I. MISSION STATEMENT

Oxford College Counseling and Career Services (CCS) strives to provide CCS clients accessible, responsive, culturally competent, caring, respectful, ethical, and evidence-driven career, psychological, and psychiatric assessments and interventions. OCCS also serves the Oxford community at large by: 1) offering students informative and needs-based psychoeducational outreach programming and providing faculty/staff/students competent, effective consultation services addressing all mental health issues challenging the college community.

II. OUTCOMES

1. High quality of care and high satisfaction with CCS services are sustained as staff expands to address the anticipated increase in service utilization secondary to increased student enrollment.
2. CCS supports and promotes Emory Cares 4U initiatives and evidenced-based suicide prevention programs are introduced to Oxford College
3. CCS webpages are elevated in regard to functionality and aesthetics.
4. CCS outreach programming is highly regarded as it expands to more fully address the behavioral health and career service needs of Oxford students.
### III. ASSESSMENT SUMMARY

**OUTCOME #1:** High quality of care and high satisfaction with CCS services are sustained as staff expands to address the anticipated increase in service utilization secondary to increased student enrollment.

**Supports School/Division Strategic Goals:** Respond to challenges and opportunities presented with growth in student enrollment.

**Supports Oxford College Goals:** To establish Oxford as a model of leadership in responsible action and healthful living—by individuals and institutions, across social, political, and environmental realms.

**Supports University Strategic Goals:** Emory enrolls the best and brightest undergraduate and graduate students and provides exemplary support for them to achieve success.

---

**FIRST METHOD OF ASSESSMENT FOR OUTCOME #1:**

**Method of Assessment:** Client Satisfaction Surveys and the CCAPS. Our Client Satisfaction Survey includes items that measure both learning outcomes and items that measure client satisfaction. The CCAPS a 62 item self-report outcome measure designed for repeated measurement of client progress throughout the course of therapy. Students seeking behavioral health services completed the CCAPS inventory at time of intake, and theoretically, after each course of 6 counseling sessions and at time of termination. Each report was comprised of overall scores in categories of depression, anxiety, social anxiety, academics, family distress, violence, eating concerns, and substance abuse, as well as a consolidated list of all test items and clients’ responses to each item. Decreasing category scores throughout the course of counseling suggest client progress and counseling effectiveness.

**Achievement Target:** All items of the client satisfaction survey assessing learning outcomes and client satisfaction will be above 5.5 on a 7.0 point scale. CCAPS data will demonstrate decline in distress level in at least one category among counseling clients participating in a minimum 6 week course of psychotherapy.

**Summary of Assessment Results:** Scores on items addressing learning outcomes ranged from 5.3-6.4. Only one learning outcome item measured below 5.5. That item read as follows “Counseling helped me become more successful in my academic endeavors”. Scores on items addressing client satisfaction with personal and career counseling services ranged from 6.4-6.8. Analysis CCAPS data indicated that the percentage of clients endorsing moderate to severe suicidal ideation dropped from 32% to 8% over the course of psychotherapy. Although one cannot imply causality, one can infer, based on these statistics, that students engaged in counseling, for six weeks or longer, did experience relief from the frequency and intensity of their suicidal ideation. The CCAPS data also indicated that the percentage of client-perceived improvement on all subscales was under 55% for CCS clients participating in, at least, a 6 week course of psychotherapy.
**Use of Assessment Results to Improve Unit Services:** CCS achieved a 33% response rate in Client Satisfaction Surveys. Efforts will be made to improve the response rate and generate more reliable data, especially since learning outcomes are not relevant to all CCS clients and students are instructed not to respond to items that are irrelevant to the focus of their counseling. In regard to the CCAPS, The CCAPS Center Wide Change Report which is currently the only method currently available to CCS for analyzing CCAPS data is under development and review by the Center for Collegiate Mental Health (CCMH). It is likely to be revised and improved in the coming year. Counselors were remiss in religiously requesting the administration of the CCAPS at time of termination of counseling; hence, results do not necessarily reflect the benefits of counseling for students participating in a longer course of psychotherapy. A plan will be devised and instituted to insure more reliable data collection in the 2011-2012 academic year.

**OUTCOME #2:** CCS supports and promotes Emory Cares 4U and evidenced-based suicide prevention programs are introduced to Oxford College. Through Emory Cares 4U, a SAMHSA funded suicide prevention initiative, resources, training, and programming designed to significantly reduce risk of suicide among the community of faculty, staff, and students are being designed and promoted, 2010-2013. CCS will work to insure that all such suicide prevention efforts extend to the Oxford community.

**Supports School/Division Strategic Goals:** Explore ways to improve support mechanism for international students (Asian and Asian-American students are a high risk population for suicide.)

**Supports Oxford College Goals:** To establish Oxford as a model of leadership in responsible action and healthful living—by individuals and institutions, across social, political, and environmental realms.

**Supports University Strategic Goals:** Emory stewards its finances and other resources to drive activities that are essential and those through which Emory can demonstrate excellence and provide leadership.

**FIRST METHOD OF ASSESSMENT FOR OUTCOME #2:**

<table>
<thead>
<tr>
<th>Method of Assessment</th>
<th>Records maintained of the number of QPR Trainings scheduled and number of those who participated.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achievement Target</td>
<td>Trainings will be provided for RA staff, Flag Committee members, and CL staff. Attendance will be as follows: 100% for RAs; 100% for Flag Committee members; 75% for CL Campus Life Staff</td>
</tr>
<tr>
<td>Summary of Assessment Results</td>
<td>QPR training was offered to RAs on August 11, 2010 and there was 100% participation. QPR training was offered to Flag Committee Members,</td>
</tr>
</tbody>
</table>
Academic Services staff, and CL staff. There was 100% attendance among Flag Committee members and Academic Services staff. There was 70% attendance among CL staff. Both trainings were arranged and scheduled by the CCS Director.

**Use of Assessment Results to Improve Unit Services:** Additional QPR trainings will be provided in the 2011-2012 academic year. CL staff who have not been QPR trained will be encouraged to attend.

**OUTCOME #3:** CCS web pages are elevated in regard to functionality and aesthetics. CCS web pages will be revised to reflect: new services of health education and promotion and psychiatry; expanded career services; added staff; and minor changes in policies in regard to service provision. CCS web pages will also be reconfigured to allow for more immediate consumer access to important information.

**Supports School/Division Strategic Goals:** Elevate quality and functionality of all CL departmental home pages.

**Supports Oxford College Goals:** To build and continuously improve the personnel and physical infrastructures necessary to create a welcoming, attractive campus community that effectively supports Oxford’s academic mission and vision.

**Supports University Strategic Goals:** Emory’s social and physical environment enriches the intellectual work and lives of faculty, students and staff.

**FIRST METHOD OF ASSESSMENT FOR OUTCOME #3:**

**Method of Assessment:** Review CCS web pages and links.

**Achievement Target:** Revised web pages will be launched and all revisions/additions will be correctly presented.

**Summary of Assessment Results:** All material was correctly uploaded with the exception of a link for an instructional video regarding assisting students in distress. This omission, although late in detection, was brought to the attention of OCIT and the link was promptly added to the faculty/staff resources tab after the academic year’s end.

**Use of Assessment Results to Improve Unit Services:** Will incorporate review of requested web page changes to CCS director’s monthly task list.
**OUTCOME #4:** CCS outreach programming expands to more fully address the behavioral health needs of Oxford students while high levels of satisfaction with program offerings is sustained. To accomplish this outcome a new Health Educator position will be created, a Health Educator will be hired, and a student needs assessment will be devised and conducted.

**Supports School/Division Strategic Goals:** Integrate new professional staff into each department as well as Campus Life and the college, in general.

**Supports Oxford College Goals:** To establish Oxford as a model for leadership in responsible action and healthful living- by individuals and institutions, across social, political, and environmental realms.

**Supports University Strategic Goals:** Emory enrolls the best and brightest undergraduate and graduate students and provides exemplary support for them to achieve success.

**FIRST METHOD OF ASSESSMENT FOR OUTCOME #4:**

**Method of Assessment:** Workshop evaluations are completed by program participants after CCS sponsored programs. Completion of hire of Oxford’s first Health Educator. Needs assessment conducted and results are documented.

**Achievement Target:** A Health Educator will be hired and begins his/her term of employment. A needs assessment report will be produced. The average scores for all items on outreach programming evaluation forms will be no less than 3.5 on a 5 point scale.

**Summary of Assessment Results:** A health educator was hired as ½ time, 10 month employee. Her date of hire was 10/15/2010. A needs assessment report was submitted within one month of hire. The average score on all workshop evaluation form items ranged from 4.0 to 4.7.

**Use of Assessment Results to Improve Unit Services:** The needs assessment report suggested programming addressing substance abuse, sexual assault, and stress/depression/anxiety is in greatest demand. And it is believed that such programming is beyond what a half-time health educator can reasonably provide. A proposal was submitted to change the status of this position to permanent, 40 hours per week, 10 months status, starting fall 2011.
### IV. What outcomes will your unit assess next year?

<table>
<thead>
<tr>
<th>Outcome: Suicide prevention efforts continue to expand as QPR training becomes offered and attended by students, faculty, and staff</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Method:</strong> Opportunities for QPR training will be publicized and records will be kept in regard to dates/attendance of trainings offered.</td>
</tr>
<tr>
<td><strong>Achievement Target:</strong> Students other than RAs receive QPR training. QPR training sessions will be offered to faculty/staff and will be attended by a minimum of 5 faculty and 5 staff members who were not trained during the previous academic year.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome: Recruit, hire, and orient a part-time social worker so that CCS staff can responsively address the increasing behavioral health needs among Oxford students.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Method:</strong> A half time social worker will begin employment fall semester, 2011.</td>
</tr>
<tr>
<td><strong>Achievement Target:</strong> HR documentation will confirm the terms of hire/employment. The newly hired employee will agree to remain on staff as a permanent member of the CCS clinical team.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome: CCAPS data will more accurately reflect the efficacy of counseling as counseling clients will be administered, more routinely, the CCAPS inventory at time of termination of counseling.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Method:</strong> CCS clinicians will diligently request CCAPS administration for clients at time of termination.</td>
</tr>
<tr>
<td><strong>Achievement Target:</strong> The CCAPS data analysis will evaluate reports on at least 65% of students receiving behavioral health counseling of duration of 2 or more sessions.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Method: The method for CCAPS data analysis will be reviewed by statistician.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Achievement Target:</strong> If recommended by the statistician, CCAPS data will be analyzed via SPSS and our department will not rely on the CCAPS Center Wide Change Report, which remains under development and review.</td>
</tr>
</tbody>
</table>
VI. SUPPORTING DOCUMENTATION

Please remember to attach supporting documentation such as surveys, questionnaires, charts, tables, spreadsheets, and detailed descriptions of assessment findings. If you have questions about what should or should not be included with the report, please contact the Office of Institutional Research, Planning, and Effectiveness.

VII. REVIEW PROCESS

Please forward your 2010-2011 assessment report to the Dean of your college/school or the Vice President/Vice Provost of your administrative division for review and electronic signature. This review will ensure that the information included in this report is accurate and that your unit is engaged in a systematic process of continuous improvement.

Joe Moon, Dean for Campus Life, Oxford College

October 30, 2011

______________________________________
Dean/Vice President/Vice Provost

______________________________________
Date

VIII. SUBMISSION OF REPORTS

Please email reports to David Jordan, Director of Institutional Effectiveness (David.M.Jordan@emory.edu) by October 1, 2011.