

Florida Southern College Counseling Center
Scope of Practice Statement

Mission Statement:

The FSC Counseling Center strives to provide all FSC students with the highest quality and culturally sensitive scope of mental health services, while helping them achieve academic and personal success, develop self-awareness and feel empowered to take charge of their lives. We're committed to increasing the emotional well-being of our students so that they can fully engage and become part of the FSC community.

The Scope of Our Services:

In order to meet significant student demand for service and use resources most effectively, the Counseling Center utilizes a brief therapy model. Brief therapy is short-term and focused on helping students to resolve or effectively manage a specific problem or challenge, or to make a particular desired change. The therapy is typically solution-oriented, and sessions are geared towards direct and active intervention to help clients achieve specific goals.

Currently enrolled graduate and undergraduate students are eligible for an initial appointment; however, the most appropriate form of follow-up care is determined primarily by the counselor(s), in collaboration with the client. When appropriate, students may be referred to services offered within the Counseling Center.

Some of the concerns that are commonly addressed in short-term counseling at the Counseling Center are:

- **Personal Concerns:** Stress, anxiety, depression, anger, loneliness, low self-esteem, grief
- **Relationship Concerns:** Romantic relationship, roommate conflict, family problems, social life
- **Developmental Concerns:** Identity (i.e. personal, cultural, spiritual, sexual orientation, gender identity), adjustment to college, healthy lifestyle choices, decisions, life transitions
- **Academic Concerns:** Motivation, test and performance anxiety, perfectionism, organization
- **Other Concerns:** Effects of trauma, assault, abuse, body image, disordered eating

Sometimes a student's needs fall outside of the expertise or resources available at the Counseling Center. In keeping with the brief therapy model, students whose needs require long-term and/or intensive support will generally be referred to community resources for ongoing treatment. Similarly, students whose needs require a particular type of expertise that is not available in the Counseling Center are also referred to community resources. The Counseling Center can provide referral options that we believe will best meet a student's needs, but the decision for ongoing treatment ultimately resides upon the student.

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Limits of our services include:

- Students with a desire or need to be seen more frequently than the Counseling Center resources can provide (e.g. more than once every seven to fourteen days), *or* on a long-term basis
- Need or desire for long term weekly therapy
- Students who wouldn't tolerate extended breaks from counseling (e.g. semester or summer break).
- Students who demonstrate a serious lack of motivation or engagement in treatment as demonstrated by poor compliance with treatment or inconsistent attendance
- Students receiving counseling services from another provider who do not end that treatment
- Students for whom a short-term treatment model would be detrimental or inappropriate to the presenting issues
- Students with a history of longstanding or severe pathology including maladaptive interpersonal behaviors, requiring services beyond the Counseling Center scope
- Intense, recurrent, and/or entrenched mental health issues that require specialized care or more intensive treatment
- Chronic/severe suicidality or self-injury
- Multiple and/ or recent psychiatric hospitalizations
- Evidence or risk of progressive deterioration in mental or emotional functioning including active psychotic symptoms present or episodes of dissociation requiring intensive intervention.
- Excessive use of crisis appointments which may indicate that standard session frequency is insufficient to meet the student's mental health needs or that more intensive treatment is needed
- Significant drug or alcohol problems
- Family therapy
- Therapy services for students who are not currently enrolled in classes due to graduation, withdrawal, or dismissal from the university.
- Long-standing or persistent eating disorders
- Failure to make progress in treatment
- Court-mandated evaluation or treatment, to fulfill academic requirements, or treatment required as part of sanctions placed on the student by the college
- Students who engage in inappropriate, harassing, menacing, threatening, or violent behavior towards staff
- Students seeking documentation for emotional support animals
- Psychological testing for learning disabilities, ADHD, or neurological conditions

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The general guidelines listed are only intended to serve as a guide to assist treatment decisions. The nature and complexity of presenting concerns in the broader context are considered in making appropriate treatment recommendations. Cases are evaluated on an individual basis, and the professional judgement of the mental health provider(s) will determine the treatment decision in a particular situation. If you are uncertain what services best fit your needs or have questions, staff at the Counseling Center is available for consultation with students, parents, faculty, and staff.

PLEASE NOTE: The counseling center cannot excuse an absence/s from class for medical or psychological illnesses. However, if you are seeking documentation regarding your receipt of services in our office, that documentation can be provided.

Brief Therapy:

What is Brief Therapy?

Brief Therapy is a form of psychotherapy that is short-term in nature and in which the client and counselor work collaboratively to identify solutions. The aim is to emphasize students' strengths and to help them to work actively towards well-defined goals.

Why is it a good approach?

The time-limited nature of brief therapy can encourage the client and therapist to keep sessions focused and productive. Furthermore, brief therapy has been shown to be effective for a wide range of clients and problems, such as anxiety, depression, grief, relationship issues, stress, and lifestyle changes.

What research supports it?

Research has shown that various forms of time-limited therapy yield very good results. For example, a comprehensive study on solution-focused brief therapy found that it had a positive effect in less time and satisfied the client's need for autonomy more than other forms of psychotherapy (Stams, et al., 2006 as cited in Bannick, 2007).

How common is it?

Brief counseling is widely used in the mental health field and has become the most preferred mode of individual service delivery nationally in college counseling centers (Cooper & Archer, 1999).

How brief is Brief Therapy?

The Counseling Center does not maintain a formal and exact session limit. Instead, working together, the therapist and student determine the number, type, and frequency of sessions that are appropriate for the student based on the nature of the student's concerns as well as available resources. The limits to service are typically discussed with each student early in the course of

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treatment during an exploration of the appropriate level of care for the student's presenting concerns. Sessions are usually scheduled every other week.

What if a student needs treatment beyond Brief Therapy?

As described above, brief therapy is appropriate in many circumstances. However, for students who may benefit from longer-term, more frequent, or more specialized counseling, the Counseling Center can provide referrals. For more information about the Counseling Center's *Scope of Service*, see above.

How to get the most out of it?

To get the most out of a brief therapy experience, clients are encouraged to think about their goals and about how they would like things to be different. Clients are also encouraged to be willing to engage in work outside of sessions and take responsibility for making changes within their lives.

References:

- Bannink, F.P. (2007). Solution-focused brief therapy. *Journal of Contemporary Psychotherapy*, 37(2), 87-94.
- Cooper, S & Archer, J. (1999) Brief therapy in college counseling and mental health. *Journal of American College Health*, 48(1), 21-29.
- Stams, G.J., Dekovic, M., Buist, K., & de Vries, L. (2006). Effectiviteit van oplossingsgerichte korte therapie; een meta-analyse (Efficiency of solution-focused brief therapy: a meta-analysis). *Gedragstherapie (Behavior Therapy)*, 39(2), 81-94