A Model and Method for Implementing an Embedded Therapy Program

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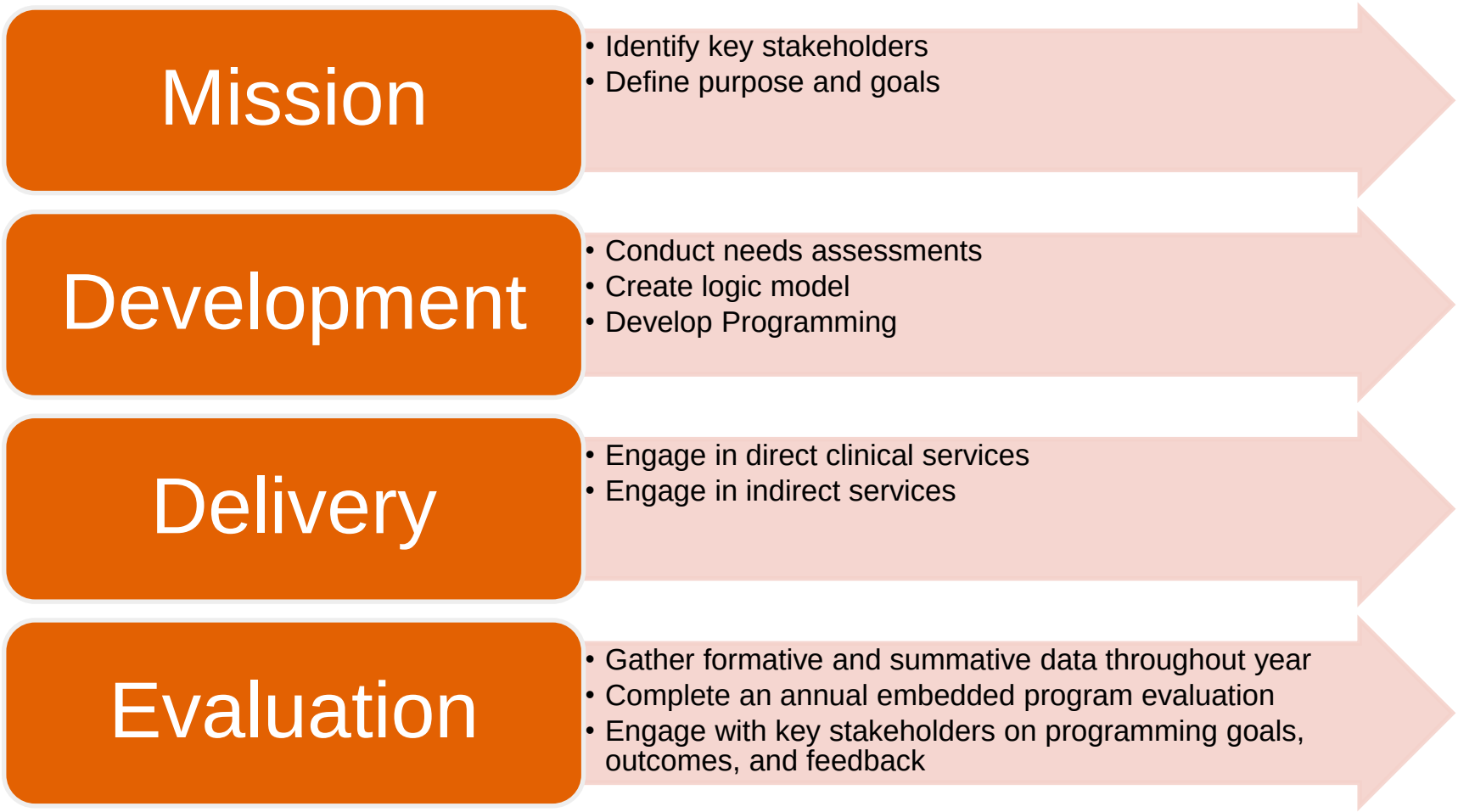
Learning Objectives

- Use a comprehensive model for implementing an embedded therapy program
- Plan a logic model to identify short, medium, and long term goals of embedded therapy program
- Utilize data organization and tracking tools for assessment and program evaluation
- Explain how to support embedded therapy staff to thrive
- Discuss the challenges and barriers to embedded programming

A Comprehensive Model for Embedded Programming



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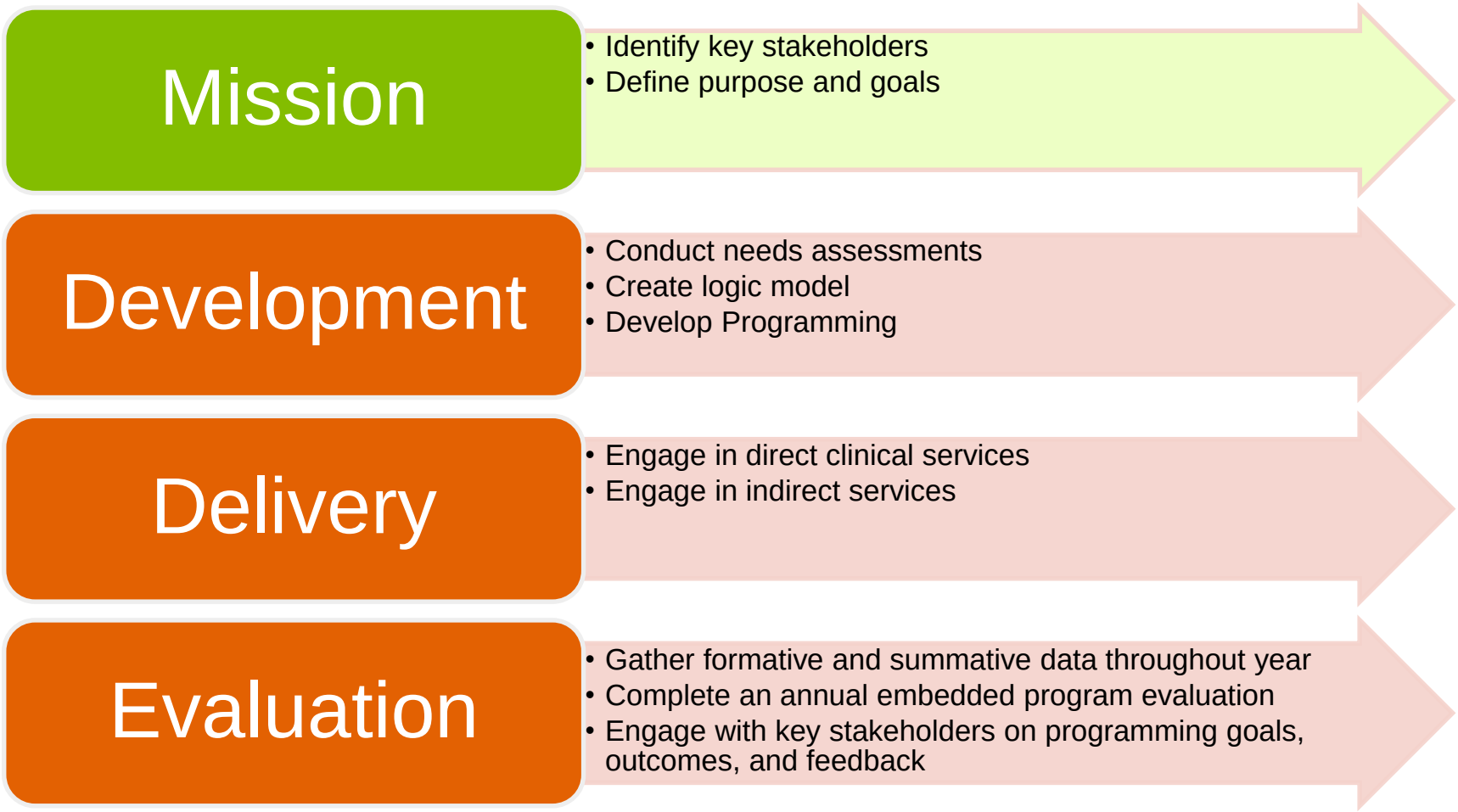

Mission: Identify Key Stakeholders

- Students
- Dean and Associate Deans
- Academic Advisors
- Faculty and Chairs
- Staff and Leaders
- Marketing and Communications

Mission: Define Purpose and Goals

- Increase (insert academic/service unit) student access to CaPS services
- Embedded Therapist will integrate themselves into the community to:
  - Understand the cultural nuances of the (academic/service unit)
  - Develop corresponding outreach programming for faculty, staff, and students grounded in mental health and wellness needs of the community.

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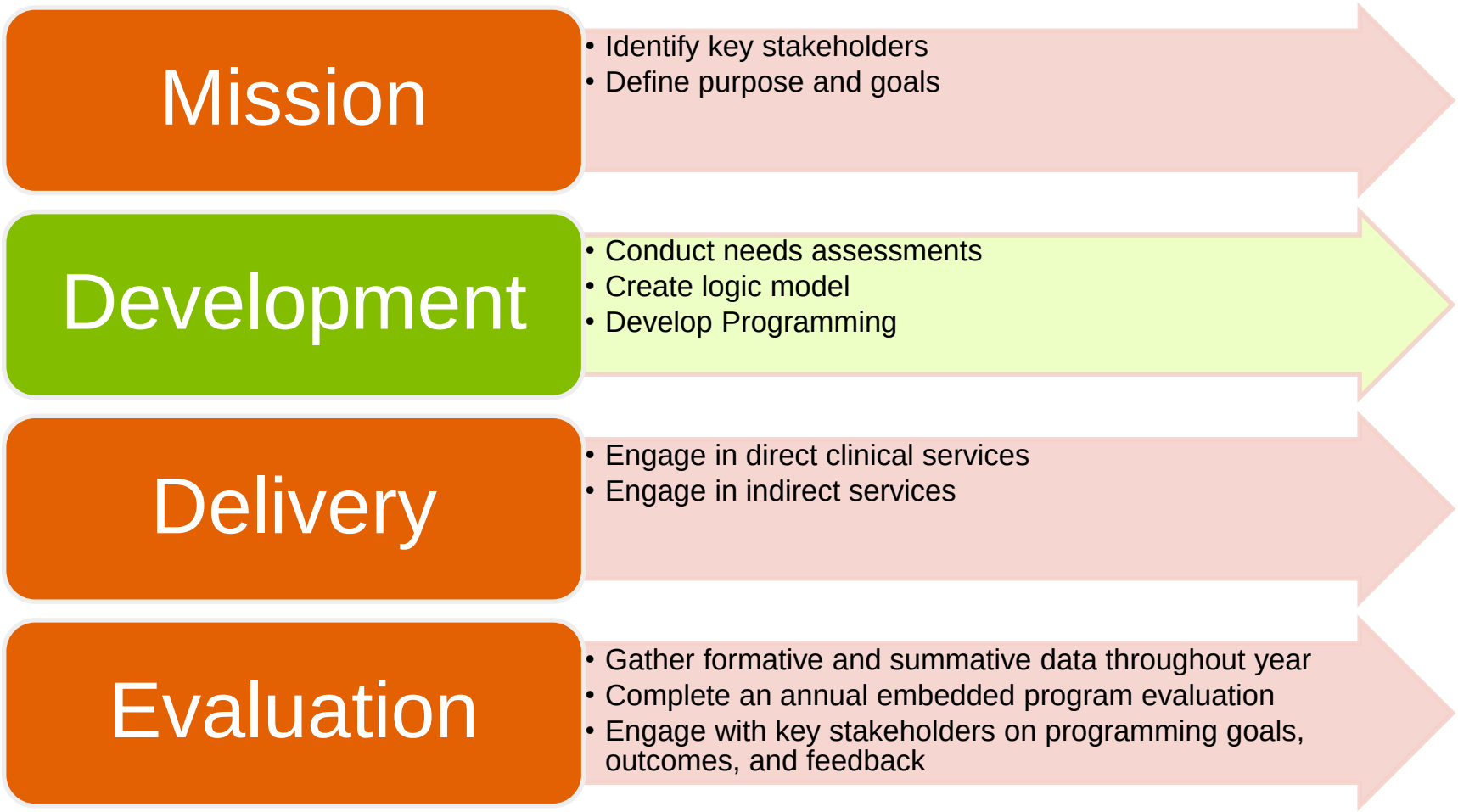


Development: Conduct Needs Assessment

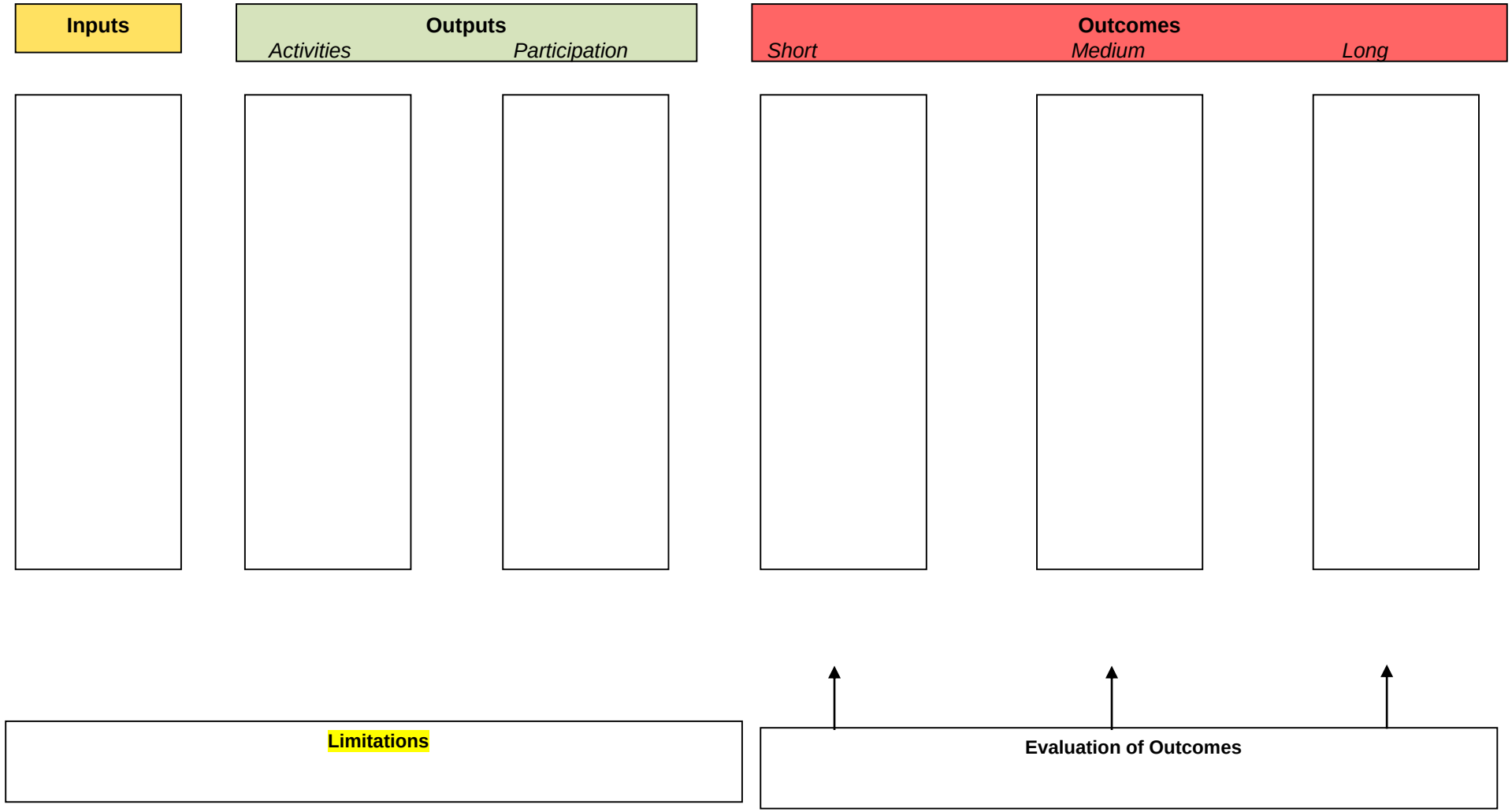
- **<u>In the next 1-3 years</u>, what area(s) would <u>you</u> like to grow in as an individual regarding college student mental health?**
  - Knowledge (i.e. understanding current trends in college mental health, awareness of mental health symptoms)
  - Practical skills (i.e. making supportive statements, providing reflections of feelings, active listening, referring students to services, knowing how to conclude a meeting that has turned into a therapy session, etc...)
  - Beliefs
  - Other, please specify
- **<u>In 1-3 years,</u> what area(s) would you like to see accomplished in (insert academic/service unit) with regards to student mental health?**
- **<u>In 3-5 years</u>, what area(s) would you like to see accomplished in (insert academic/service unit) with regards to student mental health?**

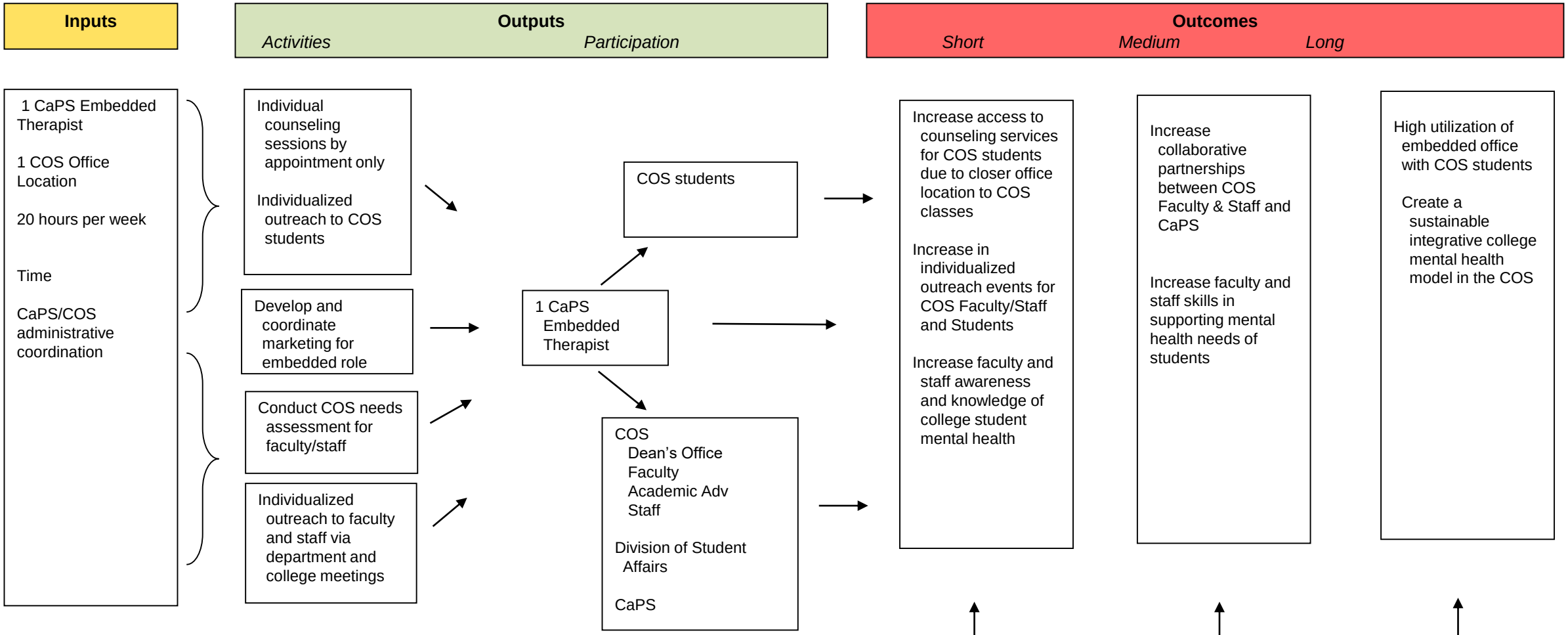
Development: Conduct Needs Assessment

- **What style of engagement do you prefer for your own learning?**
  - Didactic seminars
  - Conversations/forums on selected topics
  - Interactive workshops/role plays
  - Other, please specify

- **As the Embedded Therapist within (academic/service unit), I can best support you by (select all that apply)**
  - Providing opportunities for consultation
  - Facilitating seminars on contemporary issues in college student mental health
  - Facilitating interactive workshops
  - Facilitating a presentation/discussion directly to students during a class
  - Other, please specify

Development: Create a Logic Model





Limitations

Inefficiencies in COS→CaPS intake stream. Time provided to therapist to develop and coordinate programming. Managing dual office spaces, administrative and clinical tasks. High demand of consultation/workshops overlap with high demand perids of direct clinical work (mid semester).

Evaluation of Outcomes

Needs assessment for COS faculty/staff and students to determine programming needs. Post surveys to COS faculty/staff and students to gain feedback on utilization of position, effectiveness of workshops, and future considerations.

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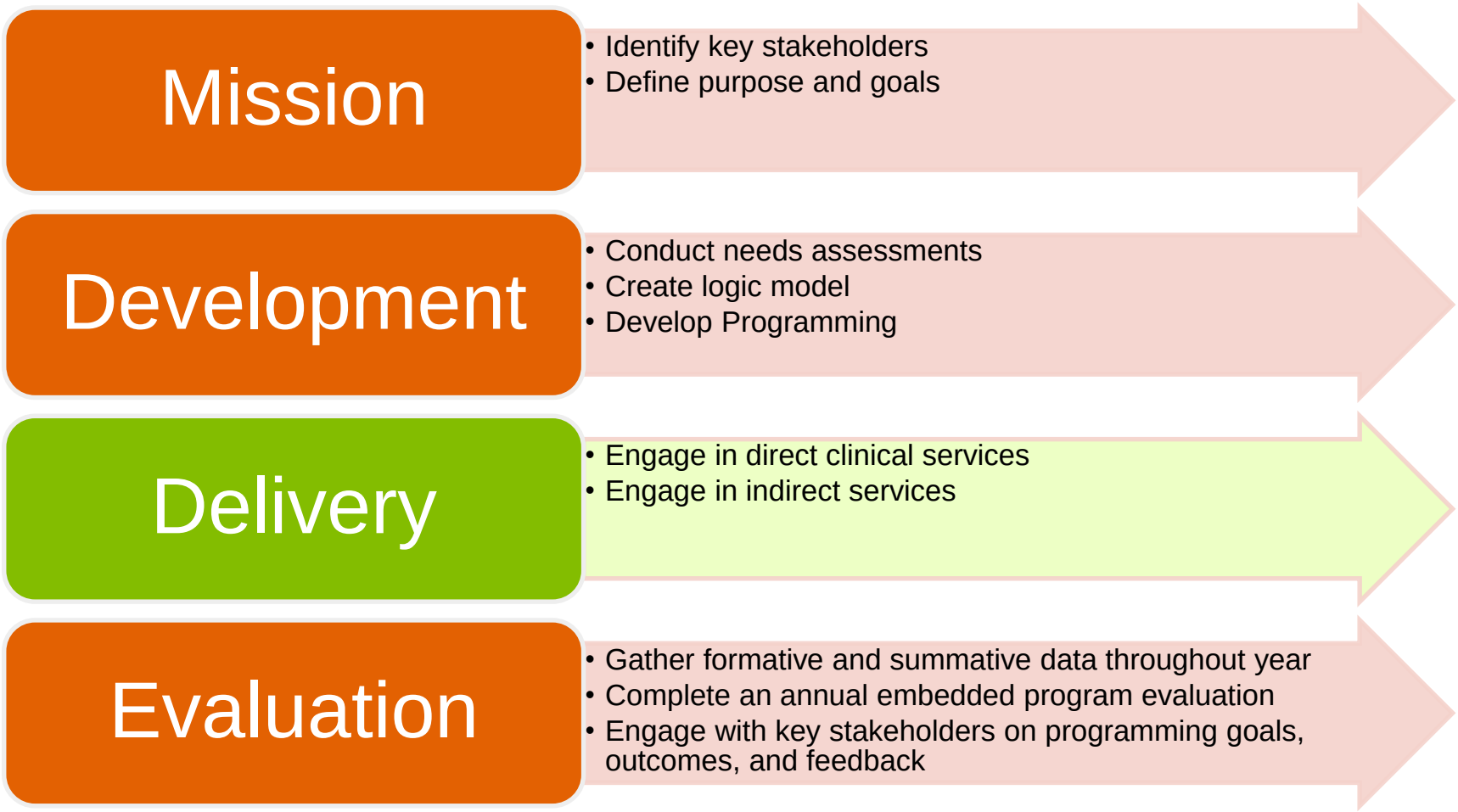
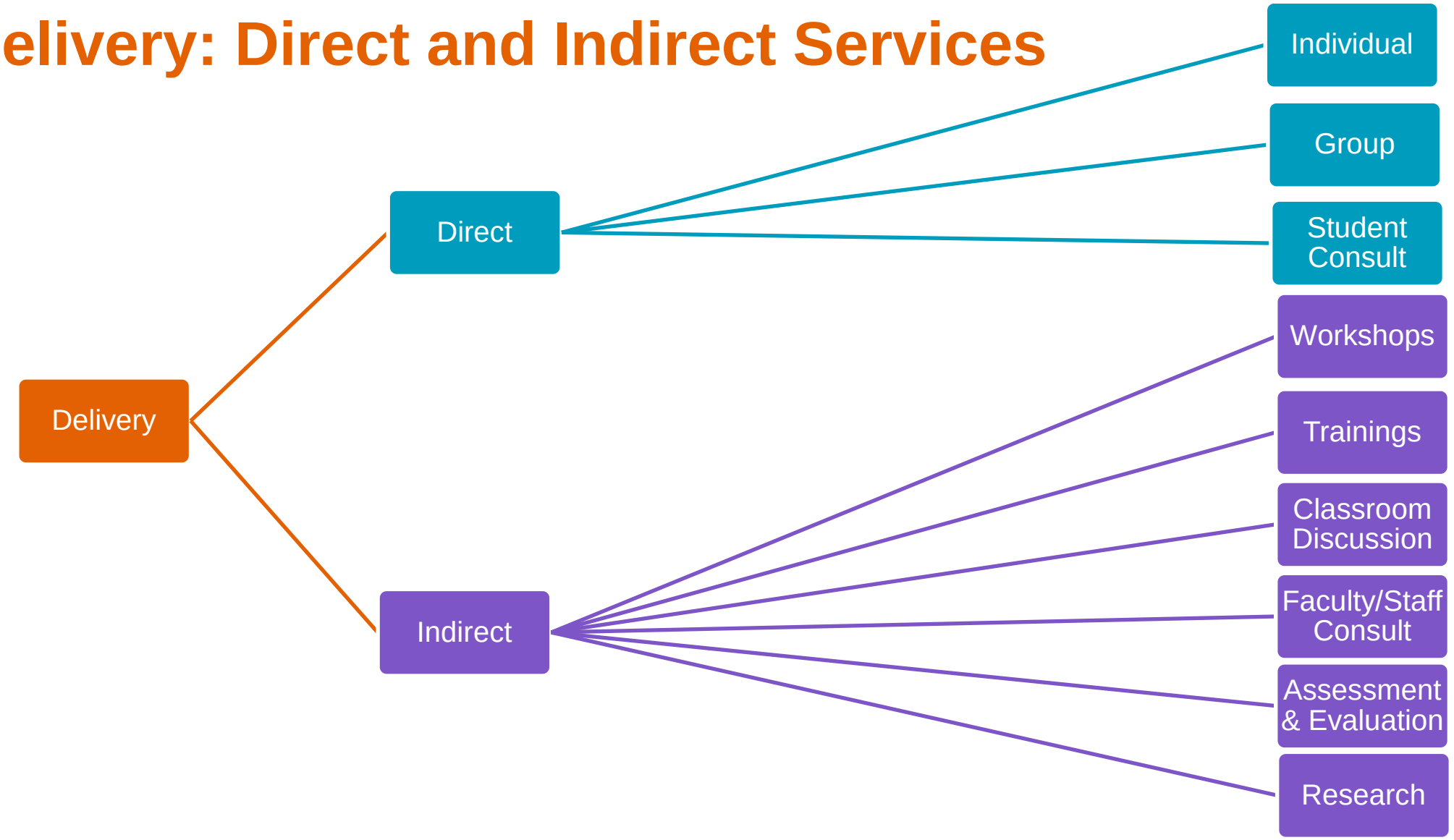


Delivery: Direct and Indirect Services



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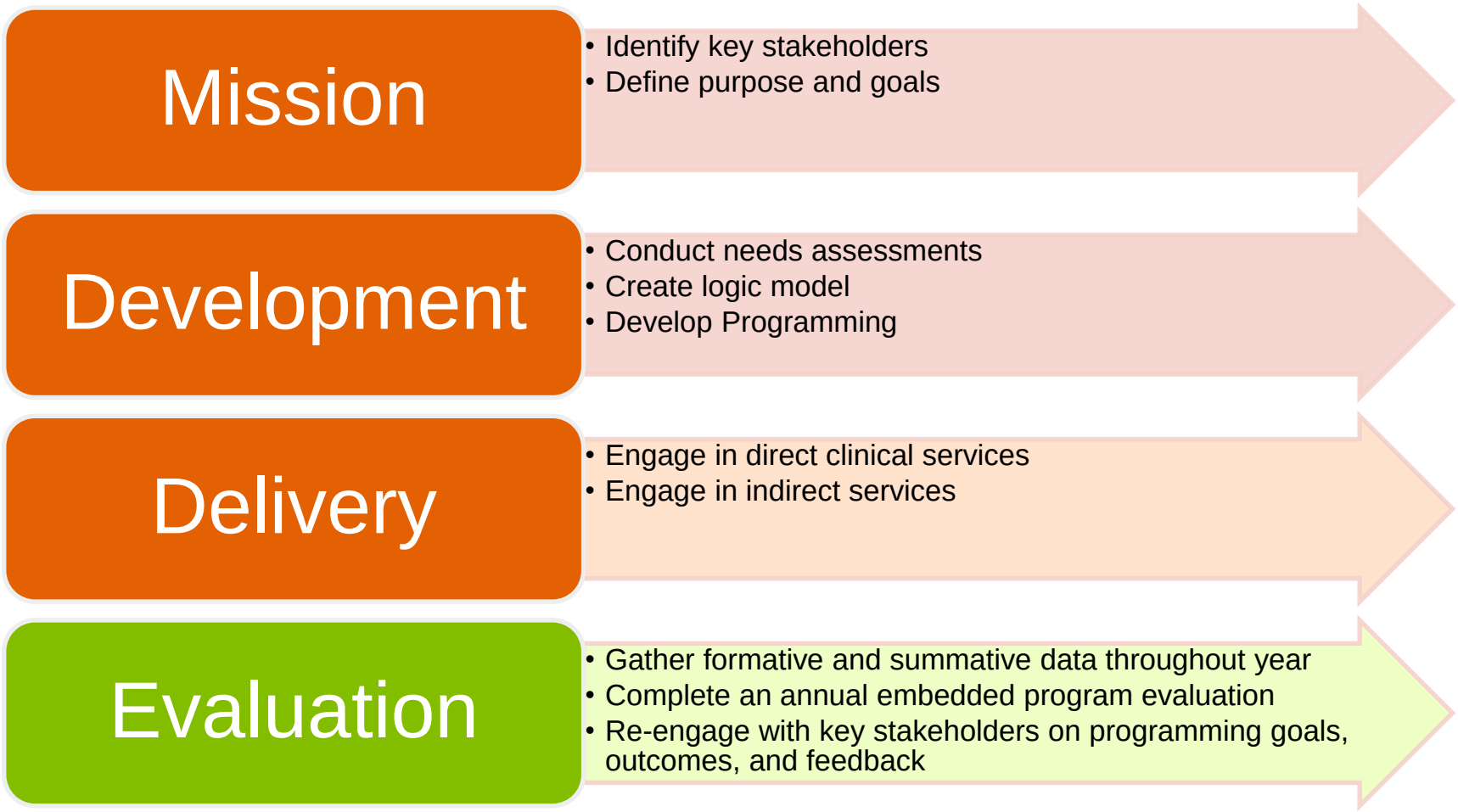
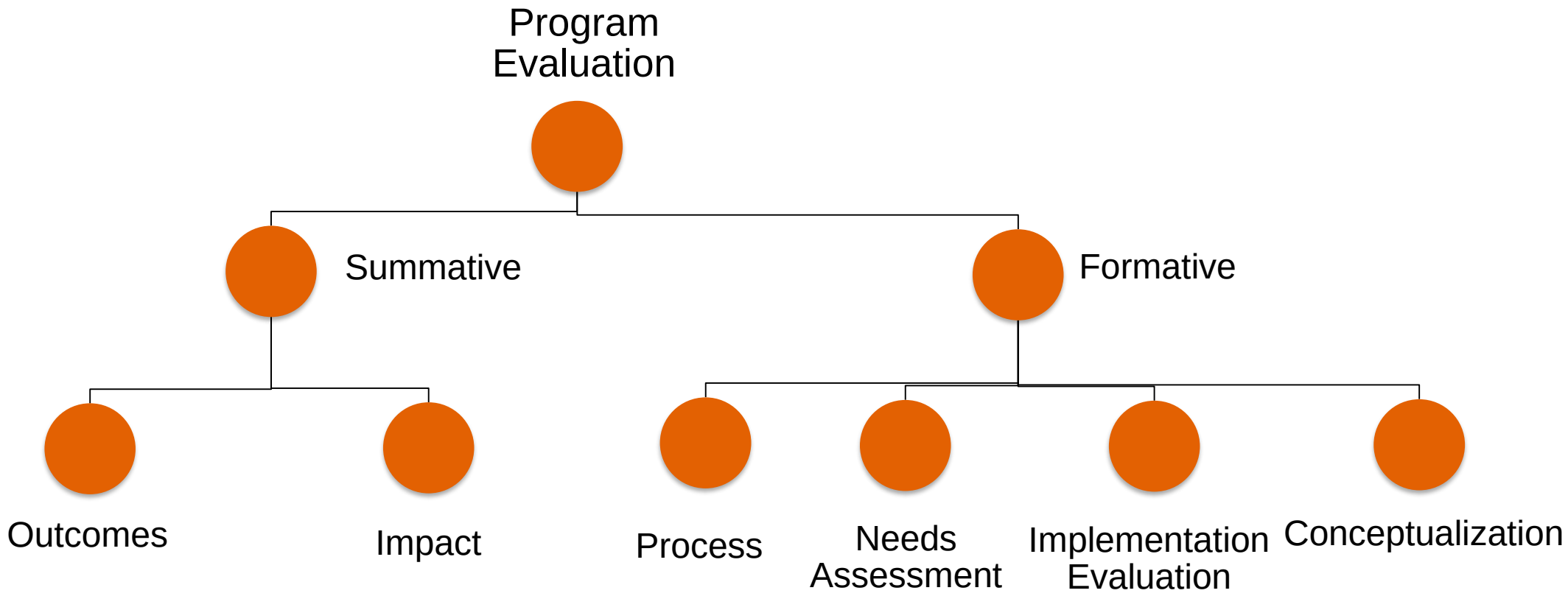


Evaluation: Gathering Summative and Formative Data



Evaluation: Gathering Summative and Formative Data

- **Tracking Forms**
  - Embedded Outreach Tracking
  - Activities and Programming Calendar

Evaluation: Re-engage with Key Stakeholders

- Review key accomplishments
- Discuss progress towards short, medium, and long term outcomes in Logic Model
- Identify opportunities and barriers
- Identify key and emerging partnerships and collaborations
- Elicit and integrate feedback from key stakeholders
- Develop program plan for next academic year

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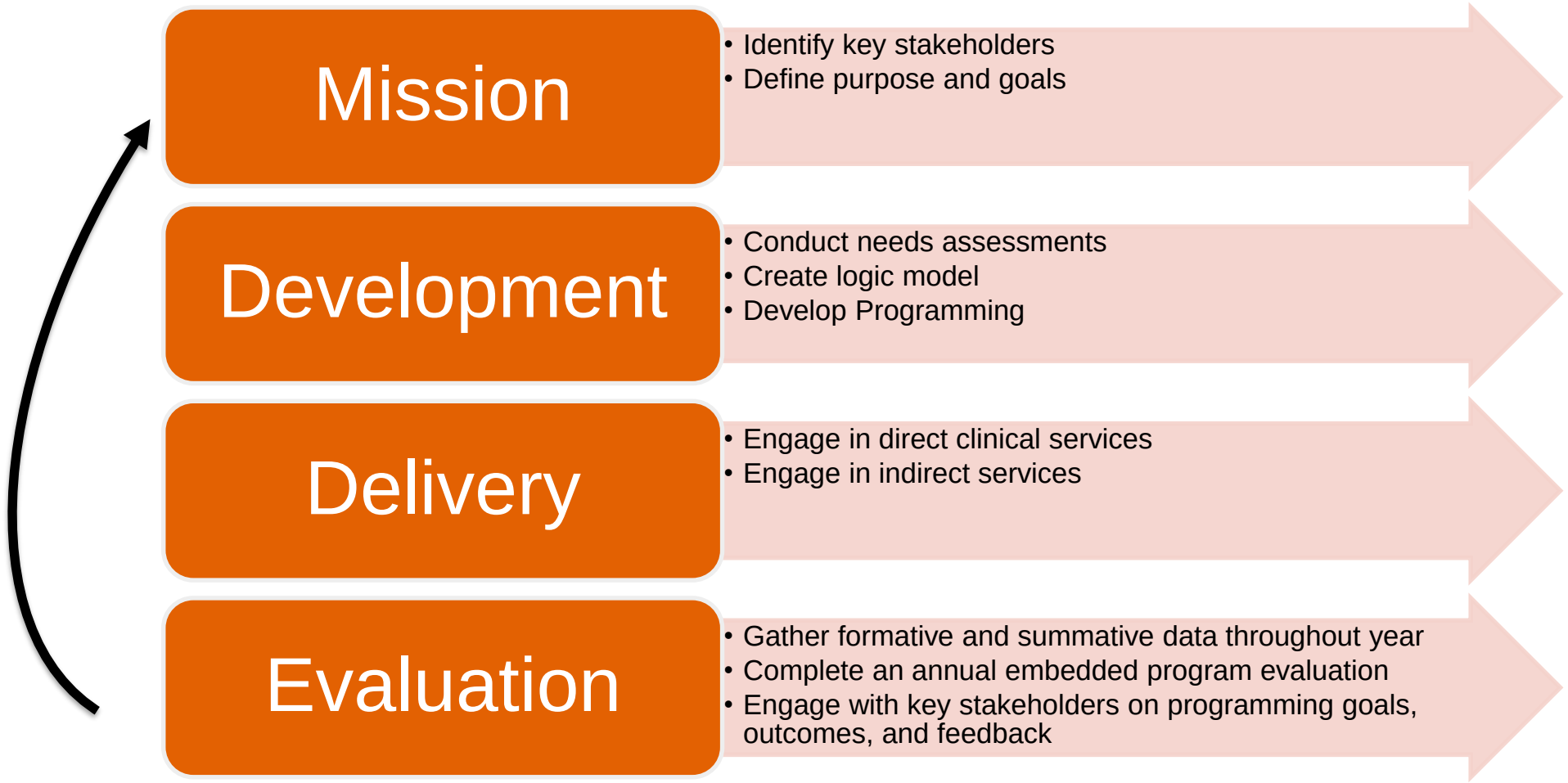

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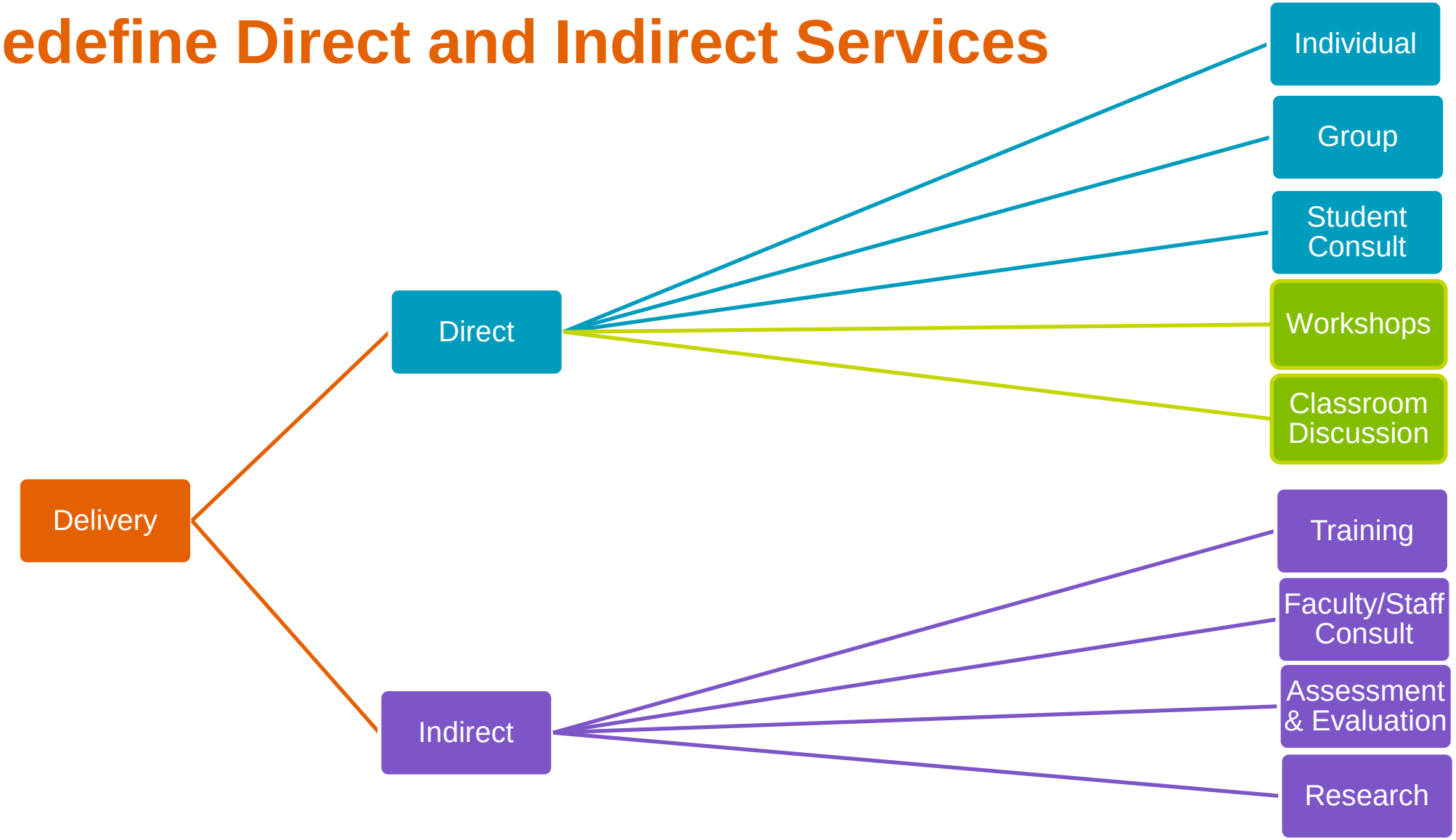
Challenges and Barriers to Embedded Programming

- Unclear definition of purpose and goals
- Management of multiple roles, expectations, settings, requests, etc…
- Balancing competing demands for clinical time, consultation, programming, etc…across systems
- Coordinating marketing and communication across systems
- Approaching embedded programming as identical to non-embedded counseling center service delivery

Supporting Embedded Programs: For Directors

- **Recognize embedded role/programming is unique; therefore, requires different forms of systemic and individual support to thrive than non-embedded clinicians**
- **Ensure offices are outfitted with necessary equipment, space, and privacy**
- **Allocate time and scheduling for embedded services and program development**
- **Redefine direct and indirect clinical services**
  - Workshops, trainings, consultations (i.e. level 1 interventions)
  - Clinical caseload distribution

Redefine Direct and Indirect Services



Supporting Embedded Programming: For Directors

- **Nurture campus partnerships**
  - Take lead on establishing initial partnerships and collaborations
- **Create opportunities for connection across team members**
  - Recognize isolation and burnout can occur in embedded providers
  - Encourage non-embedded staff to be knowledgeable of embedded programming
- **Hold monthly embedded staff meetings with center directors**
- **Be Flexible**
  - Protocols, Procedures, Appointment Codes
  - Scheduling for attending embedded related events, building partnerships, etc…
- **Encourage creativity**

Supporting Embedded Programming: For Staff

- **Protect time and scheduling for embedded services and program development**
- **Encourage embedded colleagues to meet monthly to support, share resources, and develop programming**
- **Create systems to organize and track program offerings**
- **Be assertive in what you need!**
- **Be creative!**

Creativity, Flexibility, and Advocacy

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