



2023-
2024

Annual Report

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with assistance from

Bec Johnson, LPC, CTC Assistant Director

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Selected CTC committee chairs: Dr. Teresa DePratt; Ashley

Jochimsen, LPC; Katelyn Longmire, LPC; Chad Walters, LPC

UWL Counseling & Testing Center Annual Report 2023-24

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Mission, Vision, Values for Counseling Services and Testing Center

Vision: Counseling

The CTC strives to foster a connected, accessible, compassionate campus community.

Mission: Counseling

Our mission is to promote students' psychological, academic, social, and cultural growth through professional and confidential counseling services. We accomplish this by maintaining an environment of compassion, collaboration, and inclusivity. We strive to foster a connected, accessible, compassionate campus environment where students can grow and attain their personal and academic goals.

Values: Counseling

Compassion

Collaboration

Inclusion

Access

Vision: Testing

The CTC strives to provide a welcoming testing space which provides secure, confidential and dependable assessment services to all.

Mission: Testing

Our mission is to meet the needs of any examinee by providing access to professional and efficient testing services that adhere to nationally recognized standards.

Values: Testing

Professionalism

Dependability

Knowledge

Counseling Scope of Service Statement

Services We Provide:

The UWL Counseling & Testing Center (CTC) utilizes a brief, solution-focused and strengths-based counseling model founded in our staff's diverse theoretical orientations and disciplines. Therapy is focused on helping students resolve or effectively manage a specific problem or challenge, or to make a desired change. Frequency of therapy sessions is most often every other week, and the average number of sessions per student is 4.

Specific services include:

- Initial assessment (triage) appointments
- Short-term individual counseling
- Crisis counseling through our Urgent Care
- Group counseling
- Workshops
- Outreach programming
- Referral services
- Couples counseling (if both individuals are eligible for services)

Examples of concerns that we commonly treat:

- *Personal concerns:* stress, anxiety, depression, anger, loneliness, low self-esteem, grief, social anxiety
- *Relationship concerns:* romantic relationship difficulties, interpersonal conflicts, family concerns
- *Cultural and Identity concerns:* impact of oppression, power, privilege, identity and intersectionality; empowerment and identity development/exploration
- *Developmental concerns:* adjustment to college, life transitions, identity (e.g., personal and cultural)
- *Academic concerns:* performance anxiety, perfectionism, low motivation
- *Trauma or Interpersonal/Relationship Violence:* Assessment, stabilization and treatment within a brief therapy model
- *Self-harm and/or suicidality:* Acute and/or manageable suicidality and/or self-harm thoughts, urges and behaviors
- *Other concerns, which may include:* effects of a recent trauma, spirituality and/or religious identity, body image, food preoccupation, wellness concerns (e.g., sleep), financial stressors, concerns related to mild or moderate alcohol or other drug use/abuse

Services Outside of our Scope:

In keeping with the brief therapy model of the CTC, students whose needs require long-term and/or intensive support will generally be referred to community resources for ongoing treatment. Students whose needs fall outside the scope of services or scheduling availability of the CTC are also referred to community resources. The CTC provides referrals after the initial visit or as reasons for referral become more apparent over time. The CTC's clinical case manager assists students in finding appropriate and available resources as needed.

Some of the concerns and/or needs that are commonly addressed through a referral to an off-campus provider may include:

- Students with concerns which a brief therapy model of treatment will not appropriately address.
- A need, or request, for uninterrupted individual services over multiple semesters.
- A need, or request, for treatment modality or area of expertise not provided by CTC staff.
- A need, or request, to be seen differently than what is clinically recommended. For example, a student requests weekly individual therapy sessions when this may not be recommended by the clinician.
- Students with active eating disorders requiring extensive medical monitoring.
- Students who need services other than what is offered at the CTC. Reasons may include:
 - Students seeking psychological assessments or evaluations for selection, performance prediction or forensic purposes.
 - Students who have not complied with treatment recommendations.
 - Students who are already receiving concurrent ongoing therapy with another mental health provider. This does not include when students are receiving mental health care during breaks when they cannot be receiving care from CTC.
- Students seeking therapy for the sole purpose of obtaining documentation for another office (e.g., Social Security disability evaluations, court-mandated substance use treatment, evaluations for emotional support animals).
- Presence of one or more of the following, such that the best treatment would be a higher level of care, such as an intensive outpatient program (IOP):
 - Alcohol and Other Drug Addiction
 - Eating disorders
 - Chronic thoughts and/or attempts of self-injury and/or suicide
 - Obsessive-compulsive disorders requiring more intensive care
 - Personality disorders warranting a DBT program
 - Extensive history of childhood sexual trauma

Statement on Inclusive Excellence

At the University of Wisconsin-La Crosse, diversity and inclusion are integral to the achievement of excellence. As part of the university's implementation of Inclusive Excellence, the Counseling and Testing Center is committed to:

- Forging thoughtful relationships with groups of students who are traditionally underserved by mental health services.
- Making our office-based services as comfortable and inclusive as possible, so that all students feel our services fit their needs.
- Using our existing knowledge and expertise to benefit the cultural competence of the campus community.
- Continuing growth and development of our own cultural competence: personally, professionally, and as a staff.

Accreditation

Since 1979 the International Association of Counseling Services, Inc. (IACS) has accredited the University of Wisconsin–La Crosse Counseling & Testing Center. Accreditation by IACS certifies that the CTC meets or exceeds certain criteria and standards that are applied exclusively to college and university counseling centers. The CTC is the longest standing IACS accredited Center in the UW System.

Notes of Acknowledgement

This annual report is completed with the significant assistance of my colleagues at CTC, and all of our successes are shared.

Thank you to C. Criss Gilbert, CTC Office Manager and Test Center Coordinator, for his guidance and leadership, commitment to the success of our programs, and patience with our staff.

Special appreciation goes to Bec Johnson, LPC, CTC Assistant Director, for sharing leadership responsibilities, clinical supervision, and program development. Significant improvements to our services this year would not have been possible without Bec's dedication and persistence.

New team members have joined us to contribute to our mission, join our vision, and share in our values. These exciting additions would not be possible without those staff (both within CTC and elsewhere on campus) who have contributed valuable time to help with recruitment, onboarding, clinical and administrative supervision, mentoring, and consultations. All of us thank you for your investment in CTC.

CTC's committee chairs and area coordinators provided excellent leadership and valuable contributions to this report, including Dr. Teresa DePratt; Ashley Jochimsen, LPC; Katelyn Longmire, LPC; Chad Walters, LPC. Thanks also go to front desk staff Andrea Matson, Rachel Friedl, and RJ Lynch, for their assistance with data collection and processing, along with representing us as first contact points for our students, partners, and members of the community.

This year, we focused on intentional communication and deepening partnerships with our closest campus collaborators. We appreciate your continued support of our services and hope to continue to work productively together to promote student well-being.

In service,

Crystal Champion, PhD, LP

Counseling Services Director

2023-24 Staff

Crystal Champion, PhD, LP; CTC Director

Bec Johnson, MS, LPC; CTC Assistant Director

Criss Gilbert, MS; Testing Center Coordinator, Office Manager

Kristine Adams, MA, LPC-IT, Counselor (from November 2023)

Teresa DePratt, PhD, LP; Psychologist, Diversity & Inclusion Liaison

Ashley Jochimsen, MS, LPC; Counselor, Groups Coordinator

Kirsten Krueger, MEd, LPC-IT, Counselor

Katelyn Longmire, MS, LPC; Counselor, Outreach Coordinator

Chelsea Schaffer, MS, LPC-IT, Counselor (from November 2023)

Iam Valdez-Espinoza, MS, LPC-IT; Counselor

Chad Walters, MS, LPC; Counselor, Clinical Case Manager

Ana Mendoza, BS, Counseling Practicum Intern

Andrea Matson, BS; University Services Associate 2, Front Office Coordinator

Rachel Friedl, Administrative Assistant 2, Front Office Associate (through December 2023)

RJ Lynch, Administrative Assistant 2, Front Office Associate (from May 2024)

Richard Athey, MA; Testing Center Associate (through November 2023)

Jamison Johnson, BA; Testing Center Associate (from January 2024)

COUNSELING SERVICES

Direct Services

The primary goal and function of the CTC is the provision of direct counseling services to UWL students. Direct service includes clinical assessments, counseling appointments (individual, group, and occasional couples), consultations, and crisis intervention. CTC services continue to be contextualized using a Stepped Care Model, which can be viewed in [Appendix A](#). In January 2024, CTC changed Electronic Medical Record software systems, from Point and Click to Medicat One Counseling. Data presented in this report are as consistent as possible between Fall and Spring semesters, and as consistent as possible with prior years' reports. However, some variations in the reporting capabilities of the two EMRs have occurred and will be noted where relevant.

The table below summarizes in number the broad and varied outpatient services that we conduct as a Center, and includes a calendar year of service, specifically, utilization from July 1, 2023 through June 30, 2024. The majority of services were delivered during the academic semesters. Summer services are limited due to both demand and staffing. Groups and Let's Talk are not offered during summer terms, and Single Session visits are limited in availability.

Between July 1, 2023 and June 30, 2024, 663 unique students received direct services. The CTC conducted more than 2300 direct service appointments (see more detailed data by appointment type below) for a total of approximately 1950 hours of client services.

Service	Unique clients who attended	Appointments kept	No show rate
Individual Therapy Sessions (in-person, virtual, and EMDR)	274	1050	3.4%
Intake Sessions (in-person and virtual)	314	320	4.3%
Triage Screenings	508	511	4.6%
Urgent Care	74	88	N/A
Consultation w/ Client	90	110	2.6%
Referral Visit with Case Manager	57	60	7.7%
Group Screening	22	22	10.5%
Single Sessions	105	109	12.2%
Post-Pathways Consultation	19	19	2.5%
Let's Talk	17	17	N/A

The 2023-24 academic year was remarkable for fewer students seeking services at CTC. More than 150 fewer students accessed services compared to the previous academic year, a 20% decrease in the number of students served. This resulted in counseling services being provided to 6.4% of enrolled students, a decrease from 8% last year and lower than the average of UW campuses at 9.8%. A total of 814 triage appointments were reserved on the schedule for incoming clients, and 667 intake blocks were reserved for individual clients.

With a decrease in students seeking services, most appointment types occurred less frequently. The only appointment type with a significant increase was Referral visits, due to once again staffing a dedicated clinical case manager. Rather than individual clinicians managing case management needs for their own clients, students could be referred (or self-refer) to Chad Walters, LPC, for assistance with connecting to community services.

Due to the reduced demand for appointments, excellent access to initial (triage) appointments was maintained. During the 2022-23 academic year, the average wait for triage visits had been around 7 business days. Wait times for initial appointments were calculated differently in the EMRs used across the 2023-24 academic year, but both calculations showed a decrease in wait times. In Fall 2023, routine triage visit wait time averaged 4.9 business days. In Spring 2024, the average wait time for triage visits averaged 90.7 hours, or 3.8 calendar days.

We continued to offer web-booking through both EMRs for selected appointment types (triage, Single Sessions, and referral visits) and use of this method of scheduling was popular among students. Web booking accounted for 11.9% of total scheduled visits in 2022-23. In the Fall 2023 semester, 14.1% of all visits were web-booked, and accounted for 45% of scheduled triage visits. (Web-booking data was not available for the Spring 2024 semester, but was offered for triage, Single Sessions, and referral visits, similarly to Fall.)

In terms of demographics, the most common identities among student-clients who received services in 2023-24 were once again cisgender woman, White, single, heterosexual, and 19 years of age. Please see [Appendix B](#) for more comprehensive demographic information.

Need for mental health supports continues to be a primary concern across higher education, and in recent years, CTC has implemented service changes and streamlined procedures to respond to student needs. Consistent with our value of Access, CTC services are designed to serve as many students as possible, as quickly as possible. In 2023-24, the response to student needs included focusing staff training time on making appropriate referrals to group services, further expanding regular Single Session opportunities, and transitioning from the Returning Intake system to using routine triage for all incoming clients, whether new or returning.

UWL joined the Center for Collegiate Mental Health (CCMH) in 2024, giving us access to more resources and national comparison data. CCMH recommends the use of Clinical Load Index (CLI, <https://ccmh.psu.edu/cli>) to compare counseling center staffing levels. In brief, the CLI describes the relationship between the demand for and supply of mental health services in college and university counseling centers. An individual CLI score can be thought of as “clients per standardized counselor (per year)” or the “standardized caseload” for the counseling center. CTC’s CLI for 2023-24 was 82, a mid-range score. Institutions in the mid-range of CLI, according to CCMH, are likely to provide less weekly individual counseling compared to low-CLI centers, and implement “demand management strategies,” such as those used at CTC (e.g., triage assessments, referral services, and oversight of clinical schedules).

Telehealth extension services available through the Universities of Wisconsin grant remained available to students during the 2023-24 academic year, after implementation in 2022-23.

Because these services are auxiliary to CTC services but provided in partnership with CTC, a brief summary of the utilization of these services by UWL students is provided in [Appendix C](#).

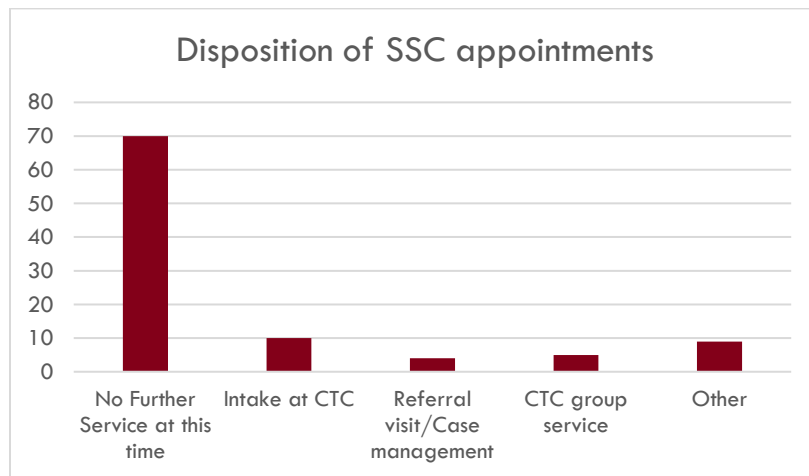
The next sub-sections offer highlights of specific direct and indirect services offered this year.

Initial Points of Contact (Non-Crisis)

At the CTC, new clients access (non-crisis) services through triage, single session clinic (SSC), and Let’s Talk consultation visits. Together, these three visit types accounted for 27.6% of the appointments held at CTC this year. Returning students (those who had attended some CTC appointment in a previous year) accounted for about 28% of the triage visits completed. At triage and SSC visits, students complete a Client Information Form (CIF), and the most frequently reported presenting concerns were the same as last year. The most commonly reported presenting concerns were anxiety, depression, stress, relationship concerns, and academic problems. Presenting concerns were reported with similar frequency to last year (within +/- 4 percentage points). Thus, self-reported presenting concerns continue to approximate pre-pandemic services. See [Appendix D](#) for a summary.

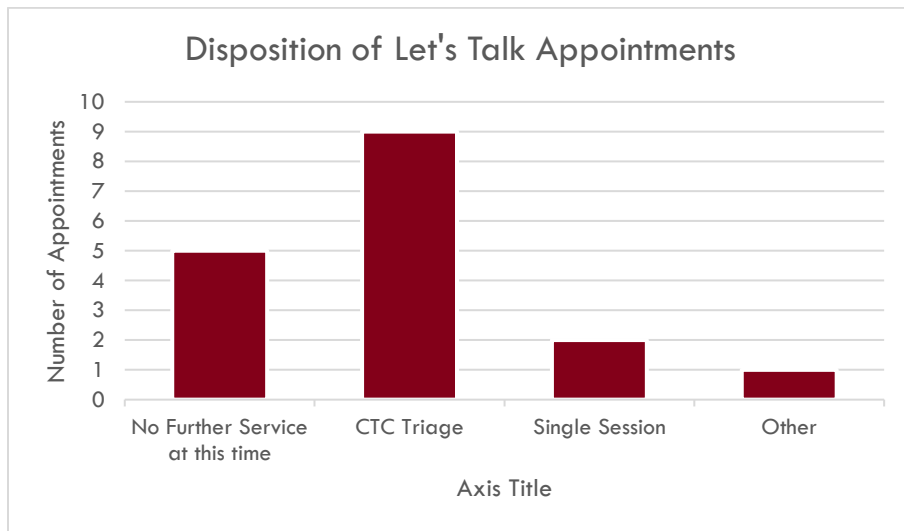
SINGLE SESSION CLINIC (SSC):

- Single Session Clinic (SSC) visits continued for a third year and proved to be a popular service for students to access care. SSC visits were attended by 105 unique students, across 109 visits. SSC visits represented one of the appointment types with the smallest decrease in frequency compared to last year. Most SSC visits were scheduled online (61%), and 18% were scheduled via contact with the front desk. The average time between scheduling and attendance for SSC was 6.5 days, with 60% of appointments being scheduled within a week of the visit. Most (82%) of clients attending SSC were new to the CTC (never seen before), thus illustrating the success of this being a first point of contact. Finally, the students all self-selected this visit type, and the majority of those students assessed their needs for one session accurately, with 71% stating they needed no further service following SSC. Most SSC clients who were referred to other CTC services were scheduled for intake (36%), while 14% were scheduled for referral services.

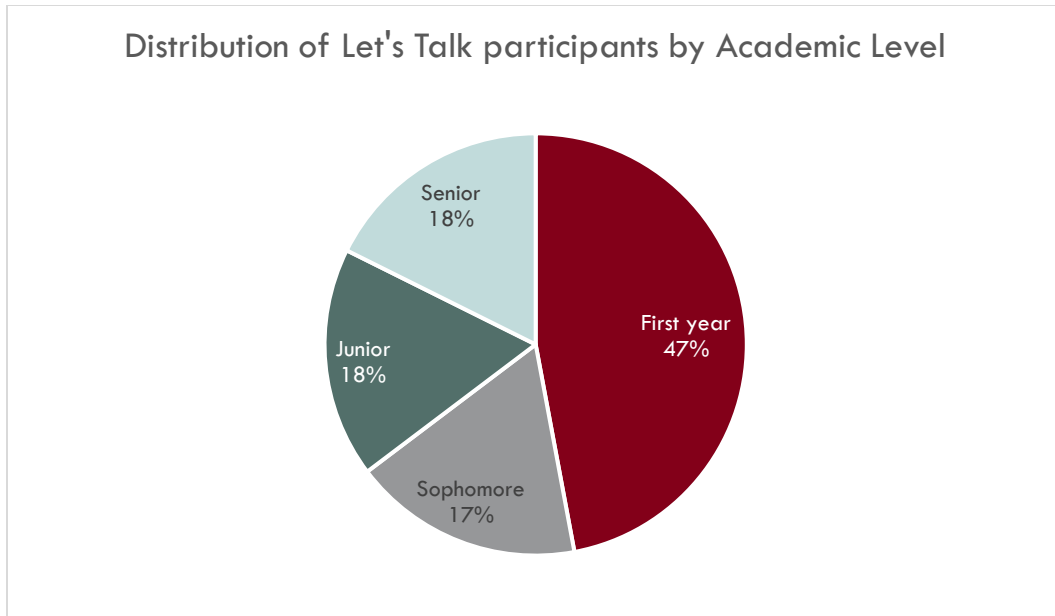


LET'S TALK:

- Consistent with the CTC value of inclusion, CTC has established the Let's Talk consultation program. Based upon the model developed at Cornell University, this program attempts to reach underserved populations at UWL who might be unlikely to seek traditional mental health services. Let's Talk visits remained drop-in and in-person in 2023-24, located in the Office of Multicultural Student Services. Only 17 Let's Talk visits took place during the entire academic year. When establishing the program initially, we observed that it took some time for the campus community to become aware of the service and make the most use of the drop-in consultations. Let's Talk is anticipated to remain in-person for the 2024-25 academic year and expand to a second location at the Student Union. Marketing and outreach efforts will focus awareness on Let's Talk.
- 70.6% of students at Let's Talk had never utilized CTC services before; this was their first point of contact/access. As a result of their Let's Talk visit, about 65% of students were referred to a CTC counseling service (See graphic below).

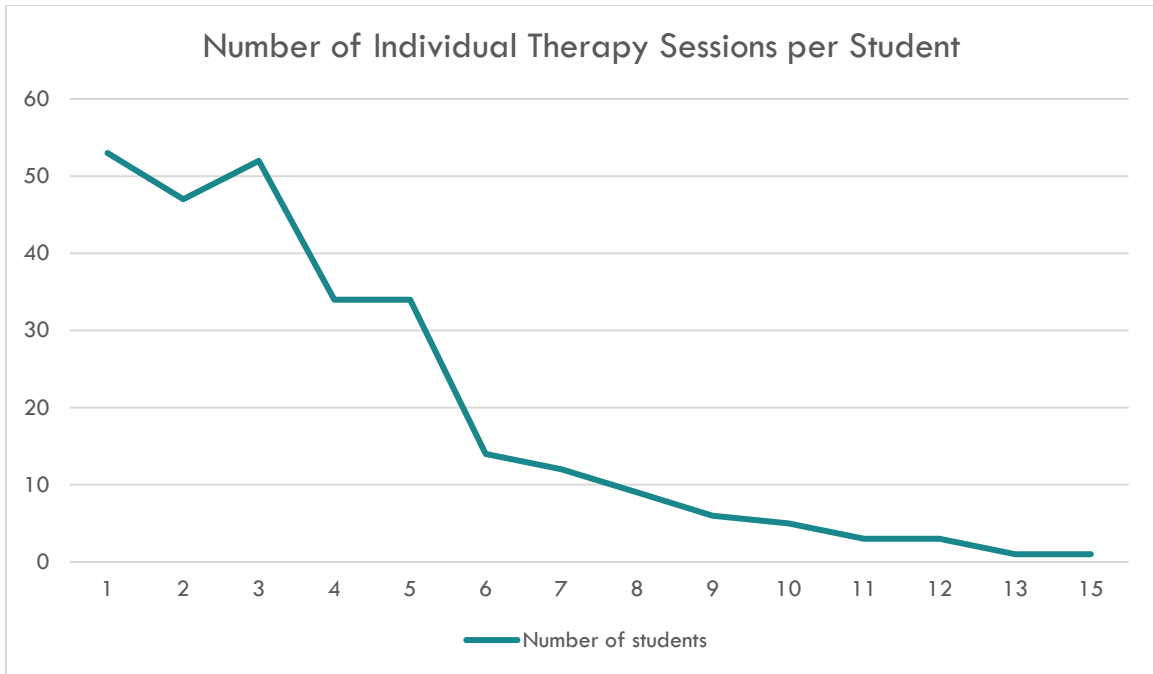


- When demographic information was available, individuals who used Let's Talk resources over the 2023-24 academic year identified similarly to other CTC clients in many aspects. 23.5% of the students accessing Let's Talk this year identified as male/men. The distribution of students by class standing included a greater percentage of first-year students (47.1%) compared to the percentage accessing any CTC services (29.1%; see graphic below).



Intake and Individual Therapy

- Intake sessions serve the purpose of continued assessment and treatment planning, generally to establish individual counseling services at CTC. They are scheduled most often from triage. Intake visits represented almost 14% of CTC sessions this year.
- Our most frequent session type is individual counseling sessions, representing 45.5% of our attended visits. The average number of individual therapy sessions per client was 3.8, with a range between 1 and 15 individual therapy sessions per client. Ninety percent (89.8%) of clients in individual therapy were seen for 7 or fewer sessions. The brief model of CTC treatment no longer indicates a specific session limit, but clinicians are encouraged to use case consultation for treatment planning before a student is seen for the 8th individual therapy session, as the student accessing the amount of treatment at CTC may be better suited for another treatment modality. Only 8 clients were seen for more than 10 individual therapy sessions in the calendar year, representing 2.9% of the clients seen in individual therapy and 9.2% of the counseling sessions provided. These statistics demonstrate that most CTC clients are seen within a brief therapy model, even in the absence of a session limit. They also indicate that CTC clinicians are, even more often than in past years, treating students within a brief model.



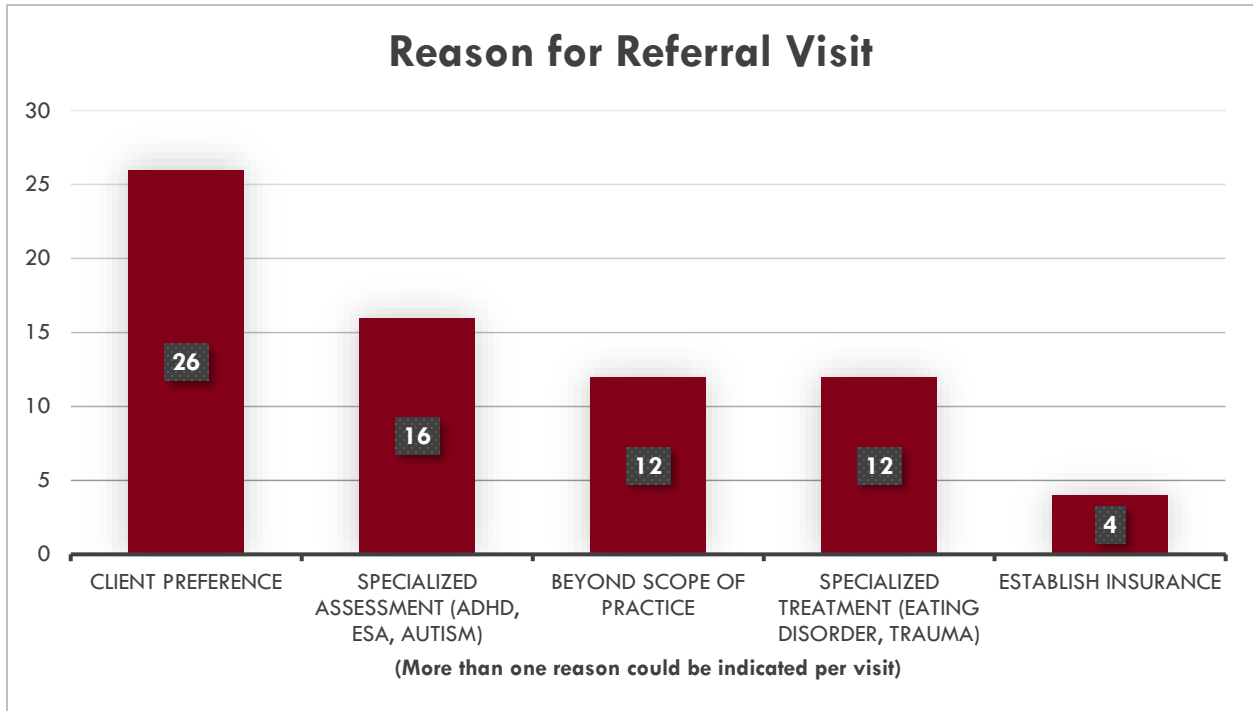
Urgent Care

Students can access a same-day crisis session every day that the CTC is open. Urgent Care visits represented 3.8% of overall visits. Urgent Care visits accounted for 81.5 hours of immediate-term crisis care provided to students.

Referral Visits

CTC Counselor, Chad Walters, LPC, became the Counselor/Clinical Case Manager in August 2023. Without the need for all clinical staff to assist students with case management and referral support, the referral visit type frequency increased significantly. Due to the staffing of a dedicated clinical case manager, self-referrals (students scheduling online without first going through triage) were allowed and could be scheduled online.

During the 2023-24 calendar year, 60 referral visits were completed, almost always to facilitate care with a community provider. The chart below summarizes the reasons for referral visits. Note that “beyond scope of practice” represents a clinician’s recommendation for longer-term care due to the presenting concerns (see CTC scope of services document on our website for more information), while “client preference” represents those students choosing for themselves to establish care in the community.



Group Counseling

In a notable change to our groups program this year, Ashley Jochimsen, LPC, who has chaired the Groups Committee and championed the program during her time at CTC, has accepted a re-titling to Counselor, Groups Coordinator.

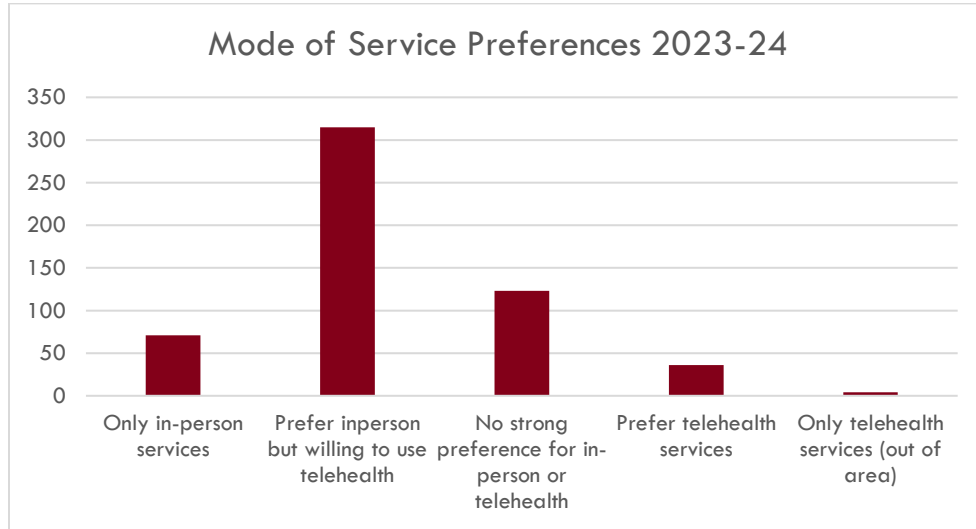
In addition to individual direct service contacts, the CTC offered group counseling options this academic year which were underutilized. Clinicians shared that they found it challenging to find students willing to participate in groups, willing to commit to weekly group meetings, and able to attend groups at times planned. Despite efforts to create more enthusiasm for group services and educate clinicians on how to make group referrals, no significant increase in group services occurred.

Our 3-session structured group workshop, Pathways, ran for 9 series in Fall and only once in Spring. 21 students took part in Pathways workshops. A total of 39 possible Pathways series were offered, and were frequently cancelled due to a lack of any referrals. Four additional Pathways series in Spring were cancelled when participants no-showed or only one student was referred to the workshop.

Despite a variety of group offerings, 12 total group options, two therapy groups accumulated enough participants to run each semester. Grief and Loss and Coping to Calm groups represented the specific topic area groups that took place. A process group also took place each semester, representing the first time in many years that Understanding Self and Others could be facilitated. In all, 16 students took part in group services over the course of the year.

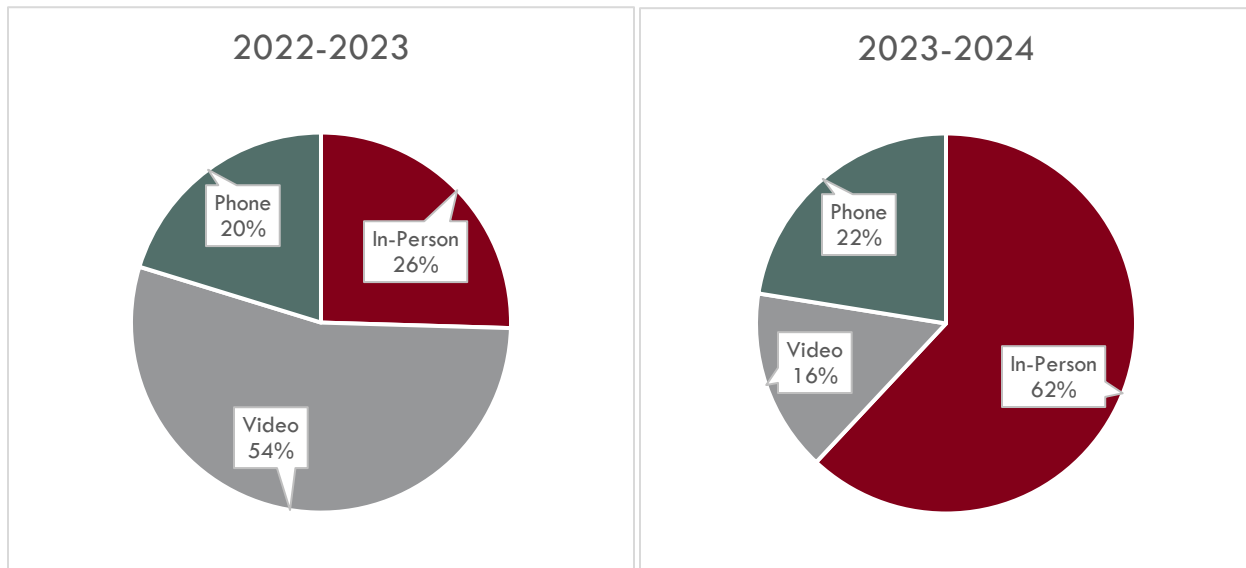
Telehealth Services

Though pandemic restrictions on services are no longer in place, students appear to appreciate the option of taking part in virtual counseling appointments with their CTC provider. At initial contact, students were asked about their preferences for telehealth versus in-person services, and nearly 80% of students responded that they had no strong preference for telehealth versus in-person services, or that they preferred in-person services but were willing to take part in telehealth services.



This finding was also consistent with outcome data obtained from post-service surveys. Of former CTC clients who responded to the Learning Outcomes Survey (see page 19), 27% indicated that they preferred telehealth sessions to in-person sessions, compared to 16% of counseling clients at all UW campuses.

CTC providers continued to deliver an increasing proportion of services in person, as illustrated in this comparison to last year's services. Phone appointments are most commonly triage services.



Indirect Services

Outreach

Outreach programming activities are the most diverse programming function of the CTC. The outreach goal is the delivery of preventive, consultative, educational, and developmental programs to the UWL campus' students, staff, faculty, parents, as well as various civic, health, and educational institutions in La Crosse and surrounding areas. The formats range from classroom presentations, speaking at conferences, workshops, tabling events, and community networking. All of the CTC clinical staff participate in outreach in some capacity.

CTC staff provided a total of 126 outreach events this academic year, and we reached 4,300 individuals. Consistent with 2022-23, outreach impact is based on headcount of a variety of event types including tabling and screening of student-athletes. An increased number of tabling events were completed due to the assistance of our practicum/intern, Ms. Ana Mendoza. The report does not include the summer 2023 START program (STudent Advising, Registration, and Transition), which provided basic information about CTC and mental health supports on campus to 2,331 incoming first year students and many of their supporters.

Our most requested programs are related to learning about the CTC services. Outreach also includes crisis response and supportive presence at potentially distressing events. The impact of campus tragedies requires response and processing. CTC staff members were involved in going to spaces on campus most impacted, were a supportive presence at processing spaces with a focus on students, but also assisted affected faculty members.

CTC continues to maintain an Instagram account (@uwlctc) to provide timely and accurate information about our services and increase mental health literacy. The Instagram account currently has 299 followers. In total, 90 posts were created, and social media collaborations took place with Wellness, Violence Prevention, and the Leadership & Involvement Center.

In addition to our usual outreach services, CTC also collaborated with the Minds Matter Committee to promote a Wellness Week of online content relevant to mental health promotion. Minds Matter is a major quality initiative linked with UWL's Higher Learning Commission accreditation. During the Wellness Week, October 9-13, 2023, UWL's flagship social media accounts (@uwlax) promoted information from YOU@UWL and other on-campus resources in specific topic areas.

- Monday: Mindfulness and balance
- Tuesday: Academics and grades
- Wednesday: Sleep, stress and anxiety
- Thursday: Financial and basic needs
- Friday: Fitness and nutrition

3,418 accounts engaged with content on the first day of the Wellness Week. We also saw more than twice the amount of usual engagement on YOU@UWL compared to a usual Fall semester week, as represented in the table below.

	Non-programmed week (9/24/23-9/30/23)	Wellness Week (10/8/23-10/14/23)
Total logins	74	182
Student registrations	24	57
Wellness goals created	3	14

Relaxation Room

The CTC Relaxation Room continued to be a resource for students this academic year, but changes between the EMR systems did not allow use of the Relaxation Room to be tracked consistently. We will work to track use more accurately in 2024-25.

Outcome Data

Counseling Impact, Learning Outcome, and Client Satisfaction data is solicited from every student who receives services at CTC. UWL participates in a UW-wide initiative, the Counseling Impact Assessment Project, through Catalyst at UW-Stout. CIAP assesses learning outcomes and client satisfaction in a standardized fashion. The Learning Outcome Survey (LOS) is comprised of three subscales: Intrapersonal Learning Outcomes, Academic Outcomes, and Client Satisfaction.

At the end of each semester, clients are sent an email with an invitation to access the LOS survey at a protected website. Data from this survey are combined with information from Client Information Forms (CIFs) completed by each student who accesses counseling services. The CIAP annual reports include individual and aggregate data from all UW campuses. These reports are completed and shared with each participating Director in late summer every year. Therefore, at this time, data from the 2023-24 academic year are not yet available.

Information from the 2022-23 academic year was reported in November 2023 and can be accessed at <https://www.wisconsin.edu/student-behavioral-health/get-the-facts/>. The data suggested that counseling services are effective and help to retain students. Highlights of this report include:

- 81% of students who accessed UWL counseling services improved on the issue for which they sought counseling.
- 77% of CTC clients reported an increase in their well-being from the time they started counseling to the end of the academic semester.
- Of UWL students who used CTC, 91% would recommend CTC to a friend.
- Of CTC clients who identified at the start of treatment that they were thinking of leaving UWL, 77% said that counseling helped them stay at UWL.
- 78% of clients rated the effectiveness of CTC services as good, very good, or excellent.
- 88% of clients rated the quality of CTC services as good, very good, or excellent.

Supervision and Training

The CTC continues to offer supervision and training to both CTC staff members (who are post-graduate and seeking hours toward licensure) as well as practicum/internship Master's-level clinicians-in-training. During the 2022-23 academic year, the CTC staff provided supervision to 4 staff members seeking independent LPC licenses. To support these efforts, supervisors maintained Supervision of Supervision group meetings. In addition to formal clinical supervision, all CTC clinical staff all participate in weekly case consultation meetings, as an opportunity to engage in peer supervision and consultation. Master's-level intern, Ana Mendoza, BS, completed 150 direct service hours as required by her Master's program during the 2023-24 academic year. CTC looks forward to being joined by another practicum/intern in 2024-25.

TESTING SERVICES

– section authored by Criss Gilbert, Testing Coordinator

Testing Mission, Vision, and Values

The UW La Crosse Testing Center remains the longest-serving testing center in the Coulee Region. We administer exams for admission, certification, licensure, employment screening and UW course placement. The Test Center embodies the *WISCONSIN IDEA* that education should impact people's lives beyond the classroom.

Outstanding customer service and the ability to find and deliver niche exam programs that serve our students and the community, combined with a superior testing experience, have contributed to our longevity and high esteem amongst our peers. We draw from a candidate pool in the tri-state area and beyond. It is our genuine desire to create an environment where each candidate can fully participate in learning and skills development, demonstrating their knowledge and strengths through scientifically validated assessments in a secure yet stress-free setting.

Vendor Based Testing

EDUCATIONAL TESTING SERVICE

Demand for ETS exams continues to decline. While many prestigious colleges & universities are reinstating testing requirements, the vast majority of schools in higher education remain test optional. The option to *TEST FROM HOME* using a remote proctor impacted tests delivered in test centers.

Since its inception in 1949, ETS concentrated on testing of an educational nature, i.e., admissions, credit by exam, teacher certification, English as a Second Language. In January 2024, ETS announced they had purchased PSI, a major testing vendor with a focus on industry, financial, government and private sector certification and licensure. This has strengthened ETS' position for growth in a changing testing landscape. Although they remain separate test providers at present, shared services will undoubtedly benefit both sides of their new equation.

PEARSON, PSI, IQT, MEASURE LEARNING, PROMETRIC

The CTC Testing Center works with a dozen test providers delivering a mix of exams for education, business, government, industry, and the private sector. These exams benefit UW La Crosse students, the residents of the Coulee region and beyond.

PSI has become our largest provider, delivering over one thousand exams in 2023-2024, nearly one half of our total volume. While their contract with the WI DNR ended in March, demand for WI Insurance licensure continues to be strong. In January PSI began delivery of the ASWB (American Social Work Board) certification exam. PSI also delivers a wide variety of medically related certification exams.

The volume of Pearson exams has waned. Changes in the testing requirements to obtain a teaching certificate in Wisconsin impacted the number of Foundations of Reading Test we have delivered.

IQT (ISO Quality Testing) has remained strong with high demand for Cosmetology, Alcohol & Drug Counselor certification, and certification for Nuclear Medicine Technologists.

Measure Learning offers a wide variety of exam programs, including the ACE Personal Trainer & Board of Certification for Athletic Trainers, required by UW La Crosse students. Measure offers a large suite of exams for certification in the medical field. Measure also holds the contract for delivering the UW Placement Tests.

OTHER TEST VENDORS

We also offer exams from CLEP, DSST, ProV, National Testing Network, Kryterion, ACTFL, and PAN (now PSI TruTalent). These lower-volume vendors rotate daily so that we offer exams from each vendor at least once a week. We often adjust scheduling to meet special testing opportunities at the request of vendors.

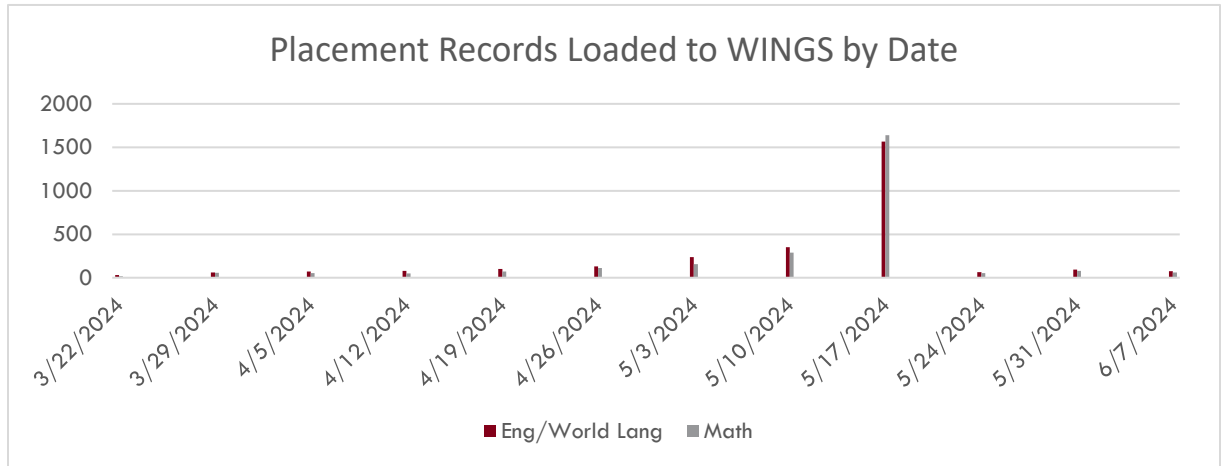
In November Pearson announced the retirement of the Miller Analogy Test. This venerable exam served as an alternative admission exam to graduate programs because it was shorter and less expensive than the GRE. Declining numbers since the pandemic resulted in Pearson terminating this testing program. A complete list of exams provided is included in [Appendix E](#).

VIDEO SURVEILLANCE SYSTEM

The DVR video surveillance system, upgraded in spring 2022, incorporates nine cameras covering all testing spaces on one DVR unit. In May 2024, several cameras were upgraded to higher resolution devices. Using the March Command Client software, the video can be viewed from any computer within the UW-L Intranet subnet node in CTC.

UW Placement Testing

UW La Crosse utilizes an un-proctored, on-demand, exam for Math, English and World Languages. Meazure Learning provides & maintains the testing platform. Registration opened on March 15, 2024. Once registered the exam is available to students on demand, 24/7 to take on their own device (laptop, tablet, desktop computer). The Office of Admissions loaded more than 5224 test records to WINGS between March 15 and the beginning of START on June 10. These numbers are not included in the totals of tests delivered.



Date loaded	English & World Lang	Math	TOTAL
3-22-24	30	18	48
3-29-24	60	56	116
4-5-24	73	53	126
4-12-24	78	50	128
4-19-24	102	71	173
4-26-24	130	111	241
5-3-24	237	155	392
5-10-24	352	288	640
5-17-24	1566	1368	2934
5-24-24	65	53	118
5-31-24	95	78	173
6-7-24	75	60	135
TOTAL	2863	2361	5224

Test Center Staffing & Hours

Richard Athey left the UW-L Test Center in November to return to teaching in Thailand. In January we hired UW-L graduate Jamison Johnson to staff the Test Center three days a week. Jamison is an adaptive & quick learner who passed numerous test vendor certification exams in rapid order.

C. Criss Gilbert qualified with the National College Testing Association as a Certified Proctor during NCTA's initial proctor certification cycle. NCTA offers this new certification in response to the industry's need for standardization of professional competency across sites, jurisdictions, and types of testing.

Paper/Pencil Testing

Paper/pencil testing has continued to decline post pandemic. SAT went fully digital in March 2024 as a *Bring-Your-Own-Device* exam. UW-L was an early adopter, delivering the exam on March 9 to thirty-six students. ACT remains the only paper/pencil exam we administer. ACT numbers are declining. ACT cancelled three administrations at UW-L in 2023-2024 due to low registration. ACT recently announced a collaboration with a large investment firm, shifting from a non-profit to a for-profit company structure.

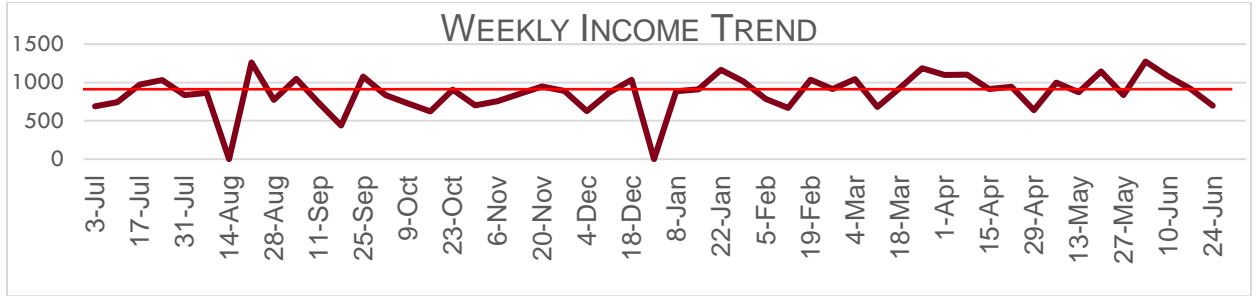
Data Collection in 2023 – 2024

The Test Center gathers data to see the larger picture of our impact on education in SW Wisconsin. Responses are based on 2,019 candidates with a no show rate of 5.6%.

Are you a UW-L student, alumnus, faculty, or staff?	25.85%
Are you a student, alumnus, faculty, or staff at another college/university? If yes, where? _____	41.90%
Are you a La Crosse community member or from the Coulee Region?	46.06%

Test Center Income

Income July 1, 2023, to June 7, 2024, = \$41,411.96
 AVERAGE DAILY INCOME = \$187.38
 AVERAGE WEEKLY INCOME = \$936.92
 AVERAGE MONTHLY INCOME = \$3,681.06
 Highest weekly income = \$1,273.00, week of June 3, 2024
 Lowest weekly income = \$438.00, week of Oct 18, 2023



Red line represents the average weekly income of \$936.92 for 2023 – 2024.

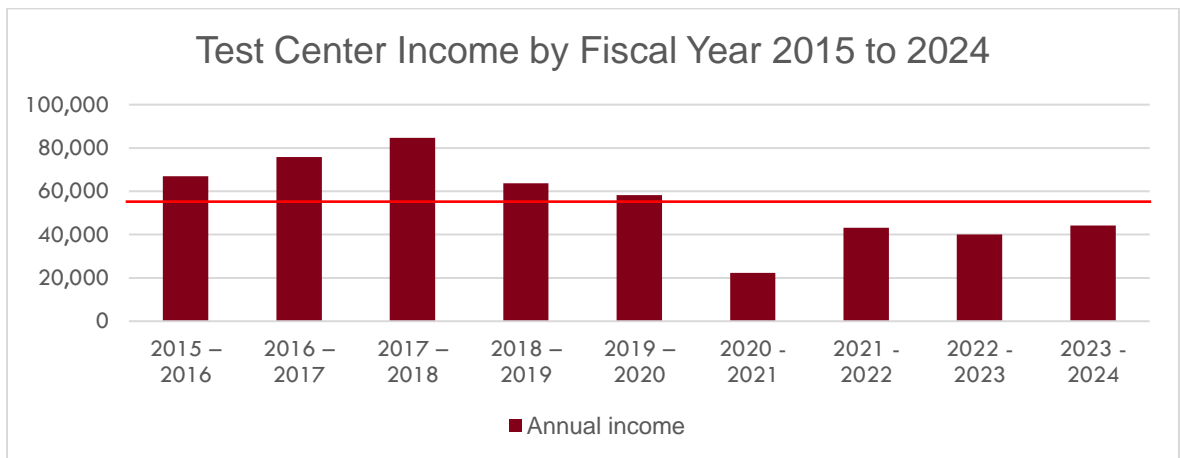
INCOME BY DAY OF WEEK

Tuesday remains the weekday with the highest income.

Monday	\$7,996.47
Tuesday	\$10,769.25
Wednesday	\$7,271.00
Thursday	\$7,664.25
Friday	\$7,740.99

INCOME TRENDS

Test Center income is slowly recovering from the impact of a six-month closure during the 2020 Covid 19 pandemic. This is aided by opening more seats, adding new exam programs, and adroitly adjusting the schedule based on data we gather. Average annual income over the past nine fiscal years is \$55,456, represented by the red line in the chart below. With two weeks remaining in fiscal year 2023 – 2024 we expect to reach \$44K by the end of June 2024.



2015 – 2016	\$66,949
2016 – 2017	\$75,821
2017 – 2018	\$84,704
2018 – 2019	\$63,687
2019 – 2020	\$58,284
2020 – 2021	\$22,255
2021 - 2022	\$43,197
2022 – 2023	\$40,037
2023 - 2024	\$44,172 (est.)

CTC DEPARTMENT-WIDE EFFORTS

Diversity and Inclusive Excellence

CTC’ Diversity Committee, chaired by Dr. Teresa DePratt, Psychologist and D&I Liaison, focuses on coordinating CTC’s D&I efforts because, consistent with our mission, vision, and values, D&I efforts are the responsibility of all CTC staff. CTC staff consistently engage in training for all staff and clinical staff (see Professional Development section). In addition to this professional development, our office engaged in the following:

The CTC Diversity Committee engaged in several training workshops related to diversity in our weekly staff training time (see above). This year, topics covered included:

- Collaboration & Outreach, specifically with the Office of Multicultural Student Services (OMSS), CTJ (Center for Transformative Justice), International Education & Engagement (IEE), Multicultural Student Orgs (MSOs), and McNair Scholars
- Began offering counseling services in Spanish
- Marketing of and attendance at D & I Department, Multicultural Student Org, and Diverse Community Events via Events Board at CTC
- Participated in as performers and attended the UWL Annual Drag Show
- Seminar, volunteering, and attendance for Social Justice Week

CTC continues to create equity goals despite a time of transition for the UWL Equity Liaison program. We are hopeful that stability in higher leadership roles will allow the program, or something like it, to resume soon.

Professional Development

During 2023-24, the entire CTC staff engaged in professional development opportunities across a range of topics and modalities. For the fifth year in a row, we facilitated two all-staff diversity trainings, in August and January, focused on identity development and disability justice. Consistent with CTC's value of Inclusion, several of our clinical staff trainings focused on mental health as it related to ongoing CTC diversity initiatives.

Regularly scheduled clinical staff training time, coordinated by primarily by Bec Johnson, LPC, and facilitated by clinical staff as well as external, guest speakers, gave CTC staff members the opportunity to learn from one another and learn together. The training schedule continued with two, 90-minute meetings per month, to allow for deeper discussion of the topics offered.

Examples of staff training topics included, but were not limited to: Mantra Health services, Risk assessment and documentation, Treatment planning, Eating disorder assessment, CCAPS assessment, EMDR, Dialectical Behavior Therapy, Problem-Solving Brief Therapy, Sociopolitical stress and mental health, and Internal Family Systems.

All clinical staff members participated in individual continuing education training, deepening their knowledge and skills in several areas of interest. This included presenting to professional organizations, such as the Wisconsin Area College Counseling Conference (WACCC). A second counselor attended intensive EMDR training and started to practice with students, and Ashley Jochimsen, LPC, continues to work toward requirements for certification in EMDR. Eight CTC clinicians attended WACCC together, hosted by UW-Milwaukee. One clinician attended a national conference (American Counseling Association- ACA).

University and Other Professional Service

The CTC staff has a strong commitment to the service mission of the University. The following is a sample listing of the service contributions by the CTC staff: Violence Prevention Advisory Committee, CARE Team, Multicultural Student Scholarship Golf Outing Volunteering, Student Affairs Division Mentorship Committee, Student Advising Registration and Transition (START), Residence Hall Move-In Volunteering, Alcohol Working Group, Wellness Week Task Force, and various Search and Screen Committees. Criss Gilbert continues to be a strong leader among the National College Testing Association (NCTA) and serves as the Centennial Hall Building Manager. Finally, CTC staff consistently engage in mutual consultation with fellow members of national organizations (ACCA, Association for University and College Counseling Center Directors) and their counterparts at other UW System institutions.

Many clinical consultations were provided to the staff, faculty, parents and students throughout the year. The clinical staff consults about counseling services, student problems, and questions regarding resources. Discussions are always governed by confidentiality standards. This type of indirect contact is not associated with a clinical visit and is not easily recorded statistically, but still warrants recognition of the time for a clinician to provide the consultation, follow up, and document.

Goals from 2023-24

A final version of the CTC strategic plan goals for 2023-24, with outcome information on all of the action steps taken this year is available in [Appendix F](#). Goals for 2023-24 included a communication goal, a professional development goal, an equity goal, and a test center continuity goal.

Accomplishments from 2023-24

Summer pilot project for drop-in initial contacts. In 2022, Bec Johnson, LPC, in their role at the time as Training Coordinator, applied for and won a \$20,000 grant to support agencies who employ Qualified Treatment Trainees (QTTs). CTC used the QTT grant funds to support EMDR training for an additional staff member, EMDR supervision toward certification for a previously trained staff member, and expanded Summer 2023 clinical services including a pilot program for drop-in access to initial appointments. Grant funds paid salary and fringe benefits for 4 of CTC's 10-month clinicians to return for limited clinical services, including a provider who was receiving supervision toward licensure. The Summer 2023 service delivery model included all drop-in initial appointments, staffed by the Urgent Care clinician on call, which were primarily in-person triage contacts. As a result of this pilot project,

- 32 unique students were served.
- 16 drop-in triages took place, and one student was seen for an urgent care visit.
- 18 students took part in individual counseling services, 8 of those receiving treatment services from 10-month staff paid through the grant funds.
- 17 EMDR sessions were provided.

The pilot project proved that drop-in triage services were a viable means of managing clinical flow during interim periods. Drop-in triage services were implemented during other interim periods in the 2023-24 academic year, including August, winter term, Spring Break, and May, and they will continue to be utilized during interim periods in future academic years.

Management of returning clients. In previous years, a student who returned to care from one academic year to the next with the same provider was allowed to bypass the triage system and book directly with their previous provider in a Returning Intake appointment. Several concerns were identified with this practice, including difficulty managing clinical flow for clinicians with a long tenure at CTC (and therefore a larger cumulative caseload of potential returning clients), inequity of service delivery between students who may have received extensive past services versus those students who had not yet benefitted from CTC services, and lack of intentional assessment and treatment planning for returning students. In August 2023, CTC stopped making Returning Intake appointments and directed all students seeking counseling services through the triage system, regardless of prior treatment.

During Fall 2023 (most returning students resume care in the Fall semester) 103 returning clients booked triage appointments, almost 15 percentage points more than Fall 22. About 11% more triage appointments had been incorporated into the schedule to accommodate the increased number of returning intakes, based on past average Returning Intake appointments. Due to decreased overall demand during 2023-24, the larger number of returning students did not result in an increased wait time for triage appointments. There was concern that students might respond negatively to reassessing their treatment plans or potentially being recommended to work with a different clinician. Overall, students who took part in returning triage visits attended more counseling

appointments on average (4.01) compared to all CTC clients (3.5). Clinicians responded favorably to the intentional reassessment of treatment goals, even if the client returned to work with the same provider again after re-triaging.

Electronic Medical Record transition. UWL's Student Health Center is being managed by Mayo Clinic Health System, and their organizational goal is to move SHC records to the same EMR system used by the larger Mayo Clinic organization. For about the past 12 years, CTC and SHC had shared a medical record, Point and Click. During that time, CTC had found the EMR less suitable for counseling department needs than medical department needs, desired features were very frequently associated with increased costs, and technical support was unresponsive. With the opportunity to dis-integrate records with SHC due to their transition, CTC sought out an EMR with purpose-built counseling features and increased customization and access to technical support. In January 2024, CTC services transitioned to Mediat One Counseling (M1C) for all clinical scheduling, documentation, and record keeping. While transitions are always difficult, especially mid-year, the transition to M1C has offered many opportunities, such as,

- Custom creation of note templates, forms, surveys, and questionnaires.
- Granular control of communication with students including specific reminder messages for different appointment types and specific cancellation/no show messages tailored to each situation.
- Permission for students to upload documents, such as signed releases and completed schedule forms, to the patient portal.

In order to continue our close collaborative relationship with the providers at UWL SHC, we worked together with SHC staff to develop a plan for record sharing and implemented a monthly meeting with a SHC provider to discuss shared behavioral health patient/clients.

Center for Collegiate Mental Health membership. As mentioned above, CTC joined the Center for Collegiate Mental Health (CCMH) in 2024, giving us access to more resources and national comparison data. Benefits have included use of the Counseling Center Assessment of Psychological Symptoms (CCAPS) instruments. CCAPS surveys are presented to clients before each individual counseling session to get a brief assessment of their functioning, monitor progress, and compare symptom recovery to a comparable national sample of college students. Also, CTC has access to a screening instrument that can be used anonymously for students to assess their own symptoms and get recommendations, as well as for large scale mental health screening events, such as the NCAA-required pre-participation screenings for student-athletes. Joining CCMH also includes CTC in the Clinical Load Index (CLI) sample for national comparison of service delivery models. CCMH provides free continuing education training webinars, and CTC clinical staff participated in two of these webinars this year. Finally, CCMH membership will give CTC access to use of the Standardized Data Set (SDS) questionnaire, allowing us to more easily create demographic surveys, standardize the assessment, and compare UWL students to system and national samples.

ADHD testing. CTC stopped providing ADHD testing to students with the end of our postdoctoral residency training program in 2019. Since that time, it was unclear if a return to this type of specialized assessment was realistically possible. With consultation among other UW campuses and continuing education training last year, we decided to explore resuming our ADHD testing program. During 2023-24, CTC Assistant Director Bec Johnson, LPC, with assistance from Counselor/Clinical Case Manager Chad Walters, LPC, researched, planned, and implemented a pilot testing protocol. Two students were assessed at the end of the Spring 2024 semester. With the success of this pilot, CTC will train independently licensed providers to administer the assessments in August 2024. We

have also engaged UWL SHC providers in conversation about the testing program, to ensure that students can receive coordinated services on campus.

EMDR treatment program. In Fall 2022, our first cohort of staff participated in training to provide Eye Movement Desensitization and Reprocessing (EMDR) therapy, a specialized treatment for trauma and other mental health concerns. The first clinician to complete that training, Ashley Jochimsen, LPC, is making significant progress toward certification in EMDR. In Fall 2023, Katelyn Longmire, LPC, participated in her initial intensive EMDR training and has expanded the EMDR services available to students. In Fall 2024, a third clinician, Bec Johnson, LPC, will also be trained in EMDR. This method of treatment has been very effective for student whose underlying trauma responses have interfered with their response to traditional treatment. We are excited to continue to expand this resource for UWL students.

Challenges during 2023-24

Recruitment and retention of staff continue to be a concern across campus. CTC has experienced challenges with the retention and recruitment of both clinical and non-clinical staff members.

The Fall 2023 semester began with four open positions (Three counselors and the Training Coordinator), as Chad Walters, LPC, transitioned into the Counselor/Clinical Case Manager position, and Kirsten Krueger, LPC-IT, joined the staff in August 2023. As we continued recruitment, two additional counselors, Kristine Adams, LPC-IT, and Chelsea Schaffer, LPC-IT, joined CTC in November 2023. We learned during Spring 2024 that Dr. Teresa DePratt, Psychologist, D&I Liaison, is leaving UWL in Summer 2024. We have collaborated with our partners in D&I to reframe the position and post for a new staff member who will be an Underserved Populations Coordinator. The Training Coordinator position remains open.

At the front desk, due to difficulties with retention of staff, it was determined that a position could be shared between CTC and another department (Multicultural Student Services) with the advantages of recruiting for a full-time, benefitted position for candidates and meeting the financial constraints of both departments. Rachel Friedl joined CTC and OMSS in May 2023 in this new combined support position. Rachel ultimately decided to leave UWL in December 2023. Due in part to challenges in coordinating between departments with significantly different needs, we recruited RJ Lynch for a part-time Front Desk Associate position, starting in May 2024.

In the CTC Test Center, Richard Athey, who had joined us as a .75 FTE Test Center Associate in February 2023, left UWL in November 2023. Jamison Johnson joined CTC in the TCA role in January 2024. Testing Center Coordinator and Office Manager C. Criss Gilbert, who has served the institution and testing community with diligence, expertise, and grace, plans to retire in May 2025. We will be working with campus partners to develop a plan for this position and the Testing Center.

Turnover of staff affects our students and examinees, our campus and community partners, and our remaining staff. We have been fortunate to retain and recruit staff who maintain a strong commitment to the mission, vision, and values of CTC, resulting in the maintenance of a base level of professional and competent services. However, a continued lack of continuity in our positions may eventually result in the need to reduce the scope and quantity of services.

Because CTC salaries for clinicians and other staff are not competitive compared to the healthcare market in the La Crosse area, our positions have tended to attract newer professionals and those

needing supervision toward independent licensure. The additional time and energy required to onboard, train, mentor, and supervise our newer staff have created challenges for clinical and administrative supervisors. With Dr. DePratt's departure, CTC retains only two eligible clinical supervisors (Dr. Champion and Bec Johnson, LPC), who will provide clinical oversight to four full-time core clinicians and a part-time practicum/intern student. As a result of these challenges, ongoing recruitments have been adjusted to require independent licensure for incoming core clinicians and to potentially recruit two eligible supervisors in the Training Coordinator and Underserved Populations Coordinator roles.

Even though staffing levels would have slightly reduced available clinical services, many clinical hours were unused in 2023-24 due to an unexpected drop in demand for services. We are still trying to determine why fewer students sought services and fewer students persisted with treatment in the past year. We saw decreased demand for access point services, including Let's Talk, and we had difficulty creating partnerships with student groups to promote outreach services. In order to respond to this potential trend, in 2024-25, we will

- Increase marketing of access points, including Let's Talk and triage wait times.
- Diversify time and location of Let's Talk services to potentially reach more students more conveniently.
- Reduce emphasis on demand-management techniques (e.g., every-other-week scheduling, screening crisis appointments, referrals off-campus and to telehealth services), with the option to re-implement them if demand increases.
- Proactively communicate with student leadership and other campus partners to solicit feedback and provide accurate information about CTC service availability.

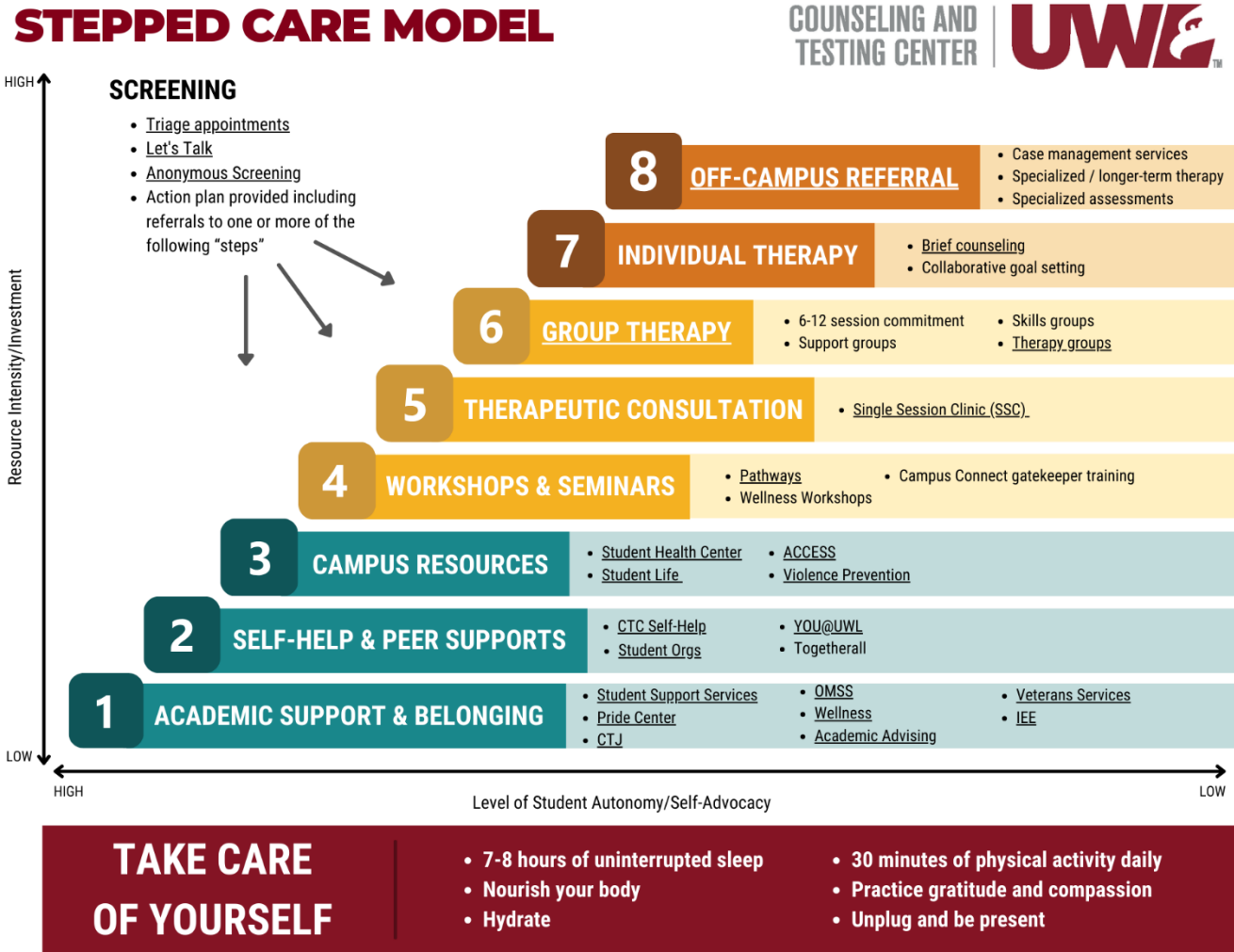
Initiatives and Goals for 2024-25

CTC's strategic plan goals for 2024-25 are still in development, awaiting the valuable input of our 10-month staff and new staff members. However, future directions are likely to include:

- 1) Crisis management & Emergency planning:
 - a) Collaborate with emergency management at University Police on Family Assistance Center planning (MOUs, procedures, etc.)
 - b) Recruit and train 2-3 additional nonclinical UWL staff for Campus Connect suicide prevention facilitation
 - c) Campus Connect training for Residence Life professional staff
 - d) Implement Recognize, Respond, Refer suicide prevention/student in distress training to replace Kognito
 - e) Develop CTC policy for clinicians in the event of client death by suicide
 - f) Incorporate Distress, Disruption, Danger information more completely into Students In Distress page
 - g) Implement simplified contact for 24/7 mental health support hotline
 - h) Review and simplify CTC crisis resource pages
 - i) Utilize clinical workshops to train staff in Urgent Care procedures and techniques
- 2) Communication:
 - a) Newsletter
 - b) Maintenance plan for CTC social media with instructions and considerations for continuity
 - c) Case manager and Director to community emergency responder meetings
 - d) Monthly guests at CTC staff meetings to increase awareness of resources

- e) Promote resources in final year of ARPA contract (Mantra, new 24/7 contact, Togetherall)
- 3) D&I Division Collaboration:
 - a) Recruit and onboard Counselor/ Underserved Populations Coordinator
 - b) Determine recommended changes to position expectations in collaboration with D&I Partners
 - c) Joint meetings scheduled quarterly between joint supervisors for UPC
 - d) Cultivate increased collaboration with MSOs
 - e) Extend Let's Talk services to second location
 - f) Coordinate between UPC and Outreach Coordinator to promote services within underserved communities
- 4) Testing Center Continuity:
 - a) Test center P&P document
 - b) Plan for continuity with Placement scores
 - c) Continued exploration of new exams and income/booking trends

Appendix A – CTC Stepped Care Model



Appendix B – Summary of direct services and client characteristics

Overall summary of direct services

During the calendar year, July 2023 through June 2024, 663 students received direct individual services. The CTC conducted more than 2300 direct service appointments during this calendar year. In terms of demographics, the most common identities among student-clients who received services in 2023-24 were cisgender woman, White, single, heterosexual, and 19 years of age.

CTC receives demographic data from various sources that may change over the course of a student's time at UWL or time in treatment, and we recognize that reporting is limited by the objective responses provided. The Client Information Form (CIF) is administered to all students who take part in initial appointments including triage and Single Sessions, at the first of these visits. (Thus, students who only interacted with CTC through consultation, referral visits, or crisis services are not represented here.) The CIF includes both selectable responses and the opportunity for clients to self-identify on a variety of identities. Because of the necessity of keeping consistency with other UWS institutions using the CIF, CTC cannot change the options provided on demographic questions, but we do encourage students to self-identify when desired. Electronic Medical Records may automatically assign some demographic data based on the WINGS registration system at that time, often information which has been provided from the student's application for admission. Students can also change some demographic information in their patient portal. The CTC is committed to gathering self-reported data as often as possible, as well as that entered through university registration, though some discrepancies may result in reporting.

Counseling & Testing Center Client Characteristics 2023-24

Gender Identity (self-identified by client on CIF)

Woman	66.7%
Man	29.0%
Transgender	1.0%
Self-identified (written response)	3.3%

(The most common self-reported gender identity was non-binary.)

Age (calculated at time of initial appointment)

Range: 18-41; Mode: 19

Sexual Orientation (self-identified by client on CIF)

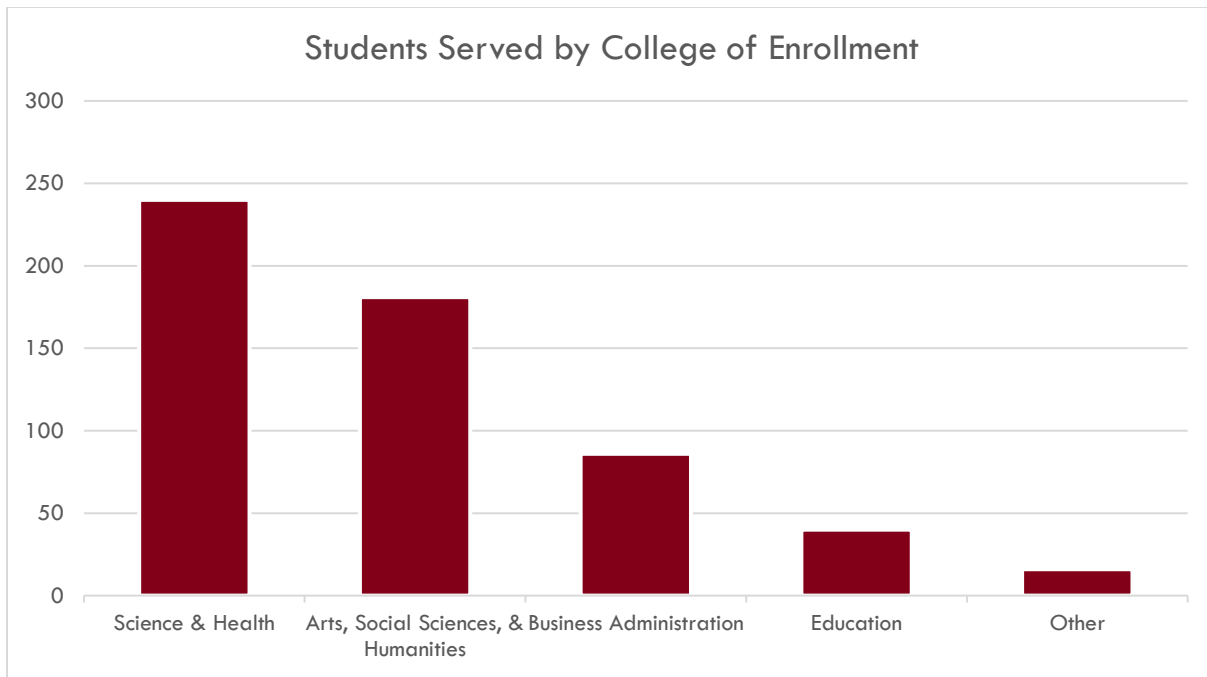
Heterosexual	74.2%
Lesbian	3.6%
Gay	2.5%
Bisexual	14.0%
Questioning	1.5%
Self-Identified (written response)	4.5%

(The most common self-reported sexual orientation was queer.)

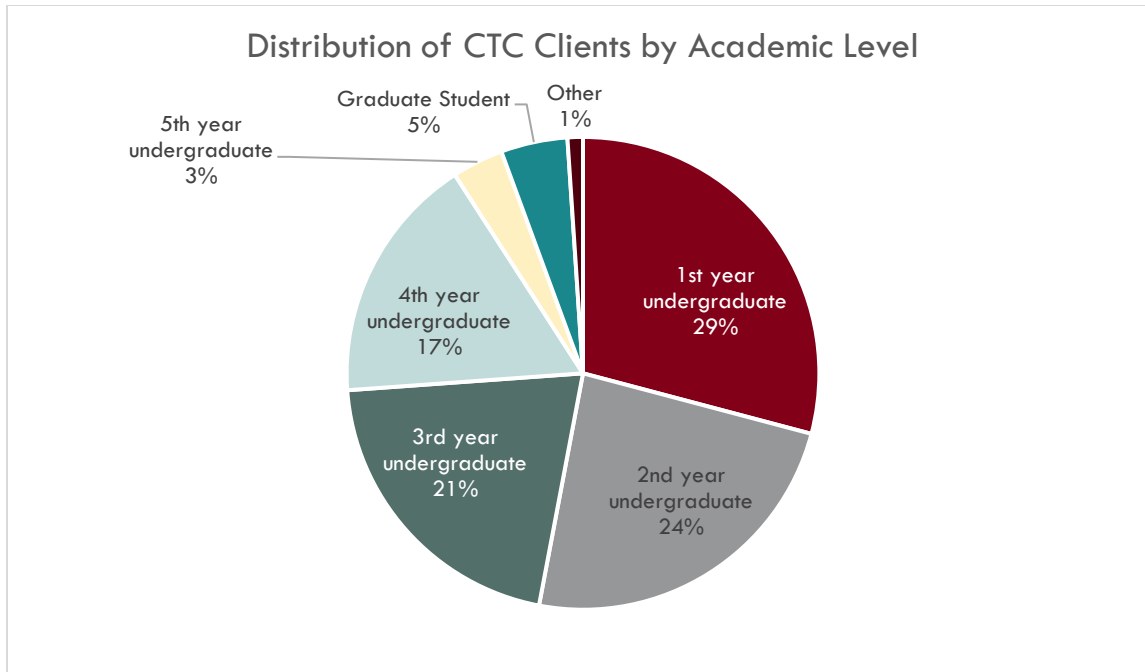
Race – (self-identified by client on CIF) *NOTE: Given the small number of enrolled students with certain racial identities (e.g., American Indian, Pacific Islander, etc.) we have collapsed data to protect confidentiality, not to dismiss identity by subsuming into more generalized identities or use of an other-type category.*

African American/Black	1.6%
Asian American/Asian	3.7%
Latinx	2.8%
Multiracial	2.5%
White	88.8%
Other racial minorities	0.6%

College of Enrollment (student self-report from CIF)



Academic Level (self-identified by client on CIF) *NOTE: Reporting categories changed this year across all UW campuses at the direction of the Counseling Impact Assessment Project committee.*



Other Identities (self-identified by client on CIF)

Transfer students:	72	13.3%
International students:	10	2.0%
Student-athletes:	56	10.7%

CIF = Client Information Form

Appendix C: Universities of Wisconsin mental health resource extension grant

Background

Tele-mental health and well-being services were expanded for 12 UW System campuses (excluding UW-Madison, where another telehealth vendor was in use) through a systemwide contract signed in October 2022. Services are covered through the 2024-25 academic year thanks to American Rescue Plan Act funds allocated to the UW System by Governor Tony Evers. The program consisted of three components:

- Mantra Health - Telecounseling and telepsychiatry services that serve as a supplement to, and coordinate with, campus-based counseling and psychiatry services.
- UW Mental Health Support 24/7 – Phone, text, and chat services with trained counselors, available 24/7. This service can be used for general support as well as crisis.
- YOU@College – A personalized well-being platform that directs students toward campus-based and online resources to promote academic and career success (Succeed), purpose and connection (Matter), and physical and mental well-being (Thrive). YOU serves as the digital “front-door” connecting students to the right resources at the right time.

Implementation

Each counseling center created their own protocols in cooperation with the vendors, taking into account the specific needs and resources on their own campuses. UWL was part of the last cohort to implement the expanded services. We went live with Mantra and UW Mental Health Support 24/7 on January 9, 2023. YOU@UWL went live on March 6, 2023, but due to the proximity of Spring Break, a campuswide announcement and social media campaign started for YOU@UWL on March 20, 2023. UWL has marketed YOU@UWL as the main resource-to-know for faculty and staff, given that the crisis and treatment resources can be accessed from the YOU site, and the philosophy that the general campus community can benefit most from general wellness resources.

Mantra Health

Between July 2023 and June 2024, 103 UWL students took part in Mantra counseling services, and 19 received psychiatry services.

Students could self-refer to Mantra services, and about 80% of students who created accounts self-referred. The remaining students were referred by CTC staff (37 students). Mantra referrals may have occurred because of client preference for extended scheduling (evenings or weekends), exclusively telehealth services, out of state services, or specific counselor identities available. (No referrals to Mantra telehealth would have occurred due to scope of services, as Mantra services are similar in scope.) Mantra providers saw UWL students for an average of 4.5 counseling sessions per student.

YOU@UWL

Between July 2023 and June 2024, YOU@UWL accumulated 880 unique account registrations (830 students) and 1,779 logins to the system. The most commonly accessed topics were Stress & Anxiety, Academics & Grades, and Finances & Basic Needs. YOU@UWL includes both universal and campus-specific resources created in collaboration with campus partners. 40.5% of the

resources accessed by UWL users were UWL-specific. The most frequently accessed UWL resource was the Student Health Center. Mantra Health's "Find a Counselor" link was accessed 26 times, and the crisis button was used 47 times.

UW Mental Health Support 24/7

There were challenges with accurately identifying which UW campus should be assigned to each crisis resource user. Ultimately, 46 users were determined to be affiliated with UWL between July 2023 and May 2024. Topics of concern and outcome data provided by the crisis response vendor were not disaggregated by campus.

Appendix D – Client-reported presenting concerns

Self-reported Concern (from Client Information Form completed at first contact; clients could choose as many as applicable)	% of clients who reported this concern
Anxiety/fears/worries (non-academic)	83%
Depression/sadness/mood swings	60%
Stress/Stress management	57%
Problems related to school or grades	44%
Friends/roommates/dating concerns	42%
Attention/concentration	36%
Low self-esteem/confidence	33%
Procrastination/motivation	31%
Sleep difficulties	26%
Eating behavior/weight/body image	24%
Shyness/social discomfort	18%
Choice of major/career	16%
Anger/irritability	15%
Grief/loss	12%
Physical symptoms/health	10%
Childhood abuse	9%
Suicidal thoughts/urges	9%
Alcohol/drug use	8%
Family/marital/couple concerns	8%
Self-injury	5%
Gender Identity	3%
Sexual assault/dating violence/stalking/harassment	3%
Bullying/Harassment; Cultural adjustment; Prejudice/Discrimination; Seeing/hearing things others don't; Sexual Orientation; Urge to injure/harm someone else	0.5%-2% each

Appendix E – Testing Center exams delivered, 2015-2024

COMPUTER EXAMS	2015 - 2016	2016 - 2017	2017 - 2018	2018 - 2019	2019 - 2020	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024
ACTFL	12	20	18	5	18	3	7	8	3
ACE	74	75	54	53	25	24	15	5	18
ASE	179	199	119	156	166	299	54	25	68
BOC AT	25	30	42	36	4	11	7	5	9
CLEP	37	54	42	24	39	41	31	30	30
DSST	21	25	11	2	6	6	16	5	4
FBI	0	3	3	12	8	6	7	2	7
FORT	186	237	200	226	153	123	192	115	88
Kryterion	19	33	33	30	34	21	38	33	32
GRE	513	573	548	572	351	231	195	124	74
ISO Quality	0	0	0	0	3	99	123	124	151
MAT	41	35	39	56	35	23	52	43	4
Meazure	75	132	16	31	14	18	11	11	41
MTLE	154	134	169	225	107	53	35	18	3
NTN	0	0	0	0	30	10	18	16	4
PAN other	123	32	31	27	23	29	123	66	24
Pearson other	105	122	161	159	134	47	28	44	154
Praxis	616	439	169	182	125	103	144	97	127
Proctored	0	0	104	105	29	28	60	59	63
Prov	8	22	36	21	14	0	0	4	1
PSI other	41	106	139	177	152	164	249	287	341
Smarter Proc	0	0	0	0	0	0	0	0	6
TOEFL	9	5	9	6	4	7	10	7	10
TSA	0	114	83	56	26	44	56	30	5
USPS	537	401	453	395	1	0	11	5	16
WI DRN Water	0	0	0	0	0	0	0	148	113
WI Real Estate	0	0	0	0	0	78	94	80	68
WI Insurance	0	0	0	0	0	244	359	368	555
SUBTOTAL	3059	3062	2541	2587	1534	1712	1935	1759	2019

PAPER/PENCIL EXAMS	2015 - 2016	2016 - 2017	2017 - 2018	2018 - 2019	2019 - 2020	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024
ACT	180	284	249	334	282	0	0	41	115
GRE Subjects	22	29	44	50	4	0	21	5	2
LSAT	77	98	96	92	77	0	0	0	0
SAT	133	153	158	176	147	0	10	53	140
UW Place	2065	2122	2108	2461	144	0	0	99	0
WI Dept of Ag	0	47	90	148	48	0	42	0	0
SUBTOTAL	2791	3045	3051	3296	877	0	73	198	257

GRAND TOTAL	5650	6107	5592	5883	2411	1712	2008	1957	2276
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Appendix F – CTC strategic plan goals, action steps, and outcomes 2023-24

CTC Strategic Plan 2023-24 Goal #1 – Communication goal

By May 31, 2024, the Counseling & Testing Center (CTC) will enact or strengthen communication strategies to provide accurate and timely information about CTC services and mental health literacy to students, faculty/staff, and community partners.

Action Step	Key person(s)	Complete By	Outcome
Create an interest survey for a CTC newsletter for faculty/staff.	Crys Champion, Andrea Matson	August 30, 2023	Created and posted on CTC website, as well as shared at semester opener event
Create a monthly newsletter to provide information about CTC services, trends in utilization, and promote mental health literacy.	Crys Champion, OPE Committee	October 30, 2023	Not completed, action step was deferred due to time demands of new EMR implementation.
Coordinate meetings between CTC Counselor/Clinical Case Manager and local mobile crisis providers, emergency departments, and larger community providers.	Chad Walters	December 15, 2023	Partially completed, due to relevance, connections with private practice providers were prioritized.
Increase collaboration between CTC and SHC providers by coordinating attendance at monthly provider meetings.	Crys Champion, Ben Crenshaw	January 30, 2024	Monthly meetings were arranged for case consultation with Amanda Hanson, APNP from SHC/Mayo.
Develop a plan for record sharing between CTC and SHC when medical records are de-integrated.	Crys Champion, Bec Johnson, Ben Crenshaw, Christy Lafleur	February 28, 2024	Completed.
Develop a more formalized structure to guide the scope and responsibilities of the Eating Disorder Treatment Team.	Katelyn Longmire, Ashley Jochimsen	December 15, 2023	Completed, group renamed to Eating Disorder Consultation Team
Collaborate with Minds Matter group to provide health promotion materials that share mental health literacy information.	Crys Champion, Ashley Jochimsen, Minds Matter Committee	October 30, 2023	Completed, materials used during Fall Wellness Week.

Collaborate with Wellness Promotion and vendor to continue to promote YOU@UWL resources.	Crys Champion, Issy Beach, OPE Committee	May 30, 2024	Completed/ongoing.
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CTC Strategic Plan 2023-24 Goal #2 – Staff development

By May 31, 2024, the Counseling & Testing Center (CTC) will invest time and resources for staff training and development activities that will expand availability of clinical services and staff capacity for specialized clinical services.

Action Step	Key person(s)	Complete By	Outcome
One staff will attend intensive EMDR training and supervision. EMDR clinicians will collaborate to communicate referral processes to other clinicians to make the most effective use of this specialized treatment.	Katelyn Longmire, Ashley Jochimsen, Bec Johnson	December 15, 2023	Completed. Katelyn Longmire was trained in Fall 2023 and worked with Ashley Jochimsen to develop a clear treatment referral process.
A procedure for ADHD assessment will be developed, necessary resources gathered, and process piloted.	Bec Johnson	October 15, 2023	Completed by late Spring 2024, action step was deferred due to time demands of new EMR implementation.
Multiple clinicians will be trained to provide ADHD assessment and engage in an extended pilot to determine feasibility and guide ongoing scheduling plans.	Bec Johnson	December 15, 2023	Not completed, action step was deferred due to time demands of new EMR implementation.
Staff will engage in internal training meetings to enhance group services, including group facilitation techniques, group referrals, and communicating about groups to clients.	Ashley Jochimsen, Chad Walters	August 30, 2023	Completed, training took place during August workshop and updates were included in January 2024 workshop.
Each staff member will include an individual goal for their annual review that addresses professional development. Staff will plan continuing education activities compatible with individual professional goals, including conference attendance and training opportunities activities.	All CTC Staff	October 30, 2023	Completed, Staff members included professional development goals in their annual review documents.

CTC Strategic Plan 2023-24 Goal #3 – Equity Plan goal

By May 31, 2024, the Counseling & Testing Center (CTC) will enhance services for students from underserved groups.

Action Step	Key person(s)	Complete By	Outcome
Increase/continue marketing of bilingual services.	OPE Committee, Iam Valdez-Espinoza	January 30, 2024	Services were marketed through digital signage.
Explore feasibility of a support group for students of color.	Teresa DePratt	December 15, 2023	D&I Liaison took part in D&I Leadership meetings to help determine student needs.
Continue Let's Talk services in person in D&I and explore possible expansion to other groups/areas.	Teresa DePratt, Bec Johnson	May 30, 2024	Let's Talk services took place in OMSS in the partner in residence office, initially by Dr. DePratt and later by Iam Valdez-Espinoza, LPC-IT.
Evaluate resources contained in YOU@UWL for identity-related support and provide marketing content to D&I offices and MSOs.	Teresa DePratt	December 15, 2023	D&I Liaison took part in D&I Leadership meetings to help determine student needs.
Connect with MSOs for outreach opportunities and marketing of events and resources.	Teresa DePratt, OPE Committee	May 30, 2024	OPE Committee and D&I Liaison attempted to contact MSO leadership for targeted outreach opportunities, but no MSOs responded.
Explore collaboration with CTJ on jointly presented/sponsored programming and events related to "celebration" months and Social Justice Week.	Teresa DePratt	May 30, 2024	D&I Liaison took part in D&I Leadership meetings to help determine student needs.

CTC Strategic Plan 2023-24 Goal #4 – Testing Center goal

By May 31, 2024, the Counseling & Testing Center (CTC) will engage in activities to ensure the fiscal and operational sustainability and continuity of the Testing Center.

Action Step	Key person(s)	Complete By	Outcome
Continued support of TCA at .75 or greater	Criss Gilbert	May 31, 2024	Recruited and have retained TCA at .75 for Spring semester.
Continue tracking daily/weekly income of testing services. Update Vice Chancellor quarterly with a summary.	Criss Gilbert, Crys Champion	June 30, 2024	Ongoing
Keep Director, Vice Chancellor, Provost and dept chairs aware of new exams available through UWL Test Center that benefit UWL Students.	Criss Gilbert	June 30, 2024	Ongoing
Determine the best modality of Test Center P&P, and create outline	Criss Gilbert Crys Champion	September 30, 2023	Deferred due to TCA vacancy
Generate content for Test Center P&P	Criss Gilbert Richard Athey	May 1, 2024	Deferred due to TCA vacancy
Review P&P content for clarity and generalizability to other staff in case of emergency	Criss Gilbert Crys Champion	May 31, 2024	Deferred due to TCA vacancy