

REVIEW OF COISCÉIM COUNSELLING PROGRAMME

February 2020

An independent evaluation

On behalf of

Social Health and Education Project

Reviewed by Anne McCarthy



The Social and Health Education Project



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Table of Contents	Page
Background and Executive Summary	3
Governance	8
Model of organisation and support	9
Evaluation Methods	13
Clients	16
Referrers	25
Counsellors	29
New Developments	32
Summary and Conclusion	35
Note 1	37
Appendices A, B, C, D, E	37
References	42

“This service is so helpful; it was my lifeline at the time, to let me see light at the end of the tunnel and helped me move forward at long last” Client 2016

“The counselling helped me sail through a very distressing few months that I was going through alone.” Client 2016

Background and Executive Summary

Coiscéim opened its doors in 2001 under the umbrella of the Social Health Education Project. The Social and Health Education Project (SHEP), established in 1974, is a values-led organisation that works together with individuals and communities to develop capacities for positive change, to enhance health and well-being, and to promote social justice. The Programme commenced with funding from Janssen. The HSE has supported the Programme through a grant made under Section 39 as a core-funding grant provided to SHEP. The funding stream The HSE funds Coiscéim Services Programme respectively from Mental Health and Social Inclusion streams.

At the time of writing Coiscéim as part of SHEP has moved from their Ballincollig premises to new and larger premises, called the Old Primary School in Ballintemple, Cork City. The immediate delight for the Coiscéim staff at being in the new building is the abundance of light and the numbers of windows. The appearance of so many windows is in many senses symbolic of the development of this enlightened organisation that has provided dedicated counselling services for clients living in the region of Cork City, County and County Kerry for the past twenty years.

“The aim of the programme is to provide quality counselling/therapy services to individuals and, to a lesser extent, to couples, families and groups; people who, for a variety of reasons, may not be able to access the services they need in other ways. The intention is that, through counselling, Coiscéim will help clients to be better able to manage their own arising mental health issues and their relationships, thereby enhancing their own quality of life and the quality of life of those with whom the clients are closely connected”. Coiscéim Annual Report, 2017

A collaborative network provides clients. The network is made up of voluntary groups, schools, doctors, some state agencies, and self-referring clients who have come to hear of Coiscéim by word of mouth.

Coiscéim currently has 95 counsellors on its active referral panel. A further 50 counsellors are on the standby panel and are available to take referrals should a client’s presenting issues require their expertise/specialisation.

This report will review three years of Coiscéim services in the context of its long history in providing counselling support within the auspices of the Social Health Education Project in Cork and Kerry. The

review draws on published statistical data, the voices of the clients, counsellors and referrers, and the key managers of SHEP and Coiscéim. The report will look at the emerging trends and include a commentary on the new services developed and developing in response to growing and changing mental health needs in the communities supported by the service. The services are for individual adults, couples, family therapy, and children. The provision of counselling for children is a service that from the support provided to children's family members and is now a consolidated service within the Programme. The newest service is an initiative entitled CAIRDE, developed under the auspices of Coiscéim; it provides a counselling service for asylum seekers who are living in Direct Provision Centres in Cork and Kerry.

The counselling service as part of SHEP's core programme is core-funded by the HSE. Coiscéim also receives funding from Tusla through its annual Service Level Agreement Grant for Counselling for clients between the ages of 7 years to 25 years old.

Funding for this external evaluation is provided by the HSE.

The aim of the review is to provide an independent and updated assessment of the overall functioning and effectiveness of the Coiscéim Counselling Service. The stated objectives of the review are:

1. To identify the strengths and weaknesses in relation to best practice in the delivery of the service.
2. To include the following areas: current management systems, overall governance structures, and cost effectiveness in service delivery.
3. To evaluate service users' satisfaction through analysis of the Client Confidential Feedback Form for the years 2016, 2017 and 2018.
4. To identify and analyse trends in the usage of the service for the years 2016-2018.
5. To evaluate referral agencies' satisfaction with the service.
6. To identify ways to improve the service

To achieve the objectives listed above, the report is a continuing narrative telling the story of Coiscéim with particular reference to the past three years 2016 – 2018. Reference is made to 2019 in the concluding section to illuminate future trends of the service. A key outcome of this report is to identify and review the key trends and themes emerging from the data gathered in key reports from 2016 – 2019.

The approach to the review is to tell the story of Coiscéim as a twenty-year-old service, which has developed its approaches to the community in the context of SHEP, the parent organisation of nearly fifty years. The shared values of Coiscéim and SHEP are community focused, collaborative, meithtal-based, focused on a professional service, relational, client centred, flexible, and creating a sense of belonging. The review will explore how these values support the work of the service and will pay close attention to the ethos and culture of Coiscéim in the context of how this service operates, especially as expressed by the experiences of the key stakeholders. A critical practical element is Coiscéim distinctive profile as a low-cost counselling service.

The review is written under the following headings.

- Background and Executive Summary
- Introduction
- Evaluation methodology
- Ethics and values, the services of Coiscéim past present and future
- Model of organisation and support: contextualising its model of organisation and support as the service evolves
- The management and governance of Coiscéim
- The clients – satisfaction – strengths – areas for development
- The counsellors – satisfaction – strengths – areas for development
- The referral agencies – satisfaction – strengths – areas for development
- Trends in usage who and what: anticipating change
- Summary and conclusion

A recurring theme or word heard throughout the research for this review was the word human. Coiscéim, contained within the structure of SHEP, for twenty years has developed and nurtured a mature, creative human space that responds to the mental and emotional health needs of people from the community. It has enabled their voices to be heard supporting those who have met the services to make new generative choices about their lives.

The review has looked at feedback from clients, listened to counsellors, referrers, and those managing SHEP and Coiscéim. The annual reports, 2016, 2017 and the outcomes document from 2018 have informed the review. The section headed Clients is the largest of the review. In making this the largest section, it is an acknowledgement of client-centred support established and fostered by Coiscéim. Their work is about the client. This is affirmed in that more than one third of the clients who availed of counselling in the years 2016 – 2018 came from the wider community of clients themselves, their friends or family, demonstrating a trust in Coiscéim by that community,

representing 33% of all referrals in 2018. Clients attending Coiscéim tend to be representative of the more marginalised sections in the community who struggle financially and who have not benefited from national economic growth. This is borne out by the referrers interviewed, who reported an increase in homelessness as an issue. Other presenting issues affecting the client group include alcohol, drug problems and the impact of intergenerational poverty on families. It is evident from the client written feedback that the client group deeply appreciate the provision of safe spaces where they can access professional counselling.

The relational skills and culture of SHEP and Coiscéim supports the counsellors. Thirty-five counsellors are on the panel and fifty are in reserve, representing a range of psychotherapeutic skills. They in turn have between them skills that include child art and play therapy, couples therapy, family therapy, and individual therapy. The counsellors have expressed deep satisfaction with their work with Coiscéim. They feel supported by Coiscéim in their work. One example reported was when there is a complexity associated with a client such as a child protection issue that Coiscéim supports the counsellor practically through this complexity. Counsellors also express satisfaction in being able to work with clients who receive a subsidy towards their fee. It is evident from the counsellors that Coiscéim have successfully led a large cohort of professionally trained and experienced therapists over the past twenty years. To grow, nurture and develop this rich resource takes time, attention to detail and a deep understanding of the human being. Indeed Coiscéim is contributing to the development of the profession of counselling generally within Cork and Kerry as it provides supported work for the therapeutic community of counsellors.

Coiscéim has a proven record of accomplishment of working collaboratively with a large number of statutory and not for profit services. The referrers affirmed this. The referral base seen at appendix C encompasses the statutory and not for profit sectors. There are at the time of writing twenty-one not for profit/ volunteer organisations and thirteen statutory agencies associated as referrers of clients to Coiscéim. All of the thirteen statutory and twenty-one not for profit organisations have referred clients to Coiscéim in 2018 representing 66% of the total client referrals to Coiscéim. The values, culture and model of support used by Coiscéim is rooted in lived values drawn and mirrored from SHEP, the parent organisation within which Coiscéim resides. These are lived values evident by the delivery of a dynamically administered service, illustrated by the prompt response to clients, most being contacted by the assessment counsellor within one week of their contacting the service. While not stated explicitly, it is implied in the client feedback that their experience of the assessment session is the beginning of their therapeutic journey. The assessment meeting provides the client with an experience termed client centred, clients feeling heard seen and valued. This process enables a good beginning for the therapeutic work. Counsellors reported their

understanding of Coiscéim benefiting from SHEP, which was almost 25 years in existence when Coiscéim opened its doors. This shared positive structure between SHEP and Coiscéim mirrors a healthy intergenerational richness. Clients benefit from this rich holding environment from the moment they are in touch with the service.

The areas of development are twofold. Recently Coiscéim has seen an increase in the numbers of children referred for counselling therapy. The numbers have grown in the three years under review from 89 in 2016 to 96 in 2017, and 108 in 2018. It is a happy coincidence that Cork City is home to the only art therapy-training course in Ireland. Art therapy is one of the preferred modalities of support for working with children under twelve, the other being play therapy. The largest age group seeking counselling in this category is fourteen years of age. The short waiting time reported in this group is very much appreciated stating that children need intervention as soon as they are considered candidates for counselling.

Coiscéim is providing a new service to provide counselling support to persons living in direct provision accommodation in Cork City, Cork County and Kerry. Most if not all of those in direct provision, accommodation will have suffered trauma in their country of origin and on their journey to Ireland. The new service named CAIRDE is operating under the auspices of Coiscéim. As reported by the CAIRDE coordinating counsellor, *“a feature of life in the direct provision system is one of endless waiting”*. CAIRDE is providing a responsive counselling service to residents of direct provision that is prompt and local. It is a feature of those in direct provision to have suffered torture either in their country of origin or on their journey to Ireland. The specific needs of these clients, supported by CAIRDE, is being met promptly and in a place that is local to where they currently reside. Currently there is only one counselling service based in Dublin that provides support for those who have suffered torture, sadly a reality for a number of people living in direct provision accommodation. CAIRDE aims to provide counselling locally thus supporting their clients meet with a counsellor without the added burden of travelling to Dublin. CAIRDE are providing a skilful, prompt, client centred counselling service to those desperately in need of psychological support.

Governance

Coiscéim began providing low cost counselling to the people of Cork City in 2001. The service is rooted in the Social Health and Education Project also known as SHEP, itself established in 1974.

The Social Health and Education Project is governed by a Management Committee comprising people from a range of backgrounds and some who have undertaken training with the Project, as well as individuals who are professionally involved in the fields of personal and community education or development. Six advisory groups, one of which is the Coiscéim low cost counselling advisory group, support the Management Committee in its task of policy formulation.

In 2004 new structures were introduced to enhance the democratic participation in the governance of the Project, respectively Project trainers, Community Tutors and Coiscéim Counsellors.

(Governance documents CG001 SHEP Governance Policies & Procedures, 2017)

“I really appreciate how you were in the assessment, it really helped me open up to what my child needs, I felt very supported” Parent 2018

Model of organisation and support: contextualising its model of organisation and support as the service evolves

In writing this review based on the voices of clients, counsellors, referrers, and Coiscéim professional staff, it is not complete without an understanding of the elements of Coiscéim itself as a provider of therapeutic services for the communities of Cork and Kerry. These elements are the ethos, culture and values, structure, model of psychotherapeutic support, and a dynamic administration. Each of these elements interlink to provide a competent professional psychotherapeutic service. Each of these adjectives have meaning, built, nurtured and honed over the past twenty years of its existence.

Community based model of organisation

Coiscéim as part of SHEP has grown as a dynamic community-based model grounded in collaboration and rooted in community practice. Starting as a low cost counselling Coiscéim began providing low cost counselling to the people of Cork City in 2001. The service emerged from the experience of Social Health and Education Project also known as SHEP, itself established in 1974. The core values developed in SHEP facilitated a response to the emerging needs identified in the adult education setting leading to the creation of Coiscéim. Most who attended SHEP were from the marginalised parts of Cork City and would be unable to pay the full fee to a private counsellor. Coiscéim started in 2001 with 64 clients; in 2018, they saw more than 500 people.

The organisational model of the service is a collaborative networking approach that allows for ease of access for clients to a therapist. Fostered within the culture and structure is an interdependency between the funders who trust SHEP and hence Coiscéim the client and their community. Therapists and other social organisations, both statutory and not for profit within the two counties of Cork and Kerry are involved collaboratively with Coiscéim. At its heart is relationship, a fostering process of constant connection and response to those who can help and those in need of help. The richness of the collaborative relational landscape within which Coiscéim operates is seen as follows

Ethos and Values

The ethos expressed in the values of SHEP are shared with Coiscéim. There are many strengths evident from the relationship with SHEP. One is the structural and cultural containment provided by SHEP for Coiscéim. In addition, the shared values of SHEP and

Coiscéim of equality, respect, empowerment, honesty, initiative, creativity and compassion are reflected in the feedback throughout this review. Expressed in the joint interview with the Director of SHEP and the founding Counselling manager they said, “Coiscéim needs to be seen as embodied in SHEP”. In existence for almost fifty years in that time, SHEP is now twice its original span of delivery and size. In the words one referrer organisation “At the core of SHEP and Coiscéim is the essence of client centred support.”

The organisation model in action

The attention paid to the organisation structure and embedded in SHEP is a model of good practice for social support service. The governance of SHEP mirrors the communities that receive the services delivered by SHEP, one of services being Coiscéim. The values listed above are lived values that support the work of Coiscéim. The organisation ethos mirrored in its structure is rooted in community development; reaching out to all stakeholders it ensures those from the community are represented in the governance or decision-making process. The core behaviours of this organisational structure is relationship, collaboration and networking. This spans the community including the not for profit charity sector, the statutory bodies, the counsellors, and the people of the communities themselves. The HSE is a significant part of this collaborative-networked support. They have supported the work of Coiscéim by its presence in governance, financially to ensure it is a low cost counselling service and practically by referring clients to the service.

This collaborative model is best summed up in the following y have worked together with SHEP and Coiscéim to achieve the goal of the provision of counselling to,

Model of support

The model of support provided by Coiscéim is one that has grown into maturity in a context of a collaborative community based organisation setting. The annual report sums it up,

“The intention is that, through counselling, Coiscéim will help clients to be better able to manage their own arising mental health issues and their relationships, thereby enhancing their own quality of life and the quality of life of those with whom the clients are closely connected.” Annual report Coiscéim 2017.

The model of client centred support facilitates the provision of a professional service for clients providing spaces for clients to explore their underlying reasons for their issues some of which are that of anxiety, depression, loss and trauma. Client centred means it puts the needs of the client at the centre. In practice, this begins with the first contact between the client and Coiscéim and follows through to the sessions with the therapist. The professionalism is mirrored in the ninety-five trained and accredited Counsellors who work with clients to support them have improved outcomes. An example of this is the number of theoretical models of therapy that is available to clients from the Counsellors. The approach is person centred humanistic and integrative including

- Cognitive behavioural therapy
- Psychodynamic therapy
- Mindfulness
- Gestalt
- Art and play therapy

Where Coiscéim differs from other counselling services

Coiscéim offers a service that differs from the crisis intervention services and the statutory services in three key different ways. It is immediate, it supports long-term change, and finance is not a barrier to client participation. Crisis intervention services provide an immediate response to those who are harming or may harm themselves. Once their client's crisis is reduced, the crisis service seek to refer the client to a service such as Coiscéim, where a person can explore their challenges that has led them to self-harm, develop an understanding of themselves, and build on their strengths.

Those interviewed reported there are substantial waiting times in the state provided mental health services stating the state services have long waiting lists. In the word of one referrer who also sends patients to the statutory mental health services "I don't like having telling someone they have a three month wait to be seen by CAMHS" GP/GMS service.

Referrers, who see many clients in crisis, reported there are not sufficient services such as Coiscéim to take up the longer term counselling support. The difference between Coiscéim and crisis counselling services, GP and psychiatric practices is that Coiscéim provides the space for children, adults, couples or families to explore their underlying issues, thus supporting those who attend a Coiscéim counsellor/therapist to come to gain a better perspective and feel better able to manage their emotional lives. The waiting time facilitates a client centred approach and the application of a

low cost fee ensure client show cannot afford private psychotherapy receive psychotherapeutic support. The fee is negotiated between the therapist and client. As the sessions proceed based on the clients ability to contribute financially. It is good practice to charge even a small fee. This supports the ethos of equality and allow the client feel valued in the work they are doing with the therapist.

Evaluation methodology

A mixed methods approach to evaluation was employed concentrating on written records and the following categories of stakeholders who have engaged with Coiscéim:

- Clients
- Counsellors
- Referrers
- Key Coiscéim staff/service leaders
- CAIRDE project manager
- Child counselling service manager

The research methods used were

- Focus group interview with counsellors
- Semi-structured individual interviews with referrers
- Semi-structured interviews with key Coiscéim staff
- Semi-structured bilateral interviews with Coiscéim manager and SHEP Director
- Desk research: client feedback forms 2016 – 2018
- Desk research: published annual reports 2016- 2018

Ethical considerations

The ethical considerations that form part of this review are that of equality and confidentiality. Studies of a qualitative nature give rise to complex and contradictory dilemmas, not least because there is a power imbalance in all research. To counterbalance this, it is essential that the researcher is aware of the confidential nature of the counselling relationship between the counsellor and the client. The aim is not to inquire into the substance of the work conducted between client and counsellor, rather to explore their satisfaction with the counselling service as it leads on to a structured support for those seeking psychosocial support in their lives.

The feedback forms completed by clients between 2016 – 2018 who have used the Coiscéim counselling service is the research data that captures the levels of satisfaction that the clients experience of the service. Anonymity for clients is maintained throughout the Review. Confidentiality was agreed between the researcher and the counsellors who attended the focus

group session. No names appear in the report, however, certain organisation roles within Coiscéim when noted may lead to their identification.

Coiscéim counsellors have granted their permission to allow their identifying job title to appear in the document. Quotations will appear in the document drawn from feedback forms completed by clients. No person will be identified from the quotations; the purpose is to illustrate significance for the objectives of the review.

The published annual reports are in the public realm and as such can be readily viewed.

Focus group interview

A focus group was conducted with eight counsellors. They were a mix of men and women representative of urban and rural locations. Facilitated by the researcher, the focus group lasted 90 minutes. The focus group began with introductions of those present; an explanation of the review and an opportunity for questions and answers on the review process by those present. The researcher explained confidentiality and it was agreed as a vital part of the process. The focus group was conducted in the new SHEP centre in Ballintemple, Cork City.

The researcher utilised qualitative research methods and desk research to conduct the focus group. These methods support the identification and analysis of satisfaction levels and emerging trends with the services across the key stakeholders. The desk research data supports and underpins the identification and analysis of strengths, any areas of weakness, and key areas for further development. A sample focus group template is available at Appendix A

Individual semi-structured interviews

Six semi-structured interviews were conducted with participating professionals, including four referrers to the service:

- A general practitioner
- A psychiatrist
- Two crisis intervention organisations
- A counsellor establishing a new counselling service for migrant persons living in direct provision accommodation in Cork city and county.
- Coiscéim Counselling manager for children and young persons between the ages of 7 and 25.
- Director SHEP and Coiscéim Counselling Manager who were interviewed together.

All referrers were asked to identify their motivation for referring clients to Coiscéim, the value they perceive in the Coiscéim service to their clients and patients, and finally what if anything they would wish to change regarding Coiscéim. While there is a long list of referrers with a history of

collaboration with Coiscéim, these four were selected as together they represented support in the community, a recognised mental health professional, two crisis intervention organisations that are established with mental health counselling support facilities in the community. A list of all referring bodies is at Appendix B.

The researcher made contact with each referrer to set up a mutually agreed time to conduct the interview. Each individual interview lasted between 40 minutes and one hour.

Individual semi-structured interviews were conducted with those counsellors leading counselling services for children and asylum seekers respectively. The purpose of these interviews was to identify responses by Coiscéim to emerging needs in the community regarding mental health.

Joint interview

The Director of SHEP and the Coordinator of Coiscéim were interviewed together in the Ballincollig premises. The purpose of this interview was to gauge the cultural, governance and organisational perspective of Coiscéim and lasted just over one and quarter hours.

Desk research

- Feedback forms, completed by Coiscéim counselling clients 2016 – 2018 were reviewed to gauge the clients' satisfaction with each stage of their experience with Coiscéim. The Review focused on the forms 2016 – 2018. The feedback from completed forms in 2019 were also reviewed to support the conclusions regarding future trends.
- Annual reports from 2016 – 2018 provided statistical data concerning each year.
- The Social and Health Education Project: Summary of Outcomes 2018 added to the data published in the annual reports.

A sample of the client feedback form is available in Appendix D

“I could not afford to pay for a private counsellor and needed counselling. This was a godsend to me”. Client 2016

Clients

Clients’ Profile 2016 – 2018

The following is feedback from those who interact most closely with the service, the clients, the counsellors, and those who refer clients to Coiscéim.

In the past three years, more than 2000 people have contacted Coiscéim seeking counselling services. This section will review the service concerning the clients over the past three years, in particular, the ages and range of clients, which have made contact with the service. This will incorporate the client satisfaction with the service both administratively and clinically.

The process for a client seeking counselling support is in four stages.

The process for a client seeking counselling support is in four stages.



Once the client receives the referral from their doctor the referral agency or indeed a self-referral, they make contact with Coiscéim and are provided with an assessment appointment. The assessment is conducted over the telephone with one of the three accredited psychotherapists based in Coiscéim. The option of a face-to-face assessment is available if this is more comfortable for the client. The aim of this meeting is to ensure the client is referred to a counsellor best suited to their needs. This includes the client’s presenting issues and practical matters such as geographical location and available timeframes. The financial issue regarding the cost to the client is discussed at the assessment meeting.

Who are the clients/profile?

YEAR	Contact	Assessment	Referral	Attended counsellor
2016	787	550	550	502
2017	695	599	599	569
2018	606	501	501	495

In 2016, 787 persons made contact with the service. In 2017, it was 695. In 2018, it was 606. The majority of clients are individual men, women and children and a small number of couples. The overall numbers making contact with the service has reduced slightly year on year. There are trends within this number that speak to a shift in needs particularly among the younger adult age group and for children. The reason is that in the past three years Coiscéim has managed the list differently. The system builds a list to forty names then closes the list until approximately two weeks. Those making contact with Coiscéim in this time are asked to call back when the list is reopened. This system ensure clients do not stay on a long drawn out waiting list. Feedback from the referrers is there is a large cohort in Cork and Kerry who do not have access to finance for private therapy. This section of society continues to make contact with Coiscéim.

One thing that is evident is the numbers being assessed and being matched with a therapist remains consistent over the three years under review. Of those assessed for therapy there is a small attrition rate in each year of approximately 8, 5 and X % respectively. Coiscéim reported they do not have the resources to explore the attrition rate of those not attending for therapy once assessed.

Adult age profile

Year	Age	Age	Age	Age	Age	Age	Total
2016	20-29	30-39	40-49	50-59	60-69	70-79	
	91	152	79	72	25	3	422

Year	Age	Age	Age	Age	Age	Age	Age	Total
2017	18-25	26-39	30-39	40-49	50-59	60-60	70+	
	64	145	60	124	73	29	8	503

In 2016, the age group 30 – 39 made up 31% of the clients. This increased in 2017 with ages 26 – 39 making up 29 % of the clients. This trend has continued into the 2018 with 26 years and older representing 72% of the clients.

Gender profile adults assessed and referred

Year	Women	Men
2016	311 dna*27	149 dna 11
2017	345 dna 25	141 dna 8
2018	304	117

- dna – did not attend

In 2016, 787 people made contact with the Coiscéim service, of whom 311 women and 149 men were assessed and referred to a counsellor. The following year, 2017, 695 persons made contact of whom 345 were women and 141 men. In 2018, the total number of persons contacting the services was 606, 304 women and 117 men.

Subsidy adults

Coiscéim's low cost service means is when it is ascertained a potential client cannot afford to pay the full fee, the sessions are subsidised. This varies from person to person based on each person's individual financial situation. This aspect is discussed at the assessment and referral phase. It is kept under review by the counsellor, the client and Coiscéim throughout the delivery of the counselling service to the client. The aim of the subsidy is to ensure no one is excluded from therapy and counselling resulting from financial hardship.

It is good practice to encourage clients to make even a small financial contribution to their sessions. This has been shown to improve their commitment to their treatment and allows for an equal relationship between the counsellor and the client. As a client's circumstances change and improve, they are then in a position to contribute more to their treatment. Subsidy rates varied and were

determined by the amount a client could pay and were within the average range of €5 to €20. Subsidies of €25/€30/€35 were given for a few clients whose financial situation was seriously limited.

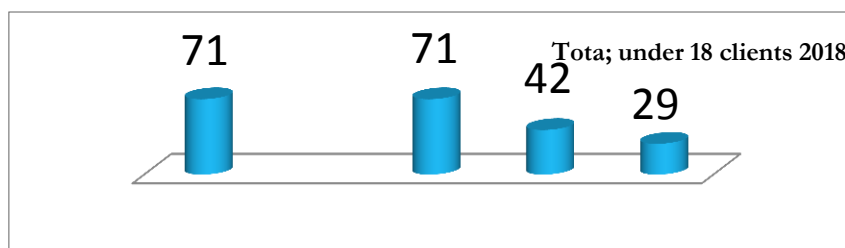
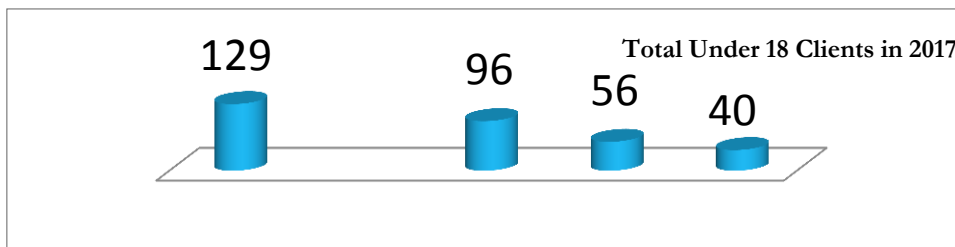
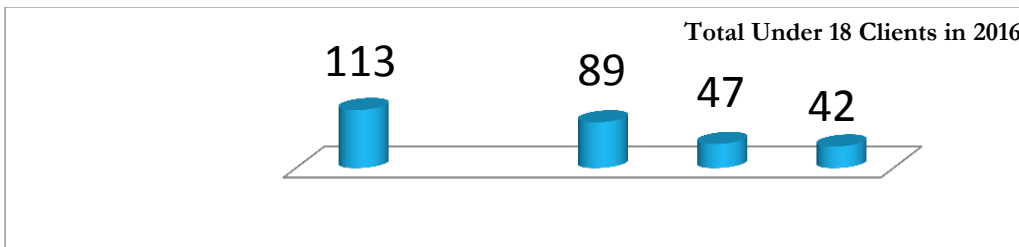
In 2016, 411 clients (3 in 4 or 76%) availing of counselling support from Coiscéim were supported with a subsidy. The remaining 139 clients did not require a subsidy. In 2017, 419 clients (70%) availing of counselling support from Coiscéim were supported with a subsidy. The remaining 180 clients did not require a subsidy.

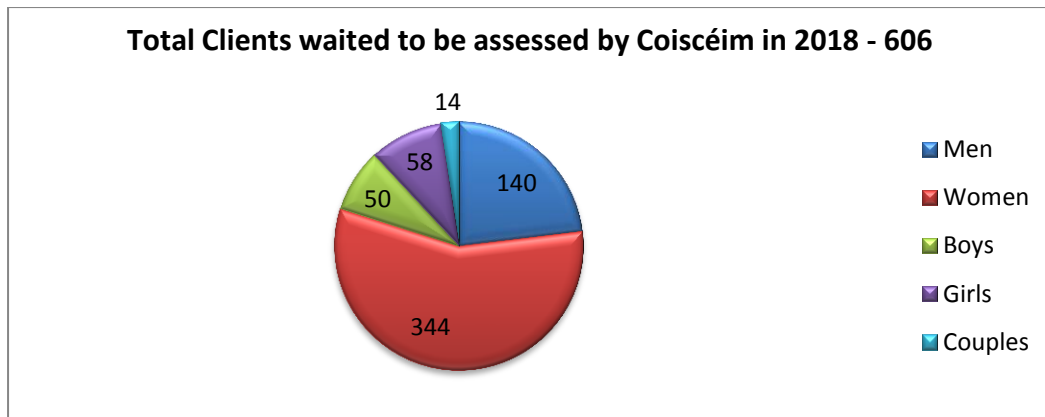
In addition to seeing men and women as clients, Coiscéim assessed and referred X numbers of children for counselling support.

In summary, more than 70% of those applying to Coiscéim for assessment to be referred to a counsellor have been supported with a subsidy. This support has ensured that in the region of 1200 persons have benefited with consequent benefits to their families.

Children clients at Coiscéim 2018 under 18s and 19 – 25

In 2016, Coiscéim assessed and referred 89 children, 47 girls and 42 boys to counselling services. This increased to 129 children, 56 girls and 40 boys in 2017. This increase occurred again in 2018, with 108 children, 58 girls and 50 boys.





The numbers of children are steadily increasing year on year. The ages of children range widely including some as young as six years old. The peak age for those attending child counselling is twelve and fourteen years of age. The main referrers for children is HSE GPs followed by families then by schools.

“I’m taking something with me....something happened....something new” Coiscéim client as reported by a Coiscéim counsellor.”

The Clients Voice

Clients consistently ticked the yes box regarding satisfaction with the differing stages, from first contact to assessment, to referral and satisfaction with the counselling relationship and process. Clients expressed being very satisfied with their experience of Coiscéim. Clients reported they would welcome more sessions and this was also supported in the counsellors feedback..

The overall feedback from clients is positive: the statement from the client above is indicative of many such responses:

“Fantastic counsellor really helped in getting to source. Will go back. Feeling the benefits long after”
Client 2017

Coiscéim regularly invites clients to complete feedback forms based on their experience of the service. The evaluation lists the following key stages with which they engage with Coiscéim, namely

- Their first contact with Coiscéim and waiting time for assessment session

- Assessment session
- Referral process or matching to therapist
- Financial cost of the service to the client
- Experience of counselling sessions

The feedback forms completed by the clients are handed to their counsellor who in turn provides these to the Coiscéim assessment counsellor for review. This is carried out by requesting written feedback from every eighth client from the adult list; every sixth client on the 19 – 25 year old list. Those under eighteen are sent an evaluation form by post with a stamped addressed envelope enclosed to return to the coordinator. A copy of the feedback form is available in Appendix C.

Making contact and waiting times with Coiscéim

As listed above, the process for clients is as follows: a client can self- refer to professional such as a GP or a crisis intervention service can refer a client/s to Coiscéim. The client then makes contact with the Coiscéim assessment counsellor who arranges to see them with a view to assess and refer them to an appropriate counsellor. The matching of the client to the therapist is based on the client's needs. Once the assessment is made, contact is made with the therapist and the therapeutic work can begin.

The written feedback provided by clients positively supports a short waiting time between making contact and seeing the assessment counsellor. Half the clients reported waiting no longer than one week to receive their first contact from Coiscéim, almost half reported waiting two weeks and a small minority reported waiting a month. All clients reported finding the conversation with the assessment counsellor useful:

“I was accommodated in every way possible” Client 2016

The Assessment session

Every client who makes contact with Coiscéim seeking counselling support is offered an assessment session. This allows the assessment counsellor to match the client to the therapist most suited to their needs. This includes their presenting issue and the geographical location of the client and financial cost. Clients consistently reported their positive experiences when they met the assessment counsellor:

“Pat was wonderful to talk to, I felt she really thought about my needs and was sensitive and kind”.

Client 2017

“I found the conversation with the assessment counsellor extremely useful” Client 2016

Another wrote as a parent about the assessment provided to their child:

“ I really appreciate how you were in the assessment, it really helped me open up to what my child needs, I felt very supported” Parent 2018

The data gathered regarding waiting times on the client feedback form is listed as quantitative data and is not reported on a qualitative form. Once seen by the Coiscéim assessment counsellor, clients reported contact by their therapist within one week. This is consistent over the three years under review and has to be a key element in the overall success of the intervention.

Client’s experience with their therapist

“I felt very at ease with my counsellor and felt all my concerns were met” Client 2016

“The counsellor I was assigned to was exceptional, a huge help to me” Client 2017

Clients consistently reported feeling well matched to the therapist to whom they were referred. Many reported that they value being offered the choice between a male or female therapist as helpful:

For many this is the client’s first experience with a therapist. Therapists interviewed for this review reported that a number of their clients referred to them by Coiscéim expressed to them that they (clients) had never had any one really listen to them before. One client reported:

“This was the first time I have ever felt comfortable with a counsellor”. Client 2017

A number of clients come as parents seeking help for their child. The words of one parent’s experience wrote of this: *“My child now makes their own appointments.....he/she struggles but is still going....its hard work but necessary”* Parent 2018

Cost of the service to the client

Regarding the fee negotiated between the client and therapist, it is based on the client's ability to pay. Clients reported being satisfied with this system. A common comment is:

"I could not afford to pay for a private counsellor and needed counselling. This was a godsend to me". Client 2016

A minority reported finding the fee challenging, one lone parent saying:

"It was hard to pay as I am a lone parent" Client 2017

A minority of clients felt that even a nominal financial payment for therapy was a genuine hardship for them, especially for those engaged in family therapy where more than one family member required counselling:

"I managed to get a fee for €20 which I am happy with, but for my 17 year old I have to pay €25, wish I could pay less. I am a single mum of 3 so funding is difficult" Client 2018

Satisfaction with the therapeutic session

Positive satisfaction is consistent throughout the written client feedback forms regarding the various stages of the process.

A client reported:

"The counsellor I was assigned to was exceptional – a huge help to me – I wouldn't see another counsellor" Client 2016

Another client reported:

"I don't know how I would have coped without this service". Client 2017

Clients in some instances have reported they would like to have more counselling sessions than the number they receive:

"Be fantastic to have counselling sessions for a longer period of time" Client 2017

The current allocation is ten number of sessions. Therapists have reported that they can negotiate additional sessions for clients if they feel it is necessary. Coiscéim supports this flexibility.

The feedback sheets have one item that is consistently ticked by all the clients and that is that they would recommend the service to others. The following word cloud represents words used by clients 2016-2018, regarding their experience with Coiscéim:



“It was a long drive but it was worth it to see the change in our daughter” Client 2017

In summary, more women than men attend for counselling. Children are increasingly using the service. Couples and families attend for counselling. New groups of clients attending for counselling are people living in Direct Provision accommodation. The majority of feedback forms showed clients value the experience of assessment, the matching with their therapist, the affordability, and the improvement in their own wellbeing.

Overall the low cost fee was welcomed by those attending for counselling clients expressing their valuing the experience and usefulness of their counselling experience: *“It helped me through a very tough and distressing few months that I was a going through alone”*. Client 2017 *“If it wasn’t for counselling I don’t know how I would possibly have gotten through all that I have”* Client 2017

Clients consistently ticked the yes box regarding satisfaction with the differing stages, from first contact to assessment, to referral and satisfaction with the counselling relationship and process. Clients expressed being very satisfied with their experience of Coiscéim. Clients reported they would welcome more sessions was also reflected in the counsellor feedback.

“I don’t know what we do without them” Crisis intervention service.

Referrers

Who refers clients to Coiscéim?

Clients are referred from a diverse number of sources and is reflective of the community Coiscéim supports in Cork and Kerry. It is challenging to reduce the range of referral sources to specific categories as they represent a richness in the range available within the communities within which Coiscéim operates. For the purpose of this review, the referrers are classed as self-referring clients and service referrers. Self-referring clients for the purpose of this review into

- Self
- family referral
- Return of prior client
- Education participants from SHEP courses
- Website and google

The majority of referral sources include the HSE, GPs, Crisis Intervention organisations, Community voluntary organisation and schools.

Referral sources: first contact	2016	2017	2018
Self-referral	291	360	206
Includes HSE, GPs, Crisis Intervention services, Community voluntary services, schools	496	335	400
Total	787	695	606

Ref. Coiscéim annual reports 2016 - 2018

Not every person who makes contact follows through with an assessment session.

Clients assessed and referred to a therapist for counselling	2016	2017	2018
Total	550	599	501

In 2016, 787 persons made contact with Coiscéim of whom 550 attended for assessment and referred to a therapist for counselling. In 2017, 695 person made contact with Coiscéim and 599 being assessed and referred to a therapist for counselling. In 2018, 606 persons made contact with Coiscéim with 501 going to assessment and referred to a therapist for counselling.

A list of the referral sources all who have referred clients in 2018 are at Appendix B. The numbers referred are not listed to support client confidentiality as this might inadvertently lead to identification. These numbers are available to Cosicéim. The vast majority of those who attend for the assessment session go on to meet with their matched therapist.

The Referrers' feedback

Four referral sources were interviewed individually for this report. These were two crisis intervention services in Cork City, a GP from a busy GMS practice in Cork City and a HSE psychiatrist in Cork City. All four services had referred clients to Coiscéim since they opened their own doors to patients and clients respectively.

The crisis intervention service has referred clients since its inception six years ago, the second crisis prevention service for ten years, the GP for twenty years and the psychiatrist for six years. These four referral sources between them referred 134 persons 2016 - 2018. All services said they are dealing daily with an influx of clients and patients needing professional counselling and psychotherapy. All reported there is a lack of services in the community generally and reported the statutory mental health services are inundated and have long waiting times for patients and clients. The presenting issues to these referring services are complex, including self-harm, suicide, and with a backdrop in the north city of Cork of increasing homelessness adding to the stresses not only on the people of Cork but on the very stretched statutory services

"I don't think we could sustain what we do without the not for profit services like Cosicéim HSE psychiatrist.

The key findings from all three interviews were:

1. *Trust and confidence in Coiscéim*
2. *Clients seen, assessed and matched to a therapist without delay*
3. *Provide ongoing therapeutic support for clients*
4. *Collaborative support of patient and clients*
5. *Client centred service "Can't stress this enough" words of one crisis service manager*
6. *Low cost*
7. *Range of therapeutic supports – child, individual, and family*
8. *Community based response*

All four referrers expressed trust and confidence in the support provided by Coiscéim to their patients and clients:

“ I know when I have referred a client to Coiscéim they will be met with support and professionalism, they are trustworthy and prompt” Referrer

Each said of their own service that they were not equipped to deal with clients or patients’ underlying issues that had led to their mental health crisis. The crisis intervention services are specifically there to respond to those contemplating suicide. Once they have achieved this with their client, where appropriate, they refer their client to Coiscéim for psychotherapy counselling. The psychiatrist said that lack of resources in their service means they rely on the not for profit support provided in the community. Adding that they rely on the kinds of services offered by Coiscéim to provide family and couples and child therapy.

“ We rely so much on the services provided by SHEP and Coisceim as there is are no counselling services embedded in secondary psychiatric support” HSE Psychiatrist.

The GP said a GP practice does not allow for the necessary time required to help patients with the underlying issues concerning their mental health:

“There are very few place like Coiscéim in Cork” GP

All four reported that referring their clients and patients to Coiscéim allowed them know their clients and patients were appropriately supported. The Coiscéim counsellor is viewed favourably as supporting the client to gain a better understanding of himself or herself in order to support them to live a more fulfilling life:

“The process of working through their issues is invaluable for the clients” GP

One referrer said that when he refers patients to Coiscéim they definitely appear to improve, as they do not re-present with the same mental health issues:

“ I know it works as I don’t hear back from patients”, GP

The referral process was experienced as straightforward and prompt. Once a person was referred they were contacted and with a therapist in a matter of weeks. This they reported was in contrast to their experience with longer waiting times for statutory services. They did acknowledge this was due to an overall lack of resources in this sector. The referrers reported finding the availability of the Coiscéim staff immensely supportive. This collaborative approach to working together has ensured clients receive a prompt referral to a therapist:

“I breathe a sigh of relief when my client is in touch with Coiscéim” Crisis intervention service

The fact that the Coiscéim service is client-centred is of immense importance to the referrers. The client is paramount, being supported in a short waiting time, a caring and competent therapeutic assessment by one of Coiscéim’s three accredited therapists and matched with a therapist that is relevant to the client’s needs. In the words of one referrer:

“I can’t stress this...client centeredness...enough” “Crisis intervention service manager

Referrers unanimously reported that the low cost fee policy of Coiscéim is essential to their making referrals. The fact was mentioned across all interviews that finance is not a barrier to clients receiving a therapeutic service and that this was essential to the success of the service:

“Could never afford to pay a private therapist” GP talking about their patients

“A private counselling fee is an impossible amount of money for many of their clients” Crisis intervention service

The range of therapists available to Coiscéim has ensured they are able to respond to clients on a number of levels. One referrer cited how important it is that the Coiscéim staff have an eye to matching:

‘having an eye for the right therapist for each client’ Crisis intervention service manager

It was reported by all referrers interviewed for this review they deeply welcomed that Coiscéim provided support for those from the age of seven to old age, to adults, couples and to families. In summary, those referring clients experience Coiscéim as a trusted effective service that collaborates with them as professional and provides client centred counselling support.

“Coiscéim are good people, we feel they are interested in us and the clients” Counsellor

The Counsellors

Coiscéim currently has 95 counsellors on its active referral panel. A further 50 counsellors are on the standby panel and are available to take referrals should a client’s presenting issues require their expertise/specialisation. In the focus group interview, counsellors reported three key positive themes:

- the overall ethos of Coiscéim
- the relationship between the counsellors and Coiscéim
- the support they receive for the work they do with clients.

Under the heading of overall ethos, they experience the service as client-centred featuring an openness and compassion towards people. They experience a sense of community with Coiscéim rather than one of distance:

“we feel deeply respected by Coiscéim.” Coiscéim counsellor

“I love the ease with which I make contact with a likeminded person not just a professional ruled by rules and regulations”. Coiscéim counsellor

Coiscéim holds a balance between the needs of both client and therapist, ensuring when matching them that it is more than geographical, which they reported is not the norm in other services. This degree of matching therapist and client was a strength that was emphasised by the counsellors. In addition to geographical location, the professional background and experience of the therapist is taken into account. Clients are invited to select either a male or female therapist.

The removal of the financial barriers for the client is highly valued by the counsellors reporting it is of immense value to both the client and therapist. They did say that it is good practice to charge the client some money as this supports them in their growth and development to put a value on themselves.

“I am providing counselling to a person who cannot afford it” Coiscéim counsellor

Other elements reported as appreciated by the counsellors were

- Support from Coiscéim when there is a child protection matter to be reported
- Flexibility regarding the fees to charge the client
- Flexibility to increase the numbers of sessions with a client should it be needed.

Challenges perceived by counsellors

“How can it grow and keep its soul” Counsellor

“Coiscéim are keepers of the flame” Coiscéim counsellor

The issues that caused concern for the counsellors were discussed by them in a context of seeing increased mental health needs in the community. They reported there is increased complexity in the issues presented by clients.

They spoke warmly of the years it had taken Coiscéim to grow and develop the ethos and culture that supports more than 500 persons per annum being seen by a counsellor. This culture of support fostered by SHEP and Coiscéim has benefited all concerned. One therapist summed up for those present when they said:

“There is a maturity of experience in this service that cannot be created overnight”. Coiscéim counsellor

The group discussed the values of Coiscéim as real in the manner in which they are brought to life for the clients.

Therapists reported their fears of losing the people and systems that have been solidly built up in SHEP and then in Coiscéim. These fears are linked to possible changes regarding the following:

- Funding
- Maintaining the values and practices of client centeredness
- Succession plan for Coiscéim
- Low cost fees for clients
- Maintaining a prompt response to clients
- Comprehensive assessment process
- Matching of skilled and experienced therapists
- Humanity of the service is being diminished by increased regulation of the charity sector.

The things that are challenging concern their fear for the future. They are fearful of a reduction in funding that might erode or diminish Coiscéim’s capacity to support low-cost counselling for those in the community who cannot afford to pay. The counsellors expressed a fear of the value of client centeredness might not be not fully appreciated by those outside the organisation.

They wondered who might lead the next generation of Coiscéim, or who might succeed as the next set of leaders, asking specifically would a new leadership carry on the core values of client centeredness, collaboration and relationship essential to the ethos of the work?

The counsellors spoke at length about the broader aspects of mental health services and the practice of Coiscéim. Many of the counsellors reported that in the marginalised communities where they provide support they meet clients who have or their families have had negative experiences of the mental health services, to the extent, those in the community know the psychiatric ward in the local acute hospital. The ward is entitled 'GF' no more than that. This is indicative of the stigma still associated with mental health or mental illness. For those in the communities attended to by Coiscéim counsellors, being sent to ward 'GF' could be perceived as an expression of hopelessness. These concerns expressed by the counsellors mirror the fragility of those in the community who when they find a place where they are heard can begin to cope better with their own life circumstances and not end up stigmatised by virtue of their life struggles. Conversely, counsellors reported that hope fostered in Coiscéim service and spoke words of one client following a session with their counsellor: "I'm taking something with me....something happened....something new" from Coiscéim client as reported by Coiscéim counsellor

“No one person can do this – it needs caring from an organisational centre of excellence”

Counsellor

New developments

Coiscéim is developing a new service for those in direct provision accommodation entitled CAIRDE and they are consolidating the child counselling service.

Child-centred therapy

Child-centred therapy has emerged from the initial support of the parents who presented for counselling support and from the education groups delivered by SHEP. It has evolved gradually starting with a conversation about the issue and the identification of appropriate needs. The initial response was with the support of an art therapist. While the purpose of this present review is not to evaluate the therapeutic process, it seems evident that the capacity to support for children is based on child and family system models grounded in the sound therapeutic practice supported by Coiscéim. An example of this is the understanding of the impact of trauma on a pregnant mother and the unfolding outcome of this in the life of her child. This can also present as intergenerational trauma such as unemployment, alcohol, drug addiction and loss. Children are seen as themselves but within the context of their family setting which is kept in mind by the therapist. Art and play therapy is the method for the 7 to 12 year olds. Given that Crawford College in Cork City trains art therapists, it was said by a Coiscéim manager that Coiscéim is ‘spoiled for choice’.

The age group seen as children range in age from seven to 25. While childhood legally ends at 18 years of age, scientific data and indeed paediatric medicine support the treatment of child therapy until the age of 25.

The benefits experienced by those attending for therapy and counselling are

- *Parents say children are regulating their emotions better*
- *Separated parents get reassurance they are not the problem*
- *It provides a safe space to talk either individually or with mum and dad present, where appropriate.*
- *Reduces anxiety for the child and their parents*
- *Children more able to ‘act out’ in the home setting rather than school*
- *Children do not come here to be ‘fixed’*

Among the challenges of this service is the time it has taken to grow and hone the model of support, one that is based on empathy, trust, holding and containment. Currently and this is borne out by the referrers, there are not sufficient resources for child therapy and counselling generally. Other challenges are:

- It is challenging to find the resources locally, as Cork and Kerry have a large rural hinterland.
- There needs to be more therapists skilled in working with adolescents
- The therapists need to be recompensed for the work

Supporting those in direct provision

“Great kind loving people” Reference to Coiscéim staff by CAIRDE interviewee

CAIRDE, meaning friendship, was set up to provide therapeutic support to those people living in direct provision who have experienced trauma on their difficult journey through many countries on their way to this country. Coiscéim unconditionally supported the setting up and delivery of this new service. In Cork City, there are three direct provision centres.¹ The idea for a specific counselling service for those living in direct provision began with a meeting with a woman in Cork City who was from the Congo. The experience of listening to this woman’s story and her experience of trauma led to the setting up of the service entitled CAIRDE.

It was stated that secondary trauma is also often a feature of those living in direct provision.

One concern when setting up the service was that the life for asylum seekers is one of ‘endless’ waiting. It was essential that this aspect of their lived experience not be repeated by the new counselling service. To ensure those needing support receive it expeditiously, the service was born following the first official presentation at a direct provision centre in Cork city. A founding group of seven counsellors together with their coordinating counsellor has started the provision of this counselling service. This group of counsellors has already undertaken training to be more sensitised to the particular needs of clients, which includes cultural awareness. Part of their training is the exploration and understanding of unconscious bias and its impact in the counselling space.

A creative approach to the delivery of the counselling service to these new clients is a feature of the work. For example, counselling as a therapeutic treatment can be alien to other cultures. This challenge, taken up by this fledgling service is utilising innovative approaches to the support of those in need. An example of this approach could be a counsellor and client walking and talking together in a place of natural beauty rather than in the conventional model of indoors with two chairs facing each other. These methods support an awareness of cultural differences and the impact trauma that can include torture has had on the client.

The next step is to introduce the service to a number of agencies working either directly or indirectly with asylum seekers in Cork city. This is to encourage a pooling of resources rather than inadvertent competition between the relevant agencies.

A referrer to Coiscéim was delighted to learn of this new service. There has been nothing for this cohort of patients *“with immense mental health needs”* HSE psychiatrist.

“They are invaluable to us” Crisis service intervention manager

Summary trends and recommendations

The numbers receiving counselling support from Coiscéim in the years 2016 to 2018 are 1650. Behind those numbers are parents, families, couples and children supported by Coiscéim therapists. There is a slight increase in the number being referred from the institutions and charity organisations, 1231 being referred from the HSE and charity organisation and 857 listed as self-referral. This shift is slight and the number self-referring is still significant. What is interesting is the collaborative relationship and trust that has developed between Coiscéim, the HSE, Tusla other statutory agencies and the charity sector which continues to grow. This trend can be monitored in the years beyond 2018.

The complexity of presenting issues is increasing in the client group. Couples, family therapy and child therapy are increasing as needs in the communities. Crisis intervention services reported an increase in those contemplating suicide. Other societal changes are present in Cork and Kerry including

- Changes in family life
- Homelessness
- Direct provision residents
- Drug and alcohol addiction and its impact on families
- Bullying both in school and in social media.

Coiscéim has consistently shown itself capable of responding to the changes that emerge to the client groups within Cork and Kerry. It has developed over time an expertise in responding to adults, children, couples and families. It is now in the process of developing and delivering a local service for those from new communities.

Clients’ feedback forms have stated they value the low cost fee professional counselling support to support clients work through their issues is challenging. This is supported by the focus group feedback from therapists and referrers from statutory and charity sectors. Knowing that finance is not a barrier to those needing therapeutic counselling is essential for the service to be maintained.

Succession planning was an issue reported by therapists. Coiscéim is twenty years old; it has gathered significant knowledge and wisdom that has been amassed as part of its growth and development in the structure of SHEP. The next generation is calling for attention to this phase of the organisation’s development. Such moments in the lives of organisation can be one of anxiety for

those who are invested in the work, which is reflected in the words of the therapists. The resourcefulness of Coiscéim and its founders is being called upon again to show the way forward.

The shift in the referral source from word of mouth to organisational is relevant to the feedback from therapists regarding their expressed fears around change. Communication with the therapeutic community as to the positive relationship with the statutory and charity organisations would support them regarding their expressed fears about how the service might evolve. The reality is that the HSE has consistently supported the counselling service managed and led by Coiscéim through its long held connection with SHEP. In addition, Tusla support the subsidising for counselling of those in the 7 to 25 years age group through a counselling grant to Coiscéim.

The challenge is to maintain the culture and ethos developed by the founders into the next decade, to foster collaboration between this sector and the statutory sector.

One idea might be an annual event where the therapeutic, managerial, charity and statutory bodies come together in facilitated conversations with one another. What is suggested here is not a conventional conference, rather a model of reflective practice that integrates the learning in a collaborative setting. Such an experience would support the ethos and culture of Coiscéim and support those delivering the service to clients learn about the constraints in the statutory system. Another option is to create facilitated reflective conversation gatherings for therapist to share their experience and wisdom with one another.

In conclusion, clients, counsellors, statutory bodies, health professionals within statutory bodies, charity organisations all report their satisfaction with Coiscéim from their unique perspectives. It has consistently delivered mental health and emotional support for the people of Cork and Kerry for almost twenty years. The principles of client centeredness is at the foundation of the service, holding the client as the core reason for its existence. It is appropriate to conclude with the words of the client “I don’t think we could sustain what we do without the not for profit services like Coiscéim”
HSE psychiatrist

Notes

1. Direct provision is the government-funded service where asylum seekers live while awaiting to have their application for the outcome to the application for refugee status processed by the State.

Appendices**Appendix A: Focus group template**

A focus group is an in depth conversation with a relatively small number of people. It is interactive and assisted by an external facilitator. Participants usually have shared cultural and social experiences such as participating in a workplace well-being programme.

The typical number is between 6 and 10 persons. The focus group lasts for one and half hours. The outline of a focus group workshop is as follows

- Welcome and scene setting by the facilitator researcher
- Ensure the atmosphere is welcoming and relaxed
- Present and discuss contract for working together to establish trust and safety
- Establish confidentiality between the facilitator and the group and between the participant
- Introduce the open questions
- Stimulate conversation
- Ensure everybody participate
- Review at the close with the question 'Have we missed anything?'
- Thank the participants, reassure regarding confidentiality. Close

Appendix B: Referral sources Adult and Child 2018

Word of mouth: includes individual family and friends

Prior clients

SHEP courses

Web site

Statutory services

GPs

Psychiatric crisis teams

HSE Psychiatric service

PHN

Consultant psychiatrists

Probation service

Home school liaison

Social workers

Schools

Block 7 Orthopaedic

CIT counselling service

CUMH

CAMHS

Not for profit /voluntary, sector

Pieta House

Shine a Light

Citizens Info

SVDP

CIPC

Barnardos

AWARE Group

YHS

YANA

Arbour House

Enable Ireland

Marymount

Springboard

Respond Housing

leisure world

St Stephens

Ravenscourt

Family Resource centre

Rape Crisis Centre

Niche

NLN

Appendix C: A sample of the client feedback form for children

CONFIDENTIAL CLIENT FEEDBACK FORM

Please circle the following questions

(1) Is your child: Male Female

Age Group: 7-12 13-18

(2) How long did you wait for your first call back from Coiscéim (Please tick)

1 week 2 weeks More than 2 weeks More than a month

Did you find the conversation with the Assessment Counsellor for your child helpful?

Yes No

Any other comment:

(3) How soon after your assessment was your child referred to their counsellor?

Less than a week Between 1 and 2 weeks

Between 2 weeks and a month More than a month

(4) Was it helpful to be offered a choice of male or female counsellor for your child?

Yes No

Any other comment:

(5) Overall do you feel you that your child was matched to the counsellor that best suited him/her?

Yes No

Any other comment:

(6) Were you satisfied with the fee negotiated with the Coisceim Counsellor?

Yes No

Any other comment:

(7) Did the time and location of counselling suit you/your child?

Yes

No

Any other comment:

(8) Overall do you feel counselling has benefited your child?

Yes

No

Any other comment:

(9) Would you recommend this service to others in need of Child/Adolescent counselling?

Yes

No

Any other comment:

Signed: _____ (Optional)

Date: _____

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FEEDBACK FORM

Appendix D: : A sample of the client feedback form for adults

CONFIDENTIAL CLIENT FEEDBACK FORM

Please circle the following questions

(1) Are You: Male Female

Age Group: 19-25 26-39 40-49 50-59 60-69 70+

(2) How long did you wait for your first call back from Coiscéim (Please tick)

1 week 2 weeks More than 2 weeks More than a month

Did you find the conversation with the Assessment Counsellor helpful?

Yes

No

Any other comment:

(3) How soon after your assessment were you referred to the counsellor?

Less than a week Between 1 and 2 weeks

Between 2 weeks and a month More than a month

(4) Was it helpful to be offered a choice of male or female counsellor?

Yes

No

Any other comment:

(5) Overall do you feel you that you were matched to the counsellor that best suited you?

Yes

No

Any other comment:

(6) Were you satisfied with the fee negotiated with the Coisceim Counsellor?

Yes

No

Any other comment:

(7) Did the time and location of counselling suit you?

Yes

No

Any other comment:

(8) Overall do you feel counselling has benefited you in your life?

Yes

No

Any other comment:

(9) Would you recommend this service to others in need of counselling?

Yes

No

Any other comment:

Signed: _____ (Optional)

Date: _____

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FEEDBACK FORM

Appendix E: Breakdown of children by age 2018

Client's Age	Number of Clients this age
Under 18s	
6	1
7	4
8	5
9	6
10	8
11	7
12	17
13	7
14	15
15	7
16	11
17	11
18	7
19	2
Total Clients 6-19 years incl. in 2018	108

Referenced material

Coiscéim Annual Report 2016

Coiscéim Annual Report 2017

Outcomes 2018: internal Coiscéim document