

EDC14D002

Title: Counselling Report – Staff
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Issue

The Counselling Service provides the Committee with an overview of developments on an annual basis concerning the uptake of provision and key issues for staff emerging from the Service.

Recommendation

The Equality and Diversity Committee are asked to consider the report and whether any action is appropriate including training/awareness raising of key issues.

Resource Implications

N/a

Risk Implications

The content of the report may help inform future University strategies.

Equality and Diversity

The paper focusses on one particular aspect of the current range of protected characteristics

Timing of decisions

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Further Information

There have been annual reports to the Committee from the Counselling Service.

Background

The content of the report links to the Staff Profile Statistics produced annually by the Committee.

Staff Counselling Report 2012/2013

Executive Summary

1. Statistics

- 111 (106) clients were seen this year with a total of 801 (855) sessions offered. (Previous year's figures in brackets)
- Initial/Exploratory Session: 82 (66) clients
- Staff Group: S & C: 30% (35%), ATR: 14% (12%), ATS: 9% (9%), ALC: 16% (18%), Research 11% (6%) Technical & Manual 5% (8%) General Grades 9% (4%) Associate Tutor: 5% (3)
- Gender: 65% (69%) of clients were female and 35% (31%) male
- Ethnicity: 98% (94%) of Service clients declared as 'white'.
- Disability: 14% of clients declared a disability
- Referrals: 65% (69%) of clients self referred, 10% (5%) by manager, 7% (3%) by friends and family and 6% (6%) by GP

2. Presenting themes

- 18% (18%) of clients presented with work related issues as their primary concern.
- 27% (20%) Anxiety, 17% (17%) Loss, 16% (32%) Relationships 8% (10%) Depression/low mood

3. Specific Issues

- Increase in workload and pressure to perform.
- Less student contact time
- Greater expectations due to increase in fees, REF, rankings and league tables
- Support for disabled staff
- Staff Welfare
- Managerial Training
- Bullying and harassment

4. Collaboration with CSED/Careers

- Exploring issues in the Workplace
- Supervision for Careers Advisers

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Staff of the University Counselling Service

2012 - 2013

Director of Counselling	:	Dr Judy Moore
Deputy Director	:	Ruth Roberts
Staff Counsellor	:	Eamonn O'Mahony
Sessional Counsellors	:	Lucy Allison Jean Ashby Catherine Atkinson Miriam Crasnow Martin Langsdon Campbell Purton Sarah Robinson Joao Villanova Smith
Service Co-ordinator	:	Jane Ramsbottom
Secretary/Receptionists	:	Sue Hitchcock Ros Montague

Staff Counselling Report

2012-2013

Introduction

Each year staff bring a wide ranging number of issues to the counselling service. However in recent years the context has been changing. With the influence of the recession, the introduction of tuition fees, the Research Excellence Framework and the need to maintain league table positions, all staff have been feeling the challenge to perform and maintain and raise standards. Alongside these pressures inevitably come greater stress and anxiety and it has been particularly noticeable this year with clients presenting with ever more intense symptoms. Counselling is well placed to help such clients and in this report I will address the question that is often asked 'how can counselling help'?

I am also pleased to include some comments (see appendix) from colleagues on the Staff Counselling team regarding their work/interaction with clients. Sarah Robinson, a sessional counsellor, comments on the particular issues of the 'Sandwich' generation. Jude Reynolds, on placement, includes some interesting observations on working with staff from a previous role in Human Resources, and Ros Montague, receptionist, focuses on her experience of working with Staff on the Staff only evening in the Counselling Service.

ANALYSIS OF STATISTICS

Staff Numbers

Staff numbers accessing the counselling service have remained stable in the last couple of years. This year there was a small increase with 111 staff accessing the Service, 5 more than last year. A similar story to previous years is played out in terms of gender with approximately 65% female and 35% male clients being seen. There was a decrease in numbers of sessions offered dropping from 855 in 2011/12 to 801 this year. Clients who cancelled at short notice or who did not appear for sessions fell this year to 7% compared with 9% of all sessions offered last year.

Staff Category

In terms of staff categories the biggest changes seem to be in Research and General Grades. Clients from the Research category rose from 7 to 12, and staff from the General Grades category rose by 6. There was little change in the other categories with the ALC grades and Secretarial and Clerical again making up around 50% of all clients, a consistent pattern over the years given that these categories make up a majority of UEA staff.

Ethnicity

In terms of Ethnicity the figures for those who identified themselves as white rose from 94% in 2011/12 to 98% this year.

Disability

The number of clients who declared 'No Known Disability' was the same as last year equalling 90% of clients leaving 10% declaring a disability. A range of disabilities were declared – autism, specific learning difficulty such as dyslexia, mobility impairment, mental health difficulties and hearing impaired. Whilst clients may have disclosed this to the Counselling Service it may be the case that they did not disclose this to UEA on beginning employment. Some clients struggled with declaring their disability to the university. Clients who presented with autism or depression feared being stigmatised or it being used against them in some way. This view did not necessarily come from an experience at UEA but from a wider general perception that to have a form of disability is some form of 'failure' or 'weakness'. It seems important to continue to provide amongst all staff a general awareness and understanding of disability whilst providing adequate support for those who are disabled.

Referral Routes

Referral routes were again very similar to previous years with a majority of clients (65%) self-referring. There was a rise in referrals to the service by managers and by friends and family. It is always encouraging to see referrals from within the institution as it points to the service been seen as one of the options to support staff. Managers who themselves have attended the Service and found it helpful are much more likely to recommend their staff to attend.

Waiting times

Of the 69 clients who continued for on-going counselling 43% had a wait of up to 4 weeks (compared to 60% last year). There was a longer wait than usual for 31% of clients who went on the waiting list for ongoing sessions. This can be attributed to a clients having limited availability or may have coincided with a time when leave was taken. 15 clients who attended for the initial session, which is usually offered within a week of contact, did not continue for on-going sessions. As was pointed out in last year's report, it is important to remember that not all clients need on going sessions. A well timed initial session can be very effective in containing the client, help relieve the tensions and pressures they are experiencing and reassure them that help is available. For many clients knowing they can come back is helpful. For others who attend for the initial appointment only it can be that they are not ready for counselling. It could be that it would be simply too intense for them to talk about their problems and they choose not to continue.

CLIENT THEMES

Work Related

Clients experienced a variety of work related issues. These included; dealing with changes in role, retirement, bullying, conflict between colleagues, coping with transition to a new job from elsewhere, culture shock, managing work and children, excessive workload, perfectionism, dealing with disciplinary procedures, restructuring, pressure to perform (particularly for academics), feeling devalued in role.

Personal

Clients experienced a wide range of personal problems: bereavement, loss of a relationship, addiction, physical illness in oneself or loved one, insomnia, depression, anxiety, current or past physical, emotional

and sexual abuse, dealing with miscarriage, dealing with a loved one's mental illness/suicide attempt, loneliness and isolation, issues relating to sexuality and sexual identity, trauma,

Whether work related or personal the issues clients bring usually manifest in heightened symptoms of anxiety, stress, panic and feeling out of control.

Impact on Student Experience

Staff from all categories exhibit a very strong loyalty to UEA as an educational institution and exhibit a strong commitment to the welfare of students.

In recent years Academic staff in particular have reported a significant increase in their workload and pressure to perform. They have been given an increasing number of administrative tasks and some report that this leaves less time for individual contact with students. Increased and sustained stress has a negative impact on the employees' wellbeing such as physical problems, inability to sleep which affects their ability to perform.

With the increase in fees some staff have reported greater expectation and accountability from academics. Students are more likely to complain. Whilst this has its advantages, it adds pressure to an already pressurised role. Staff have overhead students rating whether a particular seminar was worth the tuition fees!

The ever present position on rankings and league tables adds again to the pressure on clients in academic and administrative roles. There is an increased emphasis on not getting things wrong which has the impact of heightening existing stress and anxiety.

Since the restructuring Administrative staff have reported regret about loss of face to face contact with students.

Staff Welfare

Several clients have touched on this issue. Staff identified a need for someone in the institution that they could go to for advice, help and support that wasn't necessarily CSED, Occupational Health, Human Resources, the Counselling Service or Trade unions. The suggestion of a Staff Welfare role is an interesting one and could be a very helpful support for those who might need impartial advice, information or just a one off discussion. Such a role might help with more accurate referrals as sometimes clients present with an issue that is more relevant for a different source of support.

Managerial support

Recognising that becoming a manager is a process that evolves over time and involves acquiring particular skills I offer through CSED a yearly group called Exploring Issues in the Workplace. This provides an arena over six weeks with other managers to reflect on aspects of their work which are challenging. This year the group had 4 participants.

Another issue which has emerged in the client work is perhaps the need to address more specifically the needs of managers who may come to UEA from a very different environment whether in the private or public sector. Managers may bring with them practices whilst 'acceptable' in their previous role may not be in line with UEA policies and procedures. Such staff would benefit perhaps from an increased understanding

of UEA and its culture and be supported in understanding how to apply policies and procedures in a fair and respectful manner.

How Can Counselling Help?

This is a question that clients will often have asked themselves before coming to counselling. Some are sceptical and find it hard to see what can be achieved by talking. One of the central aspects of counselling is to provide a safe and confidential space for people to talk through their problems. When clients make the appointment they are usually highly anxious, feeling fragile, vulnerable and often unable to feel they can cope. They often feel out of control and unsafe. This can be the most frightening aspect of what they are going through. For clients who feel like this having an environment where they feel secure and can share their fears and worries is a great relief. Through the provision of a safe environment they learn to manage their feelings better.

Sometimes clients have kept feelings blocked for a very long time and suddenly when there is a crisis at work or a bereavement at home everything can come flooding in and can feel overwhelming. In counselling clients learn the skills to cope with and manage their feelings so they don't become too painful or overwhelming. It's like instead of there being an on/off switch for feelings there is now a dial they can operate according to their situation. For clients with trauma this safe space is particularly relevant as trauma is usually a result of being in a situation which made them feel unsafe, out of control and frightened.

One of the central aspects of counselling is in quality of the attention the counsellor brings to the client. Then counsellor listens empathically and does not judge. For clients particularly those who feel unacknowledged and devalued at work, this experience of being respected is very powerful and helps them regain a better perspective. What then usually happens is that the client attempts to find their own solution to the difficulty with the counsellor's help.

One of the great advantages of having an in house counselling service at work is that the client feels supported by a part of the institution where they are having problems. The role of the counsellor is never to act as advocate for the client – others such as a colleague, HR, a Trade Union or Occupational Health may do that more publicly. Rather the Staff Counselling Role is to enable the client to find their own way forward and use their resources to make the changes they feel are healthy for them.

Conclusion

An overarching theme that consistently emerges with clients is the importance of being listened to, treated fairly and with respect. This is important in their personal relationships as well as in their relationships at work and with colleagues. Whilst the Counselling Service can clearly play a very important role in meeting the need to feel valued as a person and an employee so too can all the other parts of the university through its policies and procedures play their part in valuing the employee even in the most difficult of situations.

Eamonn O'Mahony, Staff Counsellor,

3/11/2014

APPENDIX

Comments from Sarah Robinson – sessional counsellor

Over the last year there have been two strands that I have found particularly noticeable in staff counselling.

One is the prevalence of people who fall into the category of ‘the Sandwich Generation’. This is a term coined by the press for people who are literally sandwiched between two generations: they are in their 50s, still working, often trying to help their grown-up children and sometimes those children are still living at home or they may be helping with the care of grandchildren and at the same time dealing with the demands of caring for elderly parents. These kinds of clients juggle everything and somehow just about manage but they are emotionally and physically exhausted and it doesn’t take much for this precarious ‘house of cards’ to topple over. What may happen is that something changes – reorganisation at work, bereavement, an illness, and they can feel totally overwhelmed and unable to cope.

Initially the counsellor’s role may be just to listen, to acknowledge how difficult life is and what a lot they are trying to do. Ultimately what seems to be needed though is a look at what small changes need to be made to make life less stressful. To help clients look at what they may need for their health and their emotional wellbeing.

The second strand is the number of people who feel de-skilled at work. Often they have been employed to fulfil a certain role and that role has played to their strengths. What seems to happen, however, is that over the years other tasks creep into their work description, departments merge, job descriptions change. This group of clients then begin to feel stressed as more and more is heaped upon them and many of the things they have to do are outside their original skill base. Sometimes they spend a lot of their leisure time acquiring new skills to fulfil their new roles. Gradually their leisure time is eroded. This group of clients begin to feel like cogs in a huge mechanism over which they have no control, they feel de-humanised, exhausted and worthless. When somebody feels worthless at work that will often be a knock-on effect on home life. A client who is anxious, perhaps sleeping badly, just functioning under the pressure, will also have difficulty coping if their life outside work throws up any unexpected problems.

Once again, clarifying and acknowledging the problem seems to be hugely beneficial but there are also steps that can help clients find the workplace less stressful. Looking at boundaries, discussing assertiveness skills, rediscovering the areas that they used to find satisfying, all can be helpful. At the very least, clients often go back into the workplace with an understanding of why the workplace had become stressful for them and with a more positive attitude to their work.

Comments from Jude Reynolds – post qualification placement counsellor

Since starting seeing staff at UEA I’ve been struck by the varying roles my clients have within the University, where I’ve worked with cleaning staff through to senior academics. Much of the private sector provision for staff wellbeing and benefits, is linked to level of seniority and what attracted me to the UEA service was the accessibility and level of service provided on site.

Only 20% of the clients I’ve met this year presented with purely work related themes. What is clear for all my clients is that whatever is happening for them in their personal lives, there is also an impact on their work and in many cases their work has an impact on their personal lives. Being able to support and assist staff in the broader context of the counselling room where there is space and recognition of the individual as a whole has been very rewarding.

Ultimately a counselling service is part of the organisation’s commitment to the well-being of their staff and I feel this is particularly the case at UEA since all my clients to date have come with the support or direct referral from their manager.

My background prior to Counselling was in Human Resources. There were many times during my career that I recognised the support an individual might need yet wasn't able to offer it personally. It has been an interesting and fruitful transition to move to a different role where I am part of, and mindful of the organisational aims and culture, yet can work with people in-depth, thus understanding how it is for the client rather than being solely concerned with the organisational requirements.

With each new client we discuss the confidential nature of the relationship and its limitations. Before I started working at the Counselling Service, I imagined that many clients may query the relationship of the service to their role, their manager and HR, yet none have and I've felt privileged to hear my clients' journeys, each client feeling able to speak honestly and openly about their experiences at work. I realise that this is a very different experience from my HR roles where staff may have been more selective and guarded in what they chose to share with me.

Comments from Ros Montague, reception

I have been working on reception on Tuesday evenings for a good number of years! Tuesday evening is the only evening when staff are seen. Although staff are seen at other times of the week by staff counsellors, the Tuesday evening is a little "different". Some clients arrive earlier than their appointment time and ask if it is okay to sit in the reception area whilst waiting. For some staff it can be quite difficult to come for counselling and it is important to make them feel at ease and welcome on arrival whilst waiting for their appointment. If a person arrives in a distressed state they need to be dealt with in an appropriate way and this can be very different depending on whether they are a member of staff or a student.

Reception can be really busy during the day time and we receive a constant stream of people into the Service as well as continual 'phone calls and emails. While on reception we are required to have a great deal of empathy, sensitivity, awareness and intuition for both staff and students and this is interspersed with constant interruptions and general admin that has to be done every day. We also need to have a good knowledge of the University, support services at the University and outside agencies so that we can direct clients where appropriate.

Clients, especially staff, certainly seem to appreciate seeing the same friendly face on the reception desk and I really enjoy greeting them. I do feel when I go home at 8pm that I have done a good job and enjoy what I do.

Staff Counselling Statistics 2012-13

	2012-13		2011-12	
	No.	% of UEA staff	No	% of UEA staff
Total no clients:	111	3.6	106	2.7

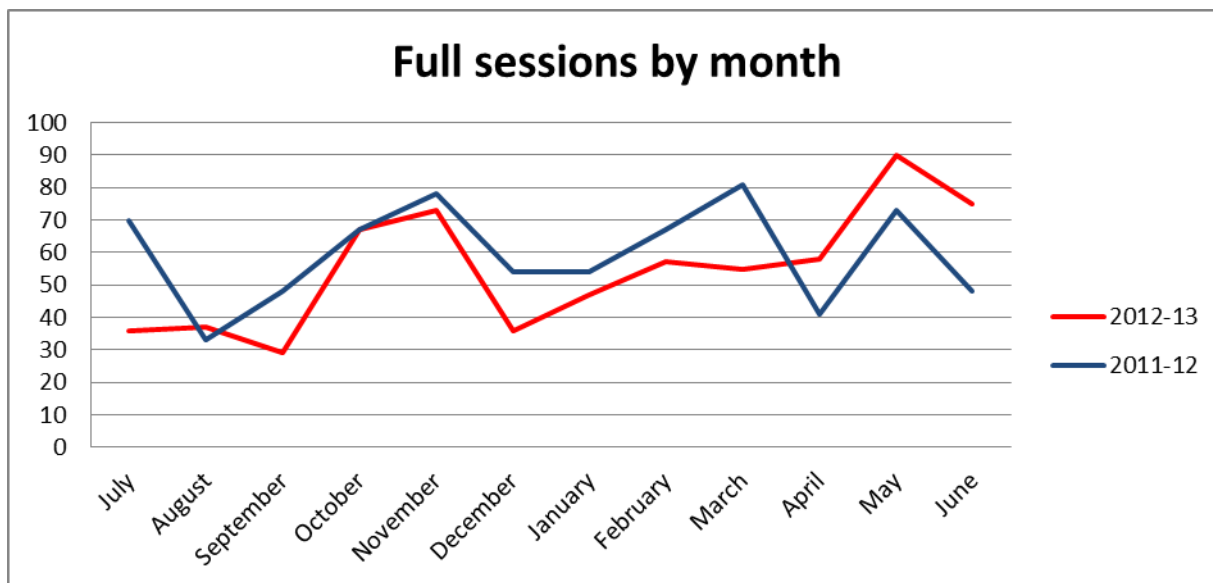
	2012-13		2011-12	
	No	% total sessions offered	No	% total sessions offered
Session Statistics				
Sessions including exploratories	742		780	
Full sessions	660	82.4	714	83.5
Exploratory sessions	82	10.2	66	7.7
Total sessions offered	801		855	
Cancellations	41	5.1	51	6.0
Failure to appear	18	2.2	24	2.8
Average no. of sessions per client	7.2		8.1	

	2012-13		2011-12	
	No.	% of UEA	No	% of UEA staff
Gender				
Female	72	2.4	73	1.9
Male	39	1.3	33	0.8

	2012-13		2011-12	
	No.	%	No	%
Full Time	86	77.5	88	83.0
Part Time	23	20.7	17	16.0
Not stated	2		1	

Clients by Staff Group	2012-13			2011-12		
	No	% of UEA staff by category	% of total UEA staff	No	% of UEA staff by category	% of total UEA staff
Academic (ATR)	15	2.4	0.5	16	2.7	0.4
ALC & Related	18	4.3	0.6	19	4.7	0.5
Research & analogous	12	3.6	0.4	7	2.1	0.2
Secretarial and Clerical	33	4.8	1.1	37	5.3	0.9
Technical and Manual	6	3.0	0.2	8	4.2	0.2
General Grades and Other	10	2.7	0.3	4	1.1	0.1
ATS (Academic, Teaching & Scholarship)	10	2.7	0.3	10	2.9	0.3
Associate Tutor	5			3	0.3	0.1
Casual Staff	1			2	4.2	0.1

Sessions by Month						
	Full		Exploratory		Totals	
	2012-13	2011-12	2012-13	2011-12	2012-13	2011-12
July	36	70	10	2	46	72
August	37	33	5	7	42	40
September	29	48	1	8	30	56
October	67	67	6	7	73	74
November	73	78	7	4	80	82
December	36	54	4	3	40	57
January	47	54	10	7	57	61
February	57	67	11	6	68	73
March	55	81	8	7	63	88
April	58	41	4	3	62	44
May	90	73	9	9	99	82
June	75	48	7	3	82	51



Waiting Times	2012-13		2011-12	
	No. & % clients	% clients	No. & % clients	% clients
No waiting time (ongoing)	27	24.3	40	37.7
Initial appointment only	15	13.5	18	17.0
0-7 days	4	3.6	4	3.8
1-2 weeks	9	8.1	5	4.7
2-3 weeks	11	9.9	10	9.4
3-4 weeks	6	5.4	5	4.7
4-5 weeks	9	8.1	4	3.8
5-6 weeks	6	5.4	3	2.8
6-7 weeks	2	1.8	5	4.7
7+ weeks	22	19.8	12	11.3

Referrals In	2012-13		2011-12	
	No of clients	% clients	No of clients	% clients
Self	72	64.9	73	68.9
GP	6	5.4	6	5.7
Occupational Health	0	0.0	2	1.9
Human Resources	4	3.6	3	2.8
Manager	11	9.9	5	4.7
Colleague	7	6.3	7	6.6
Friends / family	8	7.2	3	2.8
Outside Agency	1	0.9	2	1.9
Other	2	1.8	3	2.8
Not recorded	0	0.0	2	1.9

*1 staff member recorded GP & Occ Health.

Full Session Main Themes	2012-13		2011-12	
	No	% sessions	No	% sessions
Abuse	11	1.7	11	1.5
Work concerns	101	15.3	134	18.8
Academic work	0	0.0	0	0.0
Anxiety	119	18.0	46	6.4
Addiction	27	4.1	5	0.7
Depression/mood swings	19	2.9	43	6.0
Loss	81	12.3	114	16.0
Other mental health problems	3	0.5	0	0.0
Physical health	28	4.2	12	1.7
Eating disorders	0	0.0	0	0.0
Relationships	135	20.5	147	20.6
Sexual issues	5	0.8	10	1.4
Transitions	0	0.0	6	0.8
Welfare	4	0.6	0	0.0
Self-harm	0	0.0	2	0.3
Other	0	0.0	1	0.1

Initial Session Main Themes	2012-13		2011-12	
	No	% sessions	No	% sessions
Abuse	0	0.0	1	1.7
Work concerns	15	18.3	11	18.3
Anxiety	22	26.8	12	20.0
Addiction	3	3.7	2	3.3
Depression/mood swings	7	8.5	6	10.0
Loss	14	17.1	10	16.7
Other mental health problems	0	0.0	1	1.7
Physical health	5	6.1	1	1.7
Eating disorders	0	0.0		0.0
Relationships	13	15.9	19	31.7
Self and identity	3	3.7		0.0
Sexual issues	0	0.0	2	3.3
Transitions	0	0.0	1	1.7
Welfare	0	0.0		0.0
Self-harm	0	0.0		0.0
Other				