## 2011-12 IACS Executive Summary and Action Plan Longwood University Counseling Center Prepared by Dr. Maureen J. Walls-McKay, Director

# The Longwood University Counseling Center is fully accredited by the International Association of Counseling Services, Inc

## I. Self-Assessment Process:

The International Association of Counseling Services Board is responsible for the development and maintenance of Standards of the evaluation for counseling services. Standards are reviewed on a continual basis by the accrediting board.

Once a Center's application for accreditation is filed (\$750), it is forwarded to two members of the IACS Board of Accreditation for a **First Board Review**. The reviewers complete a checklist to evaluate whether the Center is ready for afield visit or whether additional information is required. They forward their feedback to the Chair of the Accrediting Board who determines if the Center is ready for the **On-Site Review**. The application materials are shared with the Coordinator of the ICS Field Visitation Program, who contacts the IACS Executive Director when the field visitor has been established. After the On-Site Review (\$750), the Center is reviewed via the **Final Board Review**, comprised of two members of the Accrediting Board. They carefully consider the application materials, other matters of record, the field visit report, and the Center Director's response to the report. The Board Members send their review forms to the Chair of the Board who makes the final decision regarding the Center's accreditation status.

The Center must complete a brief IACS Annual Report Form. Every four years, Centers are completely reevaluated to include a written application (\$150). Every eight years, an On-Site Review is required (\$1,500).

### II. Areas of Program Strength:

The IACS Board noted as Center strengths the recent acquisition of Titanium for client scheduling and record keeping, which indicates the staff's commitment to maintaining a state-of-the-art, quality counseling service to meet the clinical and developmental needs of the campus community. Additionally, the Board commented that the Center has developed and maintains strong working relationships with other student affairs offices and the academic faculty. The outreach efforts of the Center are well-designed and highly visible on campus; staff size has been increased, and professional development opportunities enhanced.

### III. Action Plan for Areas of Program Weakness:

The following concerns were raised, and should be addressed in the next annual review. Failure to respond to these recommendations may jeopardize future re-accreditation.

1. In particular, please indicate how confidentiality concerns have been resolved, regarding the fax machine and access to client records.

PLAN OF ACTION: The Counseling Center no longer maintains a fax machine. When needed for nonclinical purposes, we utilize the fax machine owned by Longwood University Student Health & Wellness. The Counseling Center file room is locked at all times. Providers and Administrative Assistants employed by the Counseling Center and Longwood Police Officers have key card access.

Files previous to the use of Titanium Schedule are stored in fireproof, locked file cabinets within the locked file room.

- Identify resources (i.e., human, fiscal, physical) that are essential to program enhancement : None
- Set dates by which specific actions are to be completed: Completed
- Identify responsible parties to complete the action steps: Dr. Maureen Walls-McKay, Director
- 2. Past reviews as well as the current Board Reviews and Field Visit findings have noted the lack of a viable group therapy program in the Center. Although there has been some progress made in establishing some specialized/focus groups, the most recent data provided by the Center indicate that no general therapy groups were offered in the Center. More attention needs to be directed toward making group psychotherapy a reality in the Center. A strong group therapy program will not only help meet the heavy direct service demand on the Center, but also provide a treatment of choice for many of the clinical problems that clients present.

PLAN OF ACTION: The current expectation is that each provider will plan and implement one successful counseling group per academic semester.

- Identify resources (i.e., human, fiscal, physical) that are essential to program enhancement : Three providers, Adequate space for group counseling, Promotional costs
- Set dates by which specific actions are to be completed: Completed
- Identify responsible parties to complete the action steps: Dr. Maureen Walls-McKay, Director; David Davino, Counselor, Staff Psychologist (TBA)
- 3. The extremely small amount of psychological testing done in the Center continues to be of concern. Such testing is often critical in the diagnostic and treatment planning process. This Center's weakness has been noted on several occasions, but it appears that little attention has been devoted to addressing this concern. In addition, as the Center continues to build a training program for graduate students, instruction in testing/assessment will need to be included in the overall training program. The lack of dedicated testing space likely plays a substantial role in deterring staff from doing more formal psychological testing, but staff attitudes and skill levels may also need to be addressed as well.

PLAN OF ACTION: A proposal has been submitted to partner with the Office of Disability Resources to provide testing. At this time, funding is the significant block.

- Identify resources (i.e., human, fiscal, physical) that are essential to program enhancement: Testing
  materials (\$5,000 was requested via the One Time Funds which would purchase a Battery of 4 Tests for
  25 Students), dedicated testing space. The funding request was denied.
- Set dates by which specific actions are to be completed: On-going
- Identify responsible parties to complete the action steps: Dr. Maureen Walls-McKay, Director in collaboration with the Office of Disability Resources
- 4. Staff salaries continue to be lower than those in the region and those for comparable peer institutions. The Assistant Dean has asked for comparison data to build a case for salary increases when the budget

picture for the University improves. Hopefully the Director will utilize some of the excellent data resources available (e.g. AUCCCD Director's Survey, ACHA Survey) to effect an increase in staff salaries.

PLAN OF ACTION: Staff salaries continue to be lower than those in the region and those for comparable peer institutions. The University has conducted a salary study (coordinated by Sibson Consulting) and the Board of Visitors appointed a Compensation Task Force.

- Identify resources (i.e., human, fiscal, physical) that are essential to program enhancement: At least one additional provider (Staff Psychologist/Outreach Coordinator position has been proposed)
- Set dates by which specific actions are to be completed: Determined by state budget
- Identify responsible parties to complete the action steps: Dr. Maureen Walls-McKay, Director, Budget Allocation