MAKE AN APPOINTMENT

Undergraduate and graduate students: In person at SHWC or North Hall, online or by calling 530-752-2349 during normal business hours.

School of Veterinary Medicine students: By calling 530-752-2349 or via email at vetmedcaps@ucdavis.edu.

School of Medicine students: By calling 530-752-2349 or via email at medschoolcounseling@ucdavis.edu.

School of Law students: In person at King Hall, by calling 530-752-4948 or via email at counseling@law.ucdavis.edu.

For a medical or psychological emergency, please call 911 immediately or go to the nearest emergency room.

COUNSELING SERVICES

Frequently Asked Questions

The mission of Student Health and Counseling Services (SHCS) is to enhance the physical and mental health of students in order to help them achieve academic success, personal development and lifelong wellness by providing an integrated program of quality, accessible, cost-sensitive and confidential healthcare services, tailored to their unique and diverse needs and to assist the University community, through consultation and education, to develop a healthy campus environment consistent with UC Davis “Principles of Community.” This guide provides information about Counseling Services, a department within SHCS. It is organized as an FAQ page, so by clicking on a link below, you can be taken to the appropriate explanatory section. In addition to the information provided on this page, links to other resources and guidance may also be found below.
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Q1. How is Counseling Services funded?
A. Counseling Services is primarily funded by student fees and support from other departments. Student fees are allocated to Counseling Services in following ways:

- All students pay a **Student Service Fee (SSF)**, which contributes funding to many Student Affairs departments, such as the Women's Resources and Research Center, Internship and Career Center and Student Academic Success Center.

- Ten percent of this fee ($133 per undergraduate and $100 per graduate student in Academic Year 2017–18) is earmarked for mental health services and called the **Mental Health Fee (MHF)**. Counseling Services is the only recipient of MHF funding.

- In 2015, the Regents of the University of California authorized an increase in SSF for five years (2015–20), to increase MHF revenue for mental health services on campus. This increased support is referred to as the **Mental Health Initiative (MHI)**. Of $3.9 million in total MHF revenues projected for 2017–18, about $670,000 is generated by the MHI.

- In addition to MHF, UC Davis directs approximately $2 million of additional SSF revenue to Counseling Services to support mental health services on campus.

Counseling Services administrative operations (e.g., human resources, information technology, administrative support, etc.) are funded through other SHCS fund sources (e.g., SHCS income funds, SHIP Admin funds).

Finally, some clinical counseling positions are supported by the partner units they serve. For example, the School of Veterinary Medicine helps fund positions that are housed in their area.

Q2. What is the budget for Counseling Services?
A. In this fiscal year (2017–18), Counseling Services was appropriated $1.7 million in MHF funds, $1.9 million in MHI funds, $2.0 million in SSF, and an estimated value of $1 million in administrative support from other UC Davis departments. These funds are used to support Counseling Services clinical staffing and operations. The table below summarizes all sources of funds and an estimated value of SHCS financial support for the current and past fiscal years and projections based on enrollment estimates for future years.

Figure Q2: Counseling Services – All Sources of Funds
Q3. What is SHCS doing to ensure that the mental health funds are only spent to improve student access to mental health services?

A. SHCS has set up a special holding account for the mental health funds. This provides transparency into their uses and ensures that they will not become mingled with other SHCS or Student Affairs funds.

SHCS regularly reports to the University of California Office of the President (UCOP) what positions the mental health funds are supporting and any changes.

Q4. As enrollment increases, will UC Davis meet its benchmarks for hiring counselors?

[Mental Health Staffing Analysis (pdf)]

A. Yes. In 2015, the University of California Office of the President (UCOP) recommended UC Davis hire six counselors to meet clinical staffing benchmarks. Because funding through the MHI would allow for more than these six positions, UC Davis proposed to fund 11 permanent counselor positions and 2.2 permanent psychiatrists (two full-time psychiatrists and increasing an existing 80-percent-time psychiatrist to full-time) by 2020 based on enrollment and revenue projections at the time.

Since the Mental Health Initiative began, it has funded eight permanent counselors and 2.2 permanent psychiatrists. There is currently one MHI-funded position in recruitment. SHCS plans to hire an additional counselor in 2018–19 and another in 2019–20 to meet our goal of funding 11 permanent counselors by the conclusion of the initiative in 2020.

Figure Q4: Permanent Counselors Full-Time Equivalents (FTEs) by Year

Q5. Why are the Counselor FTEs published in Table 4 on page 9 of the Mental Health Audit different than the FTEs shown on Figure Q4?

A. Audit and Management Advisory Services (AMAS) and SHCS applied different calculation methodologies. The table in the AMAS audit report shows the employment status of all counselors, with one FTE indicating full-time employment. It does not take into consideration whether the counselors took leave during a particular month.

In contrast, Figure Q4 shows FTE as a percentage of time actually worked. A permanent, full-time counselor who was on temporary leave for an entire month would be represented as 0 FTE for that month, and a counselor who was out for half the month would be represented as 0.5 FTE. For the month in which the counselor returned to work, SHCS resumed counting the position as a full (1.0) FTE.
Q6. Has UC Davis ever hired temporary and part-time counselors?
A. Yes. Beginning in 2012–13, UC Davis used reserves, which were one-time funds, to hire temporary and part-time counselors. Temporary and part-time counselors were hired in the period 2012–2017 until the reserves were fully depleted.

Q7. Is UC Davis meeting industry standards for counselor-to-student ratios?
A. Yes. Each UC campus, including UC Davis, use the ratio recommended by the International Association of Counseling Services (IACS) as a clinical staffing benchmark. The IACS’ recommended range is one counselor to 1,000–1,500 students. Due to increased hiring of Counseling Services clinical staff, UC Davis's IACS ratio continues to be within the recommended range, even as the number of enrolled students has increased. The graph below demonstrates UC Davis's IACS counselor-to-student ratio by academic year.

Figure Q7: Total Counselor FTEs; Counselor-to-Student Ratio

![Graph showing total counselor FTEs and counselor-to-student ratio by academic year]

Note: FTE values in Figure Q7 includes both permanent and temporary counselor positions.

Q8. What were the findings from the recent Mental Health Audit?
A. In the spring of 2017, SHCS underwent a Mental Health Audit conducted by Audit and Management Advisory Services (AMAS), the entity that conducts independent audits on campus. AMAS examined the uses of funds appropriated to, earmarked for or otherwise directed to be spent on Counseling Services. The audit also assessed whether access to clinical services has increased since 2014.

The audit revealed several important findings regarding funding and student access. For a complete list of audit findings, please access the Mental Health Audit.

- The audit concluded that MHF and SSF funds earmarked for mental health services were appropriately used.
- The audit confirmed findings by other independent assessments, which indicated that for at least the past five years, access to clinical counseling services has been unacceptably low. Counselors were found to have performed an average of less than three clinical sessions per day in the past year. Nationally, counselors at schools the size of UC Davis see 4–5 students per day.

• The audit identified the failure of Counseling Services leadership to articulate a strategic plan as contributing to prioritizing other activities over clinical services for students.

• Two psychologists who support students in partner departments, the case manager for students in crisis in the Office of Student Support and Judicial Affairs (OSSJA) and the mental health disability specialist in the Student Disability Center (SDC), have been funded by Mental Health Fees for the past 10 years. The audit asks SHCS and campus partners to revisit the use of MHF funds in departments outside of Counseling Services.

Q9. What actions are SHCS taking to improve mental health services?

A. SHCS has taken the following actions:

1. Improved Access to Clinical Services
   • Counseling Services counselors spend approximately 30 percent of their time providing clinical services and the rest of their time providing outreach, case management, clinical oversight, charting and other activities. We are focused on increasing the time counselors spend on clinical services to 50 percent, which would translate to approximately 155 more appointments available to students each week. This would reduce wait time significantly, even with the current level of staffing.
   • Counseling Services will offer online appointment scheduling by fall 2018.
   • SHCS is evaluating crisis support to ensure counselors are available for students with acute needs while balancing availability of scheduled appointments.

2. Student Input
   • SHCS is actively soliciting student voices to inform care delivery. SHCS is recruiting students for the Student Health Advisory Committee (SHAC) to act as a liaison between the UC Davis student body and SHCS. The committee will review current services and recommend new programs to help ensure SHCS meets the needs of students.

Q10. Will there be additional work required by the Mental Health Audit?

A. Yes. The Mental Health Audit required SHCS to act on the following recommendations, many of which are either completed or currently in process:

• Counseling Services should develop a strategic plan that can be expected to increase student access.

• SHCS should analyze counselor productivity during on-call urgent care time blocks to determine whether resources allocated appropriately anticipate student need.

• SHCS should evaluate the sufficiency of the number of case managers on its staff and the effectiveness of existing case management practices in reducing clinicians’ non-clinical workload.

• SHCS should evaluate the impact of its training program for pre-doctoral interns and post-doctoral residents on the department’s ability to provide direct clinical services.

• SHCS should determine whether resources would be used more efficiently if new positions were established as 10-month appointments (fall through spring quarter) rather than 12-month appointments.
• SHCS should identify and act on opportunities for more comprehensive reporting of clinical activity.

• SHCS and Counseling Services should work with Budget and Institutional Analysis (BIA) to develop a new recruitment and funding plan for achieving a suitable number of counselor positions within a reasonable period of time.

• SHCS should consult with University of California Office of the President for assurance regarding the appropriateness, and with BIA regarding the optimization, of using MHF funds to support psychologist positions outside of Counseling Services.

• SHCS should develop a process to accommodate students who are unable to be seen same-day as well as those who wish to schedule ahead.

SHCS has requested AMAS perform an advisory service to SHCS and develop recommendations to ensure stricter internal controls over the accuracy and transparency of counseling hire reporting and the use of funds.

Q11. Is there student input on the chancellor’s Task Force on Mental Health?
A. Yes. The Task Force on Mental Health, created by the chancellor to examine mental health care services on campus, includes student, staff and faculty members. The task force, chaired by Dr. Cameron Carter, professor of psychiatry and behavioral sciences, and Interim Vice Chancellor of the Office of Research, has been asked to review existing mental health programs and options, consider improvements and make recommendations to the chancellor by June 30, 2018.

Q12. Have there been any impacts to access since UC Davis received the new Mental Health Initiative funds?
A. Yes. The Mental Health Initiative funds have contributed to the increase of the number of individual students served and percentage of enrolled students served. See the graph below.

Figure Q12: Access to Mental Health Services (Counseling and Psychiatry)

Q13. What types of services are available to students through Counseling Services?
A. Counseling Services offers confidential short-term individual counseling, group therapy, career counseling and referrals to community providers. Counseling Services also offers “You Got This” psychoeducational student workshops, a three-part series that combines evidence-based practices for more skillful management
of a variety of mental health concerns. If an assessment for medication is indicated and desired, students may be referred to psychiatrists located at the Student Health and Wellness Center (SHWC).

Q14. Who can use Counseling Services and how much does it cost?
A. Counseling Services is available to all registered UC Davis students at no charge.

Students who cancel appointments with less than a four-hour notice are charged a no-show fee of $25. Please see link for additional information on the no-show policy.

Q15. Why do students come to Counseling Services?
A. Last year, approximately 17 percent of all UC Davis students came to SHCS for mental health services (counseling and psychiatry). Students present a range of concerns including:

- Academic Problems
- Attention Deficit Hyperactivity Disorder (ADHD)
- Anxiety
- Alcohol and Drug Use and Abuse
- Career Counseling
- Conflict Resolution
- Depression
- Eating Disorders
- Family Problems
- Identity Concerns
- Loneliness
- Personal Development
- Problems with Intimacy
- Relationship Concerns
- Sexual Assault
- Stress Management

The top five reasons that UC Davis students access Counseling Services are anxiety, depression, stress, academic concern and relationship issues.

Q16. Where are the counselors located on campus?
A. Counseling Services’ main location is North Hall. Services also are available at the SHWC. To further expand the reach of mental health services, counselors also are embedded in many academic satellite locations:

- Colleges of Biological Sciences
- College of Letters and Science
- College of Agricultural and Environmental Sciences
- College of Engineering
- School of Veterinary Medicine
- School of Medicine
- School of Law
- Office of Graduate Studies

In addition, Community Advising Network (CAN) counselors provide outreach, psycho-educational programming, clinical counseling and referral services for traditionally underserved populations. Their services are delivered through partnerships with a number of campus units:

- Asian American Studies
- Cross Cultural Center
- Educational Opportunity Program
- Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual Resource Center
- Middle Eastern/South Asian Student Affairs Office
- Center for African Diaspora Student Success
- Center for Chicano and Latinx Academic Student Success
- Native American Academic Student Success Center
- Services for International Students and Scholars
Q17. Who will my counselor be?
A. Our licensed clinical staff includes psychologists and masters-level counselors who offer a broad range of interests, approaches, backgrounds and perspectives, though they function primarily as generalists.

Within our role as a training facility at UC Davis, we also have pre-doctoral interns and post-doctoral residents who work under the supervision of Counseling Services clinical staff. To learn more about our Counseling Services staff, please visit our Meet Your Counselor page.

Q18. How diverse is Counseling Services clinical staff compared to the student population?
A. The ethnicities of Counseling Services clinical staff match very closely with the student population. To assist our diverse student population, Counseling Services clinical staff speak several languages, including English, Spanish, Mandarin, Vietnamese, Gujarati, Korean, Hindi, Urdu and Taiwanese.

Q19. Do you offer services for students in crisis?
A. Yes, SHCS offers mental health acute care services on the first floor of the SHWC during normal hours of operation. A comprehensive healthcare team including psychiatrists, psychologists, primary care providers, registered nurses, and case managers are available to assist students who present with a mental health crisis.

After-hours counseling services consultations are available to UC Davis students or others (e.g., friends, family members, staff, faculty) concerned about a UC Davis student for psychological crisis assessment, consultation and intervention during evening and weekend hours and on holidays when Counseling Services is closed. Those seeking this service can call 530-752-2349 and follow the automated menu (press #1 then #5) for assistance connecting with a live counselor.

For a medical or psychological emergency, please call 911 immediately or go to the nearest emergency room.

Q20. If I would like ongoing care, is that available at UC Davis? Is there a limit to the number of appointments during the academic year?
A. Counseling Services utilizes a short-term model (4–6 sessions) of therapy for individual and couple sessions in order to use its resources most effectively, meet high demand for services and assist students in addressing issues common in a college setting.

Students whose mental health needs cannot be accommodated within short-term counseling or have issues that exceed the scope of care (e.g., alcohol and drug assessment and treatment, treatment of eating disorders, etc.) are referred to community resources. Students may be referred out to the community after the initial intake or during the course of treatment at Counseling Services as factors become apparent during or after the intake assessment.

Q21. How do I schedule an appointment with a counselor?
A. Students can make appointments in person at SHWC or North Hall, online or by calling 530-752-2349 during normal business hours.
Students enrolled in the School of Veterinary Medicine may request an appointment by calling 530-752-2349 or via email at vetmedcaps@ucdavis.edu.

School of Medicine students may make an initial appointment request by calling 530-752-2349 or through medschoolcounseling@ucdavis.edu.

School of Law students can schedule an appointment in person at King Hall, by calling 530-752-4948 or via email at counseling@law.ucdavis.edu.

**Q22. How long do I have to wait for an appointment?**

A. Initial appointments are generally scheduled within 1–3 days, with the majority of appointments scheduled within one week from the time of the initial request. Students who are experiencing a crisis or whose concerns cannot wait until the next available appointment will be triaged and accommodated on the same day.

**Q23. Will my discussion with the counselor be confidential?**

A. Yes. Counseling often involves the disclosure of sensitive and personal information. Professional ethical codes and state laws consider the personal information discussed between a counselor and client to be strictly confidential. This means that the information that you share in counseling, including the fact that you have used our services, will not be disclosed to anyone (including university officials, faculty, staff, parents or outside agencies) without your written permission. In addition, counseling records are not kept as part of your academic or administrative records.

There are a few rare exceptions to confidentiality such as abuse/neglect of a child or elder, harm to self or others, court subpoena, etc. where disclosure may become necessary.