.

See BACP UC webpage for details of forthcoming meetings at: <http://bacpuc.org.uk/com-hucs>

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## 5.5 Managing multiple sites

It is important that counselling services in universities or colleges with multiple sites think carefully about service delivery issues. Where a counselling service is delivered on a number of sites, it is important to ensure that each site is adequately resourced and supported, that appropriate accommodation is provided and that the health and safety of counsellors and clients in all venues are taken into consideration. Issues around location of rooms, reception of clients, waiting areas and possible lone working should be carefully considered.

In order to ensure team cohesion and consistent practice, there need to be opportunities for counsellors working away from the main site to have contact with the rest of the team on a regular basis and clear procedures regarding consultation with managers during their day-to-day work on another campus.

Compiling statistics on usage and any marked differences in the issues clients present on certain sites compared with others can provide useful information, for example, to help make the case for increased resources, or when needing to defend provision on particular sites. It may also be a source of useful feedback to academic and administrative staff regarding the experience of students on their site.

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## 5.6 Counselling supervision

This is sometimes referred to as consultative support and is a requirement for all BACP members who are practitioners.

In view of the demanding nature of counselling work, it is vital for safe practice that there is designated time for the review of clinical work. Counsellors must monitor and develop their professional work through regular counselling supervision with an appropriately trained professional who, ideally, is external to the institution. It is, however, advantageous if the supervisor has an understanding of the institutional aspects of the counsellor's work. The amount of supervision will depend on the level of experience of the counsellor; the number of clients seen per week; the severity of the clients presenting issues and the type of contracts offered, for example, short-term contracts may require more frequent supervision. The minimum requirement for BACP accredited counsellors and those working towards accreditation is 1.5 hours of supervision per month. More

supervision may be required if the counsellor has a complex caseload and/or the supervision is conducted in group form.

(See BACP's *Ethical Framework for the Counselling Professions*, Good Practice points 5-61 and the Supervision topic pathway of *Good Practice in Action* resources, which can be found at: <http://www.bacp.co.uk/ethics/newGPG.php#jump-supervision>. Counselling services need to contract carefully with their external supervisors see Good Practice in Action 009: *Choosing a Supervisor for your Service* which includes further information.

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## 5.7 Training and CPD

To fulfil the requirements of the *Ethical Framework for the Counselling Professions* and 'keep our skills and knowledge up to date' (Commitment 2b) and the conditions for the BACP Register (see <http://www.bacpregister.org.uk> for more information) and Accreditation and Re-accreditation schemes (<http://www.bacp.co.uk/accreditation/>), counsellors need to participate in ongoing professional development and this could include attendance at training courses, conferences, regional networks, etc. Colleges and universities should be prepared to allow reasonable time and financial support for such activities to ensure that counsellors update their knowledge and training on a regular basis.

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## 5.8 Responding to the 24/7 culture

We live in an age where technology is growing at a very fast pace and where there is a growing 24/7 culture, with some campus libraries and other facilities staying open all night.

Some college and university counselling services offer extended opening hours such as evening opening. It is good practice for services offering this to ensure that they have enough staff to cover late openings, so that counsellors are not working alone or in unsafe situations when most other staff have gone home.

Clients often contact university and college services out of hours, so it is important to have clear policies and statements on, answer phones, emails and all literature regarding the availability of the counselling service. It is also good practice to signpost potential clients to any available emergency/out-of-hours services and self-help information available.

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## 5.9 Use of social media

The majority of clients using university and college counselling services are very adept in their use of social media, and many services have tapped into this, embracing new ways of communicating with them, such as having

a presence on Twitter and/or Facebook and hosting chatrooms for certain groups. Counselling services often signpost clients to self-help websites and apps, and even develop their own online/digital resources. Managers need to ensure the technologies they use are secure and that resources they signpost clients to are up to date and appropriate. Counsellors need to be careful about their own use of social media, not compromising their own professional integrity or inadvertently breaching a client's confidentiality.

For more information see Good Practice in Action 033: *Commonly Asked Questions about Social Media* for more information (<http://www.bacp.co.uk/ethics/newGPG.php#jump-online>).

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## 5.10 Working online

Working online via video, or text communication is now offered by many institutions and, as with face-to-face counselling, issues such as the counsellor's competency to undertake this kind of work, boundaries, supervision, confidentiality and contracting have to be addressed, plus issues in relation to the kind of online platform used. Online working can be advantageous for students and staff who are away from the institution, e.g. involved in distance learning, or participating in a study abroad, an exchange or work placement scheme. Part-time students and staff sometimes have difficulty accessing face-to-face services due to work and family commitments, or the service being unavailable out of office hours. They may welcome an online facility, as might clients who are disabled, ill or unable to visit the counselling service for other reasons. Services need to decide whether their online service is only for clients who are physically unable to attend sessions in person, or whether it is offered as a choice to all clients eligible to use the counselling service. For more information about therapeutic work online see Good Practice Resource 047: *Working Online*, which can be downloaded at: <http://www.bacp.co.uk/ethics/newGPG.php#jump-online>

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## 5.11 Counsellors with additional roles in the institution

Sometimes counsellors have other roles in the institution, such as welfare, advisory or teaching. This can be problematic where there is no dedicated counselling space, or no other counsellor to refer a client to in circumstances where there could be a conflict of roles and boundaries. The counselling service and the institution need to have clearly agreed procedures for the management of different roles. This is essential, particularly in terms of responding to challenges regarding confidentiality, the therapeutic relationship and its boundaries. Where the roles can be kept separate, the counsellor is clear about boundaries and the institution values and respects counselling, it may be possible to manage these dual roles and they can in some cases be experienced as positive. Certain situations should be avoided though, for example, it is not appropriate

for a counsellor to be in a position where they award academic marks to potential or actual clients, or provide them with money via hardship funds.

As discussed earlier, for those counsellors offering staff counselling, dual relationships are almost inevitable and should be handled ethically and their implications monitored regularly in supervision. Further information about dual relationships can be found in the *Ethical Framework for the Counselling Professions*, where members are committed to building appropriate relationships and establishing boundaries ensuring that:

- a. *these boundaries are consistent with the aims of working together and beneficial to the client*
- b. *any dual or multiple relationships will be avoided where the risks of harm to the client outweigh any benefits to the client*
- c. *reasonable care is taken to separate and maintain a distinction between our personal and professional presence on social media where this could result in harmful dual relationships with clients*
- d. *the impact of any dual or multiple relationships will be periodically reviewed in supervision and discussed with clients when appropriate. They may also be discussed with any colleagues or managers in order to enhance the integrity of the work being undertaken (Good Practice, point 33).*

See also: Good Practice in Action 077: *Fact Sheet Resource: Dual roles in the counselling professions.*

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## 5.12 Arrangements during vacation

Many universities and some colleges now offer courses, which continue over the summer, so students remain on site. Even if students are not on campus during vacations, many staff in universities and colleges work all the year round, so counselling services need to assess likely demand during holiday periods and plan accordingly. Many services operate a reduced service during vacations, with resources being concentrated towards times of higher demand.

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## 5.13 Seeing ex-clients in private practice

As clients sometimes ask whether they can continue seeing their university or college counsellor in their private practice. Services need to develop clear policies on this, as the dynamics involved in transferring the work from an institutional setting to the counsellor's private practice, which might be conducted at his/her home, are complex and BACP members are

committed by the *Ethical Framework for the Counselling Professions* not to: 'exploit or abuse our clients in any way: financially, emotionally, physically, sexually or spiritually' (Good Practice, point 36).

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## 5.14 Accompanying clients to appointments off campus

It is not usually part of a counsellor's role to work with clients outside the counselling session, such as accompanying them to appointments relating to their health, immigration status or academic work; this includes providing transport for them within counsellor's personal vehicles. It may be appropriate for workers in other roles in the institution to assist in this way though so adequate signposting is needed.

It is good practice for counselling services to have clear policies on responding to these kind of requests and any other emergencies and crises (e.g. where a student or member of staff needs urgent psychiatric assessment). It is always a good idea when formulating policies to ensure any off-site activities would be covered both by policies and insurance.

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## 5.15 Evaluation and monitoring

It would seem good practice, to develop and implement quality assurance systems in order to monitor and improve service delivery. Review procedures help services gather evidence to demonstrate that the support provided is relevant and that the work takes into account any changes in the needs of students and staff.

Formal and regular evaluation of the service by users and by staff employed in other related roles in the institution constitute good practice, and findings should be made accessible. The *Ethical Framework for the Counselling Professions* commits members to accountability and candour for the services they offer, stating that:

*'we will monitor how clients experience our work together and the effects of the work with them in ways appropriate to the type of service being offered'* (Good Practice, point 49).

Evaluation activities can include direct feedback from users of the service, clinical outcome evaluation tools such as CORE (see [http://www.coreims.co.uk/About\\_Measurement\\_CORE\\_Tools.html](http://www.coreims.co.uk/About_Measurement_CORE_Tools.html)) for more information, regular staff appraisals, working towards BACP Service Accreditation, and formal reviews of the service as a whole. (See *Ethical Framework*, page 10:49.)

These activities should take place alongside an ongoing focus within the service on accountability, ethical and legal responsibility, professional accreditation, and continuing commitment to relevant institutional issues.

Monitoring usage of the service with regard to: gender, ethnicity, disability and sexual orientation (if declared) provides information as to the degree of coverage of these within the population it serves. It may be that there are barriers to accessing the service for certain groups and counselling services should seek to address these.

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## 5.16 Complaints' procedures

Counsellors are encouraged to contract carefully and build collaborative relationships with their clients, (see the *Ethical Framework*, Commitment 3c and d, and Good Practice points 31 and 32 for more information). This should minimise the chances of misunderstandings arising, but in the event that clients are unhappy with the service they have received, most counselling services have a complaints' procedure.

Information about this should be clear and easily accessible to clients in written and/or electronic format, and be mentioned in service publicity.

As clients are often hesitant to complain, every effort should be made to ensure a prompt, professional and transparent response is given. Counselling services should also make clients aware of the BACP Professional Conduct Procedure. (More information about this, and useful downloadable documents about making a complaint and what this entails can be found at: [https://www.bacp.co.uk/prof\\_conduct/Downloadable\\_Documents.php](https://www.bacp.co.uk/prof_conduct/Downloadable_Documents.php).)

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## 6. Location and accommodation

The location of the counselling service within the institution needs to be considered carefully. An easily accessible and clearly signposted location is desirable, bearing in mind the need 'to respect clients' privacy and dignity' (*Ethical Framework*, Good Practice, point 21). This should be balanced with the need for discretion for students and staff who might hesitate to approach the service if the location were too public.

The following are suggested as minimum location requirements for a service:

- the position of the service should be accessible, yet discreet. If either of these conditions are compromised, the service should take active steps to minimise the effect

- reception areas should be located and designed in a way that recognises clients' needs for privacy
- waiting areas should be discreet and appropriately furnished. Where they are situated near to counselling rooms, clients waiting for appointments should not be able to hear conversations taking place inside
- counselling rooms should be of a sufficient size to allow a comfortable distance between counsellor and client. Ideally, they should be in a quiet location, adequately ventilated and lit, with access to daylight via an openable window, and be private and soundproof. Furniture and decoration should create an atmosphere conducive to counselling. Room changes can disrupt the counselling process and are best kept to a minimum. It is important that counselling sessions are safe from the threat of interruption, so that clients will not be overheard or recognised by third parties
- security issues must be addressed to ensure adequate physical safety for clients and service staff. Counselling rooms should be fitted with panic buttons, or other means identified of alerting security staff in an emergency. Appropriate safety training should be given and guidelines drawn up for responding to potentially dangerous situations. A lone-working policy should also be in place
- accessibility issues need to be addressed for clients who may have diverse needs (e.g. those who have a disability of any kind)
- counsellors who are required to work in open-plan office areas need to have access to private space for making confidential phone calls and consulting with colleagues.

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## 7. Budgetary provision

Counselling service budgets should cover the following:

- salaries
- counselling supervision within paid contracted hours for each member of the counselling staff. Voluntary counsellors and trainees may have different arrangements
- ongoing professional development, including travel costs to attend courses and conferences
- books, journals and subscriptions relevant to the work

- costs associated with administration and maintenance, e.g. telephone, IT equipment, furniture, heating, lighting, insurance, etc.

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## **8. Summary of good practice principles for embedded counselling services**

- appropriate provision – counselling services should work alongside and complement other support services within the institution and build relationships with relevant external agencies
- clarity of roles – counselling services need to set appropriate boundaries that clearly define the scope and limitations of the support that can be provided. Service literature and publicity should reflect this, as they form part of the implied contract offered to clients. The counselling service should strive to communicate the above clearly to the wider institution in order to avoid unhelpful misconceptions
- agreed policies and procedures – clear codes of practice covering confidentiality, record keeping, and mental health emergencies need to be agreed within the counselling service and supported by the institution. Services should anticipate that there may be rare instances when someone who is either ill, or at serious risk of either harming themselves or others, will not agree to seek help, and there need to be clear policies giving guidance to counsellors working with them
- training and staff development – responding appropriately to clients with mental health difficulties requires an institutional commitment to staff training and development. This includes making the necessary time and resources available for staff employed in counselling services to update their knowledge and skills.

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## 9. Appendix: Further reading and useful resources

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### About the Editor

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