Internal Audit Report

Counseling and Psychological Services

Report No. SC-19-06
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Approved
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I. EXECUTIVE SUMMARY

The purpose of the review was to evaluate University of California, Santa Cruz's (UCSC) ability to provide adequate and effective mental health services, primarily related to Counseling & Psychological Services (CAPS), to those students in need. We found that CAPS was taking appropriate actions to provide access to mental health services for students in need. Specifically, we found CAPS:

- Effectively provides students with access to mental health services.
- Has logical local procedures to facilitate positive outcomes for those whom seek services.

This report outlines the methodology used to come to this conclusion. Specifically, our review consisted of four topic areas: Fiscal, Accreditation, Local Procedures, and Survey Data.

- Good fiscal management is necessary to ensure CAPS is able to effectively serve students. We conducted a general fiscal review for CAPS between FYs 2014-2018 to examine deficit/carryforward trends and review any large expenses incurred. We found that CAPS generally maintained a reasonable carryforward for the period reviewed between FY 2014-2018 and never carried a deficit balance. Additionally, we found the vast majority of CAPS expenditures were related to staff salaries and benefits. Other common expenses reviewed included professional memberships, training, and travel. We did not find any indications of unreasonable expenses in our review of CAPS expenditures.

- CAPS is accredited by the International Association of Counseling Services (IACS) and the Accreditation Association for Ambulatory Health Care (AAAHC). These accreditations are the primary means by which the University ensures that CAPS is providing quality and accessible counseling services to students. The process for receiving an accreditation from these two organizations is thorough and regularly reoccurring. As the IACS and the AAAHC did not find any areas of non-compliance in their recent re-accreditations, we likewise did not find any concerns related to this accreditation process.

- We reviewed local CAPS procedures to ensure they were logical and effective to provide services for students. While the initial scheduling of students needing services is a relatively uniform process, the actions taken after the initial assessment will vary depending on the specific needs of the individual students. Overall, we found that the local procedures were logical and effective to provide services for students.

- CAPS and its UC peers collect various data to ensure it is effectively providing services to students in need. We were particularly interested in average wait times as this is a good metric for tracking how well students are able to access CAPS services. The data collected is also useful for management to decide which areas to pay special attention to. Overall, based on the data collected, we did not find any concerns related to wait times as UCSC appears to be doing better than the UC average in this regard. However data collected by CAPS does show UCSC appears to be at an elevated risk of student suicides in comparison to its UC peers. While we do not have any specific control weaknesses or areas of non-compliance to report in this regard, we do believe it is important that campus leadership is aware of this particular risk and the University should be paying special attention to it.

We have no recommendations as a result of this report. However, as noted in the previous paragraph, campus leadership should be aware of the relatively high rates of responses indicating UCSC students experiencing suicidal thoughts and/or thoughts of self-harm identified in CAPS data. We did not identify a particular cause for these elevated levels in comparison to other UC campuses, however it is clearly a statistic that campus leadership should be mindful of when thinking about what risks exist on campus.
II. INTRODUCTION

Purpose
The purpose of the review is to evaluate UCSC’s ability to provide adequate and effective mental health services, primarily related to Counseling & Psychological Services (CAPS), to those students in need. Specifically we intended to evaluate if:

- Students have sufficient access to needed mental health services.
- Procedures at CAPS are properly working to facilitate positive outcomes for those whom seek services.

In addition to these main objectives, we also intended to review student surveys, demographic, and other data to compare UCSC’s mental health landscape with that of other UC campuses.

Background
The CAPS department, which is organized under the division of Student Success, provides UCSC students with a wide range of mental health and wellness services. All UCSC enrolled students are eligible to access CAPS services.

CAPS is funded primarily through the University Student Services Fee (fund code 20000), with a lesser amount of funding coming from Student Health Services (fund code 68915). In fiscal year (FY) 2018, Counseling Services was funded exclusively via approximately $3.7 Million in Student Service Fees. The vast majority of this funding goes towards employment related expenses.

In 2014 the Regents of the University of California (UC Regents) became aware that students system-wide were dissatisfied with the level of access to mental health care at the campuses. In response, the UC Regents authorized incremental 5% increases to the Mental Health Fees for five years, beginning in FY 2016, for the purpose of increasing the number of clinical mental health positions at each campus.

CAPS operates using a "brief therapy model," meaning that they typically provide up to a handful of sessions rather than open-ended, ongoing counseling. Indeed, the most commonly used service at CAPS is an initial consultation, where they obtain information about the student, their needs and history and then recommend next steps. In addition to direct clinical services for students, Counseling Services conducts
group sessions, workshops, and crises services. Additionally, CAPS is supported by case management and an embedded Behavior Health Specialist as adjuncts to support patients that show up in primary care.

CAPS is accredited by the International Association of Counseling Services (IACS) and the Accreditation Association for Ambulatory Health Care (AAAHC). The IACS had recently fully re-certified UCSC in 2018 and noted that CAPS was a well-run and highly functioning center.

Scope

Our review consisted of four topic areas: Fiscal, Accreditation, Local Procedures, and Survey Data. Below are the steps used to answer the audit objectives.

- Fiscal
  - Review financial data from FY 2014-2018 to determine if CAPS is appropriately managing carryforward/deficit balances.
  - Review financial data from FY 2014-2018 to determine if CAPS is appropriately spending funds.
- Accreditation
  - Review IACS accreditation documents to determine if there are items in which CAPS is deficient.
- Local Procedures
  - Review local procedures, accreditation documents, and CAPS data collected to determine if the local procedures are logical in scheduling students for services.
  - Review online resources to assure that there is clarity for students in how to receive mental health services.
  - Assure that staffing at CAPS is sufficient.
- Survey Data
  - Review data on wait times to assure these times are reasonable.
  - Review UC and CAPS data collected to determine if there are unique challenges UC Santa Cruz faces over other UC Campuses.

A more detailed summary of work performed and results are included in Appendix A.
III. RESULTS

We found that Counseling & Psychological Services (CAPS) is taking appropriate actions to provide access to mental health services for students in need. Specifically we found CAPS:

- Is effectively providing students with access to mental health services.
- Has logical local procedures to facilitate positive outcomes for those whom seek services.

This following sections of the report outlines the methodology used to come to this conclusion. Specifically, our review consisted of four topic areas: Fiscal, Accreditation, Local Procedures, and Survey Data.

A. Fiscal Review

Good fiscal management of the Counseling and Psychological Services (CAPS) department is necessary in order to ensure the department is able to effectively serve students in need. We conducted a general fiscal review for CAPS between FYs 2014-2018 to include an examination of deficit/carryforward trends and a review of large expenses incurred.

CAPS generally maintained a reasonable carryforward for the period reviewed between FY 2014-2018 and never carried a deficit balance. The carryforward balance was at the lowest point for the beginning of FY 2016, with only a few hundred dollars within the 680200 CAPS/Counseling Center ORG-code. FY 2014 and 2018 were the highest with carryforwards of approximately $455K and $458K respectively:

UCSC has little formalized policy or written guidance for how units should specifically manage their carryforward balances. Instead, most of these principles for managing carryforward are informal. However as noted in a December 2017 audit on Divisional Carryforward / Deficit Balances, one informal metric commonly used is that units should generally try to keep carryforward balances below 15% of operating expenses. Using this metric, CAPS would have been a bit high in FY 2014 with a carryforward of about 16% of operating expenses, but otherwise remained well under this threshold:
### CAPS Carryforward Balances

<table>
<thead>
<tr>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Beginning Carryforward</strong></td>
<td>$445K</td>
<td>$211K</td>
<td>$213</td>
<td>$195K</td>
<td>$458K</td>
</tr>
<tr>
<td><strong>Operating Expenses</strong></td>
<td>$2.75 Million</td>
<td>$2.65 Million</td>
<td>$3.27 Million</td>
<td>$4.00 Million</td>
<td>$3.71 Million</td>
</tr>
<tr>
<td><strong>Carryforward as Percentage of Operating Expenses</strong></td>
<td>16.2%</td>
<td>8.0%</td>
<td>0.0%</td>
<td>4.9%</td>
<td>12.4%</td>
</tr>
</tbody>
</table>

We found the vast majority of CAPS expenditures were related to staff salaries and benefits. Other common expenses reviewed included professional memberships, training, and travel. We did not find any indications of unreasonable expenses in our review of CAPS expenditures.

### B. Accreditation Review

CAPS is accredited by the International Association of Counseling Services (IACS) and the Accreditation Association for Ambulatory Health Care (AAAHC). These accreditations are the primary means by which the University ensures that CAPS is providing quality and accessible counseling services to students. The process for receiving an accreditation from these two organizations is thorough and regularly reoccurring. The IACS accreditation, for example covers a wide range of areas to include (but is not limited to):

- Administrative Independence
- University and Community Relationships
- Professional Development of CAPS staff
- Record Management
- Staff Size
- Workload
- Compensation
- Physical Facilities

Counseling professionals from outside the University conduct these accreditations. With their professional experience and education these professionals are better equipped to make determinations related to meeting professional counseling standards than we in Internal Audit are able to do. Therefore, we relied on re-certification reports provided by IACS and AAAHC to determine the level to which CAPS is able to provide effective counseling services to students.

The IACS had recently fully re-certified UCSC in 2018 and noted that CAPS was a well-run and highly functioning center. Similarly, a 2018 AAAHC Survey Report did not find any areas of non-compliance within its section on Behavioral Health Services.

The IACS did note that CAPS should be encouraged to work in a number of areas, some of which included below:
As the IACS and the AAAHC did not find any areas of non-compliance, and in fact relatively few areas of improvement, we did not find any concerns related to the accreditation process.

C. Local Procedures

We reviewed local CAPS procedures to ensure they were logical and effective to provide services for students. While the initial scheduling of students needing services is a relatively uniform process, the actions taken after the initial assessment will vary depending on the specific needs of the individual students.

The CAPS process for initially scheduling students to receive counseling services is straightforward, logical, and fairly uniform from the perspective of students receiving care:

- Students initiate the process to get scheduled by either calling CAPS or walking into the CAPS’ facility.
- In either case CAPS collects basic information from the student such as why they are coming in.
- From this basic information CAPS makes a decision on the next steps:
  - If the student is in immediate crisis they will be seen as soon as possible – nearly always the same day.
  - The students may be directed to UCSC or external resources if they might be helpful.
  - For other situations the front desk sets up an initial assessment appointment which is typically within 5-7 business days in advance.

The initial assessment CAPS performs represents a large portion of CAPS overall workload. The actions that occur after the initial assessment can vary quite a bit depending on the particular needs of the student. The three most common next steps are:

- If students are amenable to it, they may be set up with additional appointments under CAPS brief therapy model. Generally, these appointments are with the same counselor that performed the initial assessment. The number of sessions held with the student varies quite a bit depending on the specific needs of the student.
- Students may be given an external, off-campus referral. In some cases, CAPS may make some additional appointments with the student to help transition to the off-campus help.
- Students may be “handed off” to other UCSC resources that are better able to address the specific needs of the students. UCSC provides a wide range of services targeted to specific student needs. A few of these examples are shown in the table below:

<table>
<thead>
<tr>
<th>Organization</th>
<th>UCSC Resources for Students</th>
<th>Mission</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campus Advocacy Resources and Education (CARE)</td>
<td>CARE advocates provide nonjudgmental support and resources for survivors of sexual assault, dating/domestic violence, and stalking, and their significant others.</td>
<td></td>
</tr>
<tr>
<td>Disability Resource Center (DRC)</td>
<td>DRC exist to assist the UCSC campus with equal educational access for students with disabilities. Its goals are to support retention and graduation of students with disabilities, promote a non-discriminatory campus environment and encourage student development and independence.</td>
<td></td>
</tr>
<tr>
<td>Slug Support Program</td>
<td>The goal of the Slug Support Program is to identify students of concern and develop an action plan focusing on retention through provision of support and resources.</td>
<td></td>
</tr>
<tr>
<td>Student Health Outreach and Promotion (SHOP)</td>
<td>SHOP offers information, education, resources and support on issues such as Alcohol and other Drug Use, Sexually Transmitted Infections and Sexual Health, and College Life balance.</td>
<td></td>
</tr>
<tr>
<td>Various Resource Centers</td>
<td>Each of the 6 resource centers offer students various services through academic, cultural and community support activities. Throughout the year, the RCs host programs and events that connect students, staff, faculty and community members in both social and professional, academic settings.</td>
<td></td>
</tr>
<tr>
<td>Various Academic Support Resources</td>
<td>Resources available to UCSC students to support their success academically.</td>
<td></td>
</tr>
</tbody>
</table>

Overall we found that the local procedures were logical and effective to provide services for students. We did not find any areas of concern with CAPS local procedures for scheduling counseling for students.

D. Data Review

CAPS and its UC peers collect various data to ensure it is effectively providing services to students. We were particularly interested in average wait times as this is a good metric for tracking how well students are able to access CAPS services. The data collected is also useful for management to decide which areas to pay special attention to. We specifically reviewed:

- A 2016 National College Health Assessment for undergraduate students
- A 2016 National College Health Assessment for graduate students
- CAPS appointment data for FY 2018
- CCAPS national comparison for the period July 1, 2018 through March 19, 2019.

The first thing we reviewed was the average wait time length for students, as this information is a useful metric to determine if UCSC students are able to access CAPS services. Generally, UCSC CAPS was better than the UC
averages using these particular metrics. Specifically it took an average of six days between when the appointment was first made and when it occurred (system-wide average nine days). Further:

<table>
<thead>
<tr>
<th>Appointments which...</th>
<th>UCSC</th>
<th>System-wide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were held within 7 days of initial scheduling</td>
<td>54.1%</td>
<td>47.7%</td>
</tr>
<tr>
<td>Were held within 14 days of initial scheduling</td>
<td>99.6%</td>
<td>77.1%</td>
</tr>
<tr>
<td>Were held within 2 days of initial scheduling when for urgent needs</td>
<td>99.8%</td>
<td>95.6%</td>
</tr>
</tbody>
</table>

In reviewing enterprise data collected by all UC campuses, there were however concerning trends in relation to the potential for suicides and thoughts of self-harm. The data collected by CAPS showed that:
- UCSC has the highest percentage of students responding that they have attempted suicide sometime in their lives at 15.4% (system-wide average 9.6%).
- UCSC responses for currently having thoughts of suicide was high at 17.3% (system-wide average 10.7%).
- UCSC responses for having thoughts of self-harm was also very high at 50.5% (system-wide average 38.2%).

It is important to note that we did not evaluate how well this data reflected the UCSC student population as a whole. For example, a survey completed only by students making appointments with CAPS will likely have very different results than one completed by the entire student body. However, even without necessarily fitting the data collected to the campus population as a whole, the survey data does provide a good benchmark when compared to other UC campuses for areas in which the campus and CAPS specifically needs extra vigilance. In this case, the risk of student suicide appears to be an elevated risk for the University and therefore the University should be paying special attention to this area of risk.

There were other risks highlighted in the data of note:

<table>
<thead>
<tr>
<th>Respondents who...</th>
<th>UCSC</th>
<th>System-wide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were homeless</td>
<td>0.5%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Experienced harassing/abusive behavior</td>
<td>31.1%</td>
<td>23.5%</td>
</tr>
<tr>
<td>Considered their alcohol consumption or other substance use a problem</td>
<td>8.0%</td>
<td>5.4%</td>
</tr>
</tbody>
</table>

Overall, based on the data collected, we did not find any concerns related to wait times as UCSC appears to be doing better than the UC average in this regard. However UCSC does appear to be at an elevated risk of student suicides in comparison to its UC peers. While we do not have any specific control weaknesses or areas of non-compliance to report in this regard, we do believe it is important that campus leadership is aware of this particular risk and the University should be paying special attention to it.
APPENDIX A – Summary of Work Performed and Results

<table>
<thead>
<tr>
<th>Work Performed</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewed financial data from FY 2014-2018 to determine if CAPS is appropriate managing carryforward/deficit balances.</td>
<td>CAPS generally maintained a reasonable carryforward for the period reviewed between FY 2014-2018 and never carried a deficit balance. The carryforward balance was at the lowest point for the beginning of FY 2016, with only a few hundred dollars within the 680200 CAPS/Counseling Center ORG-code. FY 2014 and 2018 were the highest with carryforwards of approximately $455K and $458K respectively.</td>
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<td>Reviewed financial data from FY 2014-2018 to determine if CAPS is appropriately spending funds.</td>
<td>We found the vast majority of CAPS expenditures were related to staff salaries and benefits. Other common expenses reviewed included appropriate professional memberships, training, and travel. We did not find any indications of unreasonable expenses in our review of CAPS expenditures.</td>
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<tr>
<td>Reviewed IACS accreditation documents to determine if there are items in which CAPS is deficient.</td>
<td>We did not find any concerns related to the accreditation process as the IACS and the AAAHC did not find any areas of non-compliance, and in fact relatively few areas of improvement.</td>
</tr>
<tr>
<td>Reviewed local procedures, accreditation documents, and CAPS data collected to determine if the local procedures are logical in scheduling students for services.</td>
<td>We found that the local procedures were logical and effective to provide services for students, such as timely scheduling. We did not find any areas of concern with CAPS local procedures.</td>
</tr>
<tr>
<td>Reviewed online resources to assure that there is clarity for students in how to receive mental health services.</td>
<td>CAPS had a large variety of online resources available to students in need.</td>
</tr>
<tr>
<td>Assured that staffing at CAPS is sufficient.</td>
<td>Maintaining appropriate staffing levels are part of the accreditation process. As CAPS was recently accredited by the IACS and AAAHC, we found no issues with staffing levels.</td>
</tr>
<tr>
<td>Reviewed data on wait times to assure these times are reasonable.</td>
<td>Generally, UCSC CAPS was better than the UC averages using these particular metrics. Specifically it took an average of six days between when the appointment was first made and when it occurred (system-wide average nine days).</td>
</tr>
<tr>
<td>Reviewed UC and CAPS data collected to determine if there are unique challenges UC Santa Cruz faces over other UC Campuses.</td>
<td>Overall, based on the data collected, we did not find any concerns related to wait times as UCSC appears to be doing better than the UC average in this regard. However, UCSC does appear to be at an elevated risk of student suicides in comparison to its UC peers. While we do not have any specific control weaknesses or areas of non-compliance to report in this regard, we do believe it is important that campus leadership is aware of this particular risk and the University should be paying special attention to it.</td>
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