Appalachian State University
The Department of Human Development & Psychological Counseling
Semester Spring 2016 Course Syllabus

HPC 6900 (102) Internship in Clinical Mental Health Counseling

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Classroom: ROCE 306
Day & Time: Thursday 8:30 am to 11:30 am
Office Hours: Tuesday 1-4:30 pm, Thursday 12:30-2:30 pm

Course Description: On the job experience will be emphasized through placement of students in appropriate human service agencies, which includes practice in counseling and other helping skills used in various agencies.

Prerequisites: HPC 5120, 5220, 5752, 5790, 5900, and 6120

General Course Objectives:
- Students will complete a 600-clock hour internship in a mental health setting over one or two semesters.
- Students will demonstrate competency with counseling skills and professional disposition and behaviors.
- Students will provide counseling-related activities that are supervised by a university and site supervisor. Supervision modality includes audio/video recordings and/or live supervision of students’ interactions with clients at their agency.
- Students will have the opportunity to become familiar with a variety of professional activities and resources, including technological resources.
- Students must maintain professional counseling liability insurance while enrolled in practicum and internship, in addition to the university professional liability insurance.
- Students will receive formative and summative supervision evaluations of their counseling performance and ability to integrate and apply knowledge.
- Students will provide counseling to individuals and groups (during either their practicum or internship and they must lead or co-lead a counseling or psychoeducational group)

Content Area: The Clinical Mental Health Counseling Internship follows successful completion of Practicum in Counseling (HPC 5900 and all necessary pre-requisites). Internship provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community. A completion of 600 clock hours, over one or two semesters is necessary. The Clinical Field Experience Coordinator approves all Internship Site for CMHC.
Knowledge and skill outcomes: Students enrolled in HPC 6900 Internship in CMHC will demonstrate the ability to meet expectations, of the 2016 CACREP standards. The standards are measured and defined by the CCS-R (Lambie, Mullen, Swank & Blout, 2015) and students are evaluated twice in the semester (middle and end) each supervisor the university supervisor and the site supervisors. Students will evaluate themselves three times at the beginning, middle and end of the semester.

- Techniques and interventions for prevention and treatment of a broad range of mental health issues (3. Practice, Standard b.).
- Self-care strategies appropriate to the counselor role (Section 2, Standard 1.1.).
- Multicultural counseling competencies (Section 2, Standard 2.c.)
- A general framework for understanding differing abilities and strategies for differentiated interventions (CACREP, 2016, Section 2, Standard 3.h.).
- Ethical and culturally relevant strategies for establishing and maintaining in-person and technology-assisted relationships (Section 2, Standard 5.d.).
- Counselor characteristics and behaviors that influence the counseling processes (Section 2, Standard 5.f.).
- Essential interviewing, counseling, and case conceptualization skills (Section 2, Standard 5.g.).
- Developmentally relevant counseling treatment or intervention plans (Section 2, Standard 5.h.).
- Processes for aiding students in developing a personal model of counseling (Section 2, Standard 5.n.).
- The counselor education program faculty has a systematic process in place for the use of individual student assessment data in relation to retention, remediation, and dismissal. (Section 4, Standard H.).
- Professional practice, which includes practicum and internship, provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community (Section 3, Professional Practice).

Infusion of counseling and related research: Students are required to integrate current and original research in related assignments. Therefore, with each case presentation, students are required to discuss current research that is relevant to the case (CACREP 2016, 2:E).

Method of Teaching: The course will consist of the following pedagogy: group supervision, seminar, and experiential. Group supervision is university and peer supervision of oral and written presentations. Seminar discusses on a variety of topics as outline on the tentative schedule and professional development. Experiential is on site learning providing a variety of counseling activities. Classmates will give evaluations each other as part of the seminar discuss and group supervision. Each student is required to do self-examination each week, review current literature related to their client, and discuss and adapt counseling techniques as necessary to support the client’s (i.e. culture, developmental process and diversity) to achieve treatment goals.

Required Textbooks: This course is not using a textbook. Routledge, NY.

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**Students Performance and Evaluation:** HPC 6900 grading criteria is a “Satisfactory” (S) or “Unsatisfactory” (U). This course does not allow for “I” Incompletes. Student must meet all the requirements as outlined in this syllabus and in the *Clinical Field Experience Handbook for CMHC (CFEH for CMHC)* to receive a Satisfactorily “S” grade. Please see *Grading Rubric for HPC 6900* (p. 27). The university supervisor/instructor, site supervisors, and classmates’ formative and informative evaluations, skills and knowledge will determine the final grade for each student. University supervisor and site supervisors will have regular and consistent consultation throughout the semester to discuss the student’s progress.

Each week students will receive formal and informal evaluation of his/her progress within the semester. A formative and summative evaluation will be completed at mid-term and the end of the semester by each supervisor site and university (see the *CFEH for CMHC*). Students will also do a self-assessment at the beginning, middle and end of the course. Final grade determination is the responsibility of the university supervisor/instructor after consulting with the on-site supervisor about skills and professional disposition and behaviors of the student (e.g., just because a student shares the required tapes does not mean they will receive a grade of “S”). Students must demonstrate effective counseling skills, knowledge, and professional disposition and behavior. If a student is does not meet the necessary 600 hours, competency standards for skills, knowledge, and professional disposition and behaviors then the student will receive a “U” (Unsatisfactory). On extremely rare circumstances, a grade of “I” (Incomplete) is permitted. A student with a “I” will be required to take HPC 6900 again and complete all the requirements in the following semester (i.e. attending the full next semester in group supervision and a the site).

**Attendance Policy and Participation:** Attending every class is vital since the nature of this course is both interactive and a clinical experience that is essential to developing the knowledge and skills of a counselor. Moreover, each student brings a wealth of experience based on her/his life making each person’s participation and contribution unique, valuable, and vital to the learning process. The information presented through supervision activities, and discussions cannot be repeated. Because of the high degree of importance placed on these core-learning methods, students can only be absent for two class meetings. More than two absences will result in a “U” grade for HPC 6900, regardless of academic good standing or reason for absence. Tardiness or early leaves are noted and accrued toward absences, therefore an absent is counted if a student is late twice or leaves early twice or leaves early once and arrive late once. Tardy means arriving more than 5 minutes late, this includes returning from breaks on time. A student who misses more than two classes is advised to drop this course and take it at a more convenient time in the future. If a student must miss class, they are expected to contact the instructor prior to missing class.

**Electronic Communications:** It is unacceptable to use cell phones or other electronic devices during class. Please deactivate/silence these devices prior to the beginning of class. Thank you for being a professional to your classmates!

**Course Requirements:**

1. Students are to read the *Clinical Field Experience Handbook for CMHC (CFEH for CMHC)*, must have a hard copy of the handbook for use, and must turn in the *Field Experience Handbook Understanding and Acknowledgment* (p 59-60 in *CFEH for CMHC*)

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2. Students are to demonstrate the ability to respect each other’s comments and differences (diversity, culture, race, ethnicity, sexual orientation, ability, and beliefs system (spiritual/religious/atheistic/agnostic). It is important that everyone enrolled in this course maintain clients and students confidential information. The student(s) who breach confidentiality will face disciplinary action.

3. Students enrolled in HPC 6900. Student are to be an intern professional counselor providing supervised services at an appropriate location, which the Clinical Field Experience Coordinator for CMHC approves. Students’ internships include all of the following (CACREP 2016, Section 3 p. 13&14.):
   - Section 3:K. At least **360 clock hours of direct service work**, including experience-leading groups. Direct hours can be defined as interacting with clients that includes the application of individual, small group, couple, and family counseling, as well as assessment and consultation, or human development skills. The remaining 240 hours can be accrued through indirect services (site supervision and see.). (When internship is split between 2 semesters then each semester students are expected to obtain **180 direct service work and 120 indirect service work** so that they cumulate the aforementioned hours).

   - Section 3.D. The opportunity for the student to become familiar with a variety of professional activities and resources (in-direct hours) in addition to the direct service (e.g., record keeping, assessment instruments, supervision, information and referral, in-service, and staff meetings) which is the remaining 240 hours across internship experience.

   - Section 3L. Weekly interaction with an average of one (1) hour per week of individual and/or triadic supervision which occurs regularly over a minimum of one academic term (15 weeks) by an approved on-site internship supervisor.

   - Section 3M. An average of 1 ½ hours per week of group supervision provided on a regular schedule throughout the internship and performed by a university program faculty member. (The roles of both the university and on-site supervisors include the professional development of the counseling intern, which are defined in the Clinical Field Experience Handbook for CMHC (CFEH for CMHC).

   - Section 3.B. The opportunity for the student to develop program-appropriate audio/video recording for use in supervision or to receive live supervision of his or her interaction with clients.

   - Section 3.C. Evaluation of the student’s ability to perform counseling activities throughout the internship including documentation of a formative and summative evaluation after the student completes the internship by a program faculty member in consultation with the site supervisor. Evaluation includes reviewing raw data (counseling session), record keeping and professional disposition.

   **Evaluations includes:**
   - **CCS-R** (pp. 39-47 in CFEH for CMHC) ratings at mid-term, and end of
the semester by each supervisor site and university. In addition, students will complete the CCS-R (p 36-47, in CFEH for CMHC) as a self-assessment at the beginning, middle and end of the semester.

- Oral case presentation and case conceptualization skills using are evaluated using the Oral Exam Rating Evaluation form (pp 15-20) and the Case Presentation Evaluation form (p 21).

- Audio/Video taping (review of the raw data) are evaluated by: (a) playing at least 15 to 30 minutes of the client session in the supervision group/individual, and (b) a completion and review forms as stated in point 5 of this syllabus (p. 11-14).

- Professional Development Plan (pp. 24-25, in CFEH for CMHC) is created by the third week of the semester, which maps students’ specific individual goals and is reviewed throughout the semester. At any point in the semester if the student appears not to on track to receive an ‘S’ the student will have a remediation plan, which will be reviewed weekly. Review will continue until the student either has made progress towards receiving an “S”, or withdraws from the course, or receives a “U” because the semester has ended without successful meeting Internship standards and requirements. A “U” grade will be assigned when the student is unable to meet the standards and competency as outline on the grading rubric within this syllabus.

- The Assessment of Internship Competency Check Sheet, the Clinical Mental Health Internship Competency Check Sheet and The Grading Rubric are evaluation tools that summarize the demonstrating meeting all requirements for this course (pp. 22-27).

4. Students are to adhere to ACA’s code of ethics and the counseling association’s code of ethics in the state (CACREP Section 3:A). This includes knowing your professional and ethical responsibilities and demonstrating the ability to apply ACA code of ethics. Each Clinical Mental Health Counseling Intern is required to provide proof of current liability insurance from ACA, before the first day of seeing clients. Even though you have liability insurance from the university, you are also required to have professional liability insurance from ACA. This insurance can be acquired by becoming a student member of the American Counseling Association (ACA) www.counseling.org, which is above and beyond the ASU insurance. By joining ACA, you are establishing your professional identity and supporting advocate for yourself and your profession.

5. Students will conduct Case presentations & Audio/Video Tape Reviews. Each student is required to present two to four audio/video segments; however, students may be requested to present more as determined by the instructor. Students are advised to have a tape ready each week because the instructor has the right to ask any amount of additional tapes and supervision sessions at any point of the semester. Students will receive a schedule of case presentations and research articles presentations.

a. It is the student’s responsibility to ensure that the recorded session can be CLEARLY heard by his or her classmates and professor (i.e., both client and counselor can be heard and understood). If the specific segment that the student has cued up for the class to listen to or watch is not clear, then the session will not count for credit. The student is

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evaluated on the counseling segment they cued up to be heard in supervision. If a student comes unprepared, the session will not count and the student risk failing the class.

b. Students are to complete two forms: 1) *Written Confidential Case Presentation Forms & Note, p. 11-12* (a copy for each classmate and the instructor) design to use in supervision to focus counselor’s interns thoughts. It is important to articulate exactly what specific feedback he/she want from the group supervision with regard to the session. 2) *Guidelines for Oral Case Presentation and Format, p.13-14* (a copy for instructor and self) is design to demonstrate the student/counselor intern understands and conceptualization the client. Both forms are confidential and neither form should have any client identification information on them. Use initial, frictional names, places etc... All forms expect the ones for the instructor are to be shredded at the end of each presentation. Student completing the *Verification of Destruction of Audio/Video Recording Form* (p. 23 in the Clinical Field Experience Handbook for CMHC) after shredding and erasing the session, forms must be turned in immediately after destruction of all client materials.

c. University supervisor and students evaluate each other on their oral presentation, case presentation and articles. On the student’s presentation day the student will have an oral exam on their general counseling knowledge, skill, professional disposition and behavior that is pertinent to the care of the client. The student presenting is to bring to class *Oral Exam Rating Evaluation Form* (p 15-20), and *Case Presentation Evaluation Form* (p 21). In addition, every week each student is to bring their copies of *Assessment Rubric for Internship Competency and Knowledge Checklist to be completed* (p 22).

d. A student, to AsULearn forum throughout the semester, posts one research article. When posting the article the student will also provide a brief summary of the salient points of the article. Than each student in the course will read the summary and review the article. Once the student has reviewed the article, they will response to the questionnaire on AsULearn. Articles will be discussed in class, as they are relevant to the case presentation.

e. During case-presentation, students will discuss ways to advocate for program change that will support the client in meeting their treatment goals.

f. Please note that if a student is not prepared on their scheduled days with the taped session cued to the exact location for supervision, and the necessary forms as stated in “b” and “c” above, then that student will not receive credit for this assignment and will risk failing this class. If a student is unable to present on their schedule day, it is the students responsibility to switch days with a classmate. The schedule does not allow for make-ups, which means that a student could fail this course if they miss presentation day.

6. Student interns are responsible for coordinating a visit between the university supervisor and site supervisor if one is deemed necessary. Student interns will provide directions to their site from ASU campus, and a way to contact the student while the student is on site. The name phone number and e-mail address of the internship site supervisor.

7. Students are to be professional and are ambassador of the university, department, and profession. Meaning, student’s actions reflect on the program, department, etc.

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8. Students are to Completing all documents as outline in the Clinical Field Experience Handbook and stated in the syllabus as indicated.

9. Read thoroughly and become familiar with the most current Clinical Field Experience Handbook (CFEH) for CMHC. Can be downloaded from the Clinical Mental Health Counseling/Community Counseling website http://www.ced.appstate.edu/departments/hpc/programs/community_counseling/practicum_interns_internshipreq, and make sure all necessary documents and requirements are completed, turn in a signed copy of the Field Experience Handbook Understanding and Acknowledgement form p 59-60 in the CFEH for CMHC.

10. If for some reason a student’s internship experience needs to terminate before the end of the semester, the student must follow the Protocol for Premature Termination of Practicum/Internship as stated on the CFEH for CMHC.

Professional Websites:
American Counseling Association (ACA) www.counseling.org
National Board for Certified Counselors (NBCC) www.nbcc.org
North Carolina Counseling Association (NCCA) www.ncounseling.org
North Carolina Board Substance Abuse Professional Practice Board www.ncsappb.org
Licensed Professional Counselors Association of North Carolina www.lpcanc.org

Weather Policy: If a class must be canceled due to inclement weather or an emergency, an announcement will be posted on the ASU website, and we will not meet. If class needs to be postponed because the professor is unable to travel, students will be notified through e-mail and an announcement will be posted on ASULearn at least one (1) hour before the start of class. Any class that is postponed will be made up.

Religious Observance Policy: Students’ religious observances will be respected and honored in accordance with Appalachian State University Religious Observance Policy which can be found at http://www.academicaffairs.appstate.edu/sites/default/files/Interim%20Religious%20Observance%20%20Policy.pdf. In order for me to honor a student’s religious observance, it is necessary for the student to inform me by the second week of class any assignment, class activity, or class time that will conflict with that student’s ability to observe their religious tradition, holiday, and/or activity.

Disability: "Appalachian State University is committed to making reasonable accommodations for individuals with documented qualifying disabilities in accordance with the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. Those seeking accommodations based on a substantially limiting disability must contact and register with The Office of Disability Services (ODS) at www.ods.appstate.edu or 828-262-3056. Once registration is complete, individuals will meet with ODS staff to discuss eligibility and appropriate accommodations." (Maranda Maxey)

Conduct: Students are expected to adhere to the Academic Integrity Code which states “Students attending Appalachian State University agree to abide by the following Code: Students will not lie, cheat, or steal to gain academic advantage. Students will oppose every instance of

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academic dishonesty. Students shall agree to abide by the Academic Integrity Code when submitting the admission application.” (http://studentconduct.appstate.edu/index.php). If any such conduct violation occurs, students can expect the professor to address the violation in accordance with the procedures as outlined in the above sources.
## Tentative Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Topics/Case Presentation</th>
<th>Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 14</td>
<td>Orientation, review of syllabus, and sites</td>
<td>Article &amp; Tapes to be review</td>
</tr>
<tr>
<td>January 21</td>
<td><strong>Topics</strong> Treatment Planning and Assessment tools that are cultural sensitive (CACREP -2:5.h)</td>
<td>Article – comprehensive assessment interventions to assist in diagnosis and treatment planning with an awareness of cultural bias in the implementation and interpretation of assessment protocols</td>
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<tr>
<td></td>
<td><strong>Case presentation</strong></td>
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<tr>
<td>January 28</td>
<td><strong>Topic</strong>: Effects of Oppression on Counselor and client’s life (CACREP –2:2.c)</td>
<td>Article – on either the effects of racism, discrimination, sexism, power, privilege, and oppression bias that may have influenced the assessment process oppression</td>
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<tr>
<td></td>
<td><strong>Case presentation</strong></td>
<td></td>
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<tr>
<td>February 4</td>
<td>Professional Licensure, Resume, &amp; Professional Identity, <strong>Case Presentation</strong> LPCA applications due to NCB LPC by February 29, 2016 (CACREP 2:1.g)</td>
<td><strong>Please bring professional disclosure statement and NC LPCA application and relevant forms as well as NC LCAS (as appropriate) forms.</strong></td>
</tr>
<tr>
<td>February 11</td>
<td><strong>Topic</strong>: Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning with an awareness of cultural bias in the implementation and interpretation of assessment protocols (CACREP -2:7.e), <strong>Case Presentation</strong></td>
<td>Article – Intake Interview, screening comprehensive assessment, and diagnosis assessment that are cultural sensitive</td>
</tr>
<tr>
<td>February 18</td>
<td><strong>Topic</strong>: Understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with mental and emotional disorders (CACREP –2:8.b), <strong>Case presentation, NCCA conference</strong></td>
<td>Article – Theories, approaches, strategies, and techniques that demonstrate effectiveness with specific populations</td>
</tr>
<tr>
<td>February 25</td>
<td><strong>Topic</strong>: Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring mental disorders (CACREP 2:7.1), <strong>Case presentation</strong></td>
<td>Article – screening tools for addiction, aggression, danger to self and/or others and co-occurring mental disorders</td>
</tr>
<tr>
<td>March 3</td>
<td><strong>Topic</strong>: Applies the assessment of a client’s stage of dependence, change, or recovery to determine the appropriate treatment modality and placement criteria within the continuum of care (CACREP 2:7.1), <strong>Case presentation</strong></td>
<td>Article – assessment of stages of dependency, change or recovery for appropriate treatment etc…</td>
</tr>
<tr>
<td>March 10</td>
<td><strong>University Break</strong></td>
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<table>
<thead>
<tr>
<th>Topic</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 17</td>
<td><strong>Topic</strong> Analyzes and uses data to increase the effectiveness of clinical mental health counseling interventions and programs (CACREP 2:8.d.3), <strong>Case presentation</strong></td>
<td>Article – effectiveness of clinical mental health counseling interventions and programs</td>
</tr>
<tr>
<td>March 24</td>
<td><strong>Topic</strong> Differentiates between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events (CACREP 2:5.m) <strong>Case presentation</strong>,</td>
<td>Article – related to crisis, disasters and other trauma-causing events that discuss the difference between human reactions a diagnostic disorder or those that are developmentally appropriate</td>
</tr>
<tr>
<td>March 31</td>
<td><strong>University Break</strong></td>
<td></td>
</tr>
<tr>
<td>April 7</td>
<td><strong>Topic</strong> Modifying counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations (CACREP 2:5.d), <strong>Case presentation</strong></td>
<td>Article – discussing ethical and culturally related strategies for establishing and maintaining counseling relationship</td>
</tr>
<tr>
<td>April 14</td>
<td><strong>Topic</strong> Advocates for policies, programs, and services that are equitable and responsive to the unique needs of clients (CACREP 2:1.e) <strong>Case presentation</strong></td>
<td>Each student is to bring in an example of a barrier at his/her site that has the potential to create an inequitable situation for clients. Article – related to advocating for policies, programs, and services that are equitable and responsive to clients’ needs</td>
</tr>
<tr>
<td>April 21</td>
<td><strong>Topic</strong> Biological, neurological and physiological factors that affect human development, functioning and behaviors. (CACREP 2:3e), <strong>Case presentation</strong>.</td>
<td>Article – Biological, neurological and physiological factors that affect human development, functioning and behaviors</td>
</tr>
<tr>
<td>April 28</td>
<td><strong>Topic</strong> Self-care and professional ability <strong>Individual evaluations</strong></td>
<td>Each student will turn in two copies of all the evaluations forms as stated in the HPC 6900 Clinical Mental Health Counseling Handbook</td>
</tr>
<tr>
<td>May 5</td>
<td>Last day of class In class evaluations Individual evaluations from</td>
<td>Each student will turn in two copies of the Data Record form for the semester. Supervisor forms as needed for licensure and any other credential with an address enveloped that is can be sealed and signed.</td>
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Written Confidential Case Presentation Forms & Note

Complete this form using complete sentences and bring a copy for everyone in class each time you present a case.

Date:________ Session #: __________ Counselor’s Initials:____

Subjective:
Reason for attending counseling today (in the client(s) words):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Reason you are presenting this client (how can we help you?)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Objective:
What have you observed about the client? And what has the client observed about themselves?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Analyze:
What are the client’s strengths?

________________________________________________________________________
________________________________________________________________________

Provide the proper DSM Code and the met Diagnosis criteria:

________________________________________________________________________

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Provide a rationale of the above diagnoses and the consideration for cultural sensitive, diversity, developmental stages and explain how you avoid being bias.

What is your conceptualization of this client, including your theoretical perspective (treatment modality, and diversity considerations)?

Treatment Plan for this session was:

Goals, and Objectives?

What progress has the client made so far?

What are the interventions used in this session?

What will you do next session did you give the client any homework?

Suggestion and comments from supervision

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Guidelines for Oral Case Presentation and Format:

*Complete on your client and bring two copies to class each time you present an audio/video tape*

The case presentation provides opportunities for interactive group supervision and consultation. Oral case presentations, must include a cued audio/video tape ready to be played for the class, for about 10 to 15 minutes. This form is presentation of the session; bring two copies one for the instructor and yourself. You will use this form to introduce your client and assist you in discussing your case. Your introduction and review of the tape should take no more than 20 minutes—followed by 10 minutes of group discussion.

**Presenting Problem:**
State the client's perception of the problem, onset and durations of symptoms, durations. The influencing on the client, family and career. Include any related problems and circumstances.

**Developmental History and Biopsychosocial history:**
Describe the developmental milestone as related to presenting problem, current developmental stage of the client and family and provide a complete biopsychosocial of the client.

**Current Environment:**
Describe the individual's current circumstances, including support systems, significant relationships, career and/or school involvement, significant interests and other activities, etc. Identify the effects of racism, discrimination, sexism, power, privilege, and oppression.

**Mental Health History:**
Describe any current and past treatments for mental health, substance use, or co-occurring disorders. Describe any incidents of current and past aggression towards self or others. Describe current Mental Health Status.

**Psychological Assessments:**
Include your assessment the following: (a) signs and symptoms of the problem, signs and symptoms including onset and duration of each, (b) differentiates between diagnosis and developmentally appropriate reactions during crisis, disasters, and other trauma-causing event, (c) screening for substance abuse disorders and co-occurring disorders, (d) client’s stage of dependence, change and recovery. Identify cultural bias in the implementation and interpretation of this information.

**Medical Issues and Pharmacological:**
List the client’s medical issues, (biological, neurological and physiological factors) date of onset and treatment. Provide the names of medication the client is on, the purpose, dosage, date medication started, and any side effects the client reports.

**Assessment Interventions:**
Describe any assessment tools you used and identify cultural bias in the implementation and interpretation considerations. Identify your own racism, discrimination, sexism, power, privilege, and oppression bias that may have influenced the assessment process.

**Counseling Plan:**
Describe the specific theoretical approach you are using with your client to accomplish the

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counseling goals. Provide treatment goals, interventions and any modifications that were made to account for the client’s culture and uniqueness (i.e. diversity).

**Cultural and Diversity Awareness and Adjustments:**
Report the client’s cultural and anything that needs to be consider supporting this client’s success in treatment (diversity), including belief systems. Discuss how you have modified the theory, and techniques for your client’s uniqueness. Indicate the research that supports this modification.

**Community Services:**
List the services the client receives with the community, (i.e. probation, DSS, religious or spiritual community, exercise facilities, etc).

**Referrals:**
List any referrals you have made in the community for this client.

**NOTE:** Do not use the client's name in the case study; use initials or a fictitious name. Do not write any other identifying information, such as work place/school, county of residence, use initials, or fictitious names.
Oral Exam Rating Evaluations Form/Peer Evaluation Rating Scale Audio/Video
Modify Counselor Competencies Scale—Revised (CCS-R) © (Lambie, Mullen, Swank, & Blount, 2015)

The Counselor Competencies Scale—Revised (CCS-R) assesses counselors’ and trainees’ skills development and professional competencies. Additionally, the CCS-R provides counselors and trainees with direct feedback regarding their demonstrated ability to apply counseling skills and facilitate therapeutic conditions, and their counseling dispositions (dominant qualities) and behaviors, offering the counselors and trainees practical areas for improvement to support their development as effective and ethical professional counselors. This was modified for peer comments and evaluations when listening to audio/video tapes and oral case presentations.

Scales Evaluation Guidelines

- **Exceeds Expectations / Demonstrates Competencies (5)** = the counselor or trainee demonstrates strong (i.e., exceeding the expectations of a beginning professional counselor) knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

- **Meets Expectations / Demonstrates Competencies (4)** = the counselor or trainee demonstrates consistent and proficient knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s). A beginning professional counselor should be at the “Demonstrates Competencies” level at the conclusion of his or her practicum and/or internship.

- **Near Expectations / Developing towards Competencies (3)** = the counselor or trainee demonstrates inconsistent and limited knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

- **Below Expectations / Insufficient / Unacceptable (2)** = the counselor or trainee demonstrates limited or no evidence of the knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

- **Harmful (1)** = the counselor or trainee demonstrates harmful use of knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

**Directions:** Use the segment of the form you are assigned and listen for specific competencies. Remember 5 is not excepted and should be used sparingly. Check the appropriate competences box. This is to help you become familiar with peer evaluations and constrictive comments. As the presenter of your case, you must, by the end of the semester each competency (the second column) will need to be demonstrated and evaluate, therefore cue your tapes throughout the semester to ensure that competency could be evaluate (i.e. no competency should have an NA on all tapes).
# Part I: Counseling Skills & Therapeutic Conditions

<table>
<thead>
<tr>
<th>#</th>
<th>Primary Counseling Skill(s)</th>
<th>Specific Counseling Skills and Therapeutic Conditions Descriptors</th>
<th>Exceeds Expectations / Demonstrates Competencies (5)</th>
<th>Meets Expectations / Demonstrates Competencies (4)</th>
<th>Near Expectations / Developing towards Competencies (3)</th>
<th>Below Expectations / Unacceptable (2)</th>
<th>Harmful (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Nonverbal Skills</td>
<td>Includes Body Position, Eye Contact, Posture, Distance from Client, Voice Tone, Rate of Speech, Use of silence, etc. (attuned to the emotional state and cultural norms of the clients)</td>
<td>Demonstrates effective nonverbal communication skills, conveying connectedness &amp; empathy (85%).</td>
<td>Demonstrates effective nonverbal communication skills for the majority of counseling sessions (70%)</td>
<td>Demonstrates inconsistency in his or her nonverbal communication skills.</td>
<td>Demonstrates limited nonverbal communication skills.</td>
<td>Demonstrates poor nonverbal communication skills, such as ignores client &amp;/or gives judgmental looks.</td>
</tr>
<tr>
<td>1</td>
<td>Encouragers</td>
<td>Includes Minimal Encouragers &amp; Door Openers such as “Tell me more about...”, “Hmm”</td>
<td>Demonstrates appropriate use of encouragers, which supports development of a therapeutic relationship (85%).</td>
<td>Demonstrates appropriate use of encouragers for the majority of counseling sessions, which supports development of a therapeutic relationship (70%).</td>
<td>Demonstrates inconsistency in his or her use of appropriate encouragers.</td>
<td>Demonstrates limited ability to use appropriate encouragers.</td>
<td>Demonstrates poor ability to use appropriate encouragers, such as using skills in a judgmental manner.</td>
</tr>
<tr>
<td>1</td>
<td>Questions</td>
<td>Use of Appropriate Open &amp; Closed Questioning (e.g., avoidance of double questions)</td>
<td>Demonstrates appropriate use of open &amp; close-ended questions, with an emphasis on open-ended question (85%).</td>
<td>Demonstrates appropriate use of open &amp; close-ended questions for the majority of counseling sessions (70%).</td>
<td>Demonstrates inconsistency in using open-ended questions &amp; may use closed questions for prolonged periods.</td>
<td>Demonstrates limited ability to use open-ended questions with restricted effectiveness.</td>
<td>Demonstrates poor ability to use open-ended questions, such as questions tend to confuse clients or restrict the counseling process</td>
</tr>
<tr>
<td>1</td>
<td>Reflection a Paraphrasing</td>
<td>Basic Reflection of Content – Paraphrasing (With couples and families, paraphrasing the different clients’ multiple perspectives)</td>
<td>Demonstrates appropriate use of paraphrasing as a primary therapeutic approach (85%).</td>
<td>Demonstrates appropriate use of paraphrasing (majority of counseling sessions; 70%).</td>
<td>Demonstrates paraphrasing inconsistently &amp; inaccurately or mechanical or parroted responses.</td>
<td>Demonstrates limited proficiency in paraphrasing or is often inaccurate.</td>
<td>Demonstrates poor ability to paraphrase, such as being judgmental &amp;/or dismissive.</td>
</tr>
<tr>
<td>1</td>
<td>Reflection b Reflection of Feelings</td>
<td>Reflection of Feelings (With couples and families, reflection of each clients’ feelings)</td>
<td>Demonstrates appropriate use of reflection of feelings as a primary approach (85%).</td>
<td>Demonstrates appropriate use of reflection of feelings (majority of counseling sessions; 70%).</td>
<td>Demonstrates reflection of feelings inconsistently &amp; is not matching the client.</td>
<td>Demonstrates limited proficiency in reflecting feelings &amp;/or is often inaccurate.</td>
<td>Demonstrates poor ability to reflective feelings, such as being judgmental &amp;/or dismissive.</td>
</tr>
<tr>
<td>1</td>
<td>Reflection c Summarizing</td>
<td>Summarizing content, feelings, behaviors, &amp; future plans (With couples and families, summarizing relational patterns of interaction)</td>
<td>Demonstrates consistent ability to use summarization to include content, feelings, behaviors, and future plans (85%).</td>
<td>Demonstrates ability to appropriately use summarization to include content, feelings, behaviors, and future plans (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent &amp; inaccurate ability to use summarization.</td>
<td>Demonstrates limited ability to use summarization (e.g., summary suggests counselor did not understand clients or is overly focused on content rather than process).</td>
<td>Demonstrates poor ability to summarize, such as being judgmental &amp;/or dismissive.</td>
</tr>
<tr>
<td>#</td>
<td>Primary Counseling Skill(s) and Therapeutic Conditions</td>
<td>Specific Counseling Skills and Core Beliefs (taking counseling to a deeper level)</td>
<td>Exceeds Expectations / Demonstrates Competencies (5)</td>
<td>Meets Expectations / Demonstrates Competencies (4)</td>
<td>Near Expectations / Developing towards Competencies (3)</td>
<td>Below Expectations / Unacceptable (2)</td>
<td>Harmful (1)</td>
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<td>1</td>
<td>Advanced Reflection (Meaning)</td>
<td>Advanced Reflection of Meaning, including Values and Core Beliefs (taking counseling to a deeper level)</td>
<td>Demonstrates consistent use of advanced reflection &amp; promotes discussions of greater depth during counseling sessions (85%).</td>
<td>Demonstrates ability to appropriately use advanced reflection, supporting increased exploration in session (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent ability to use advanced reflection. Counseling sessions appear superficial.</td>
<td>Demonstrates limited ability to use advanced reflection &amp;/or switches topics in counseling often.</td>
<td>Demonstrates poor ability to use advanced reflection, such as being judgmental &amp;/or dismissive.</td>
</tr>
<tr>
<td>1</td>
<td>Confrontation</td>
<td>Counselor challenges clients to recognize &amp; evaluate inconsistencies.</td>
<td>Demonstrates the ability to challenge clients through verbalizing inconsistencies &amp; discrepancies in the clients’ words &amp;/or actions in a supportive fashion. Balance of challenge &amp; support (85%).</td>
<td>Demonstrates the ability to challenge clients through verbalizing inconsistencies &amp; discrepancies in the clients’ words &amp;/or actions in a supportive fashion (can confront, but hesitant) or was not needed; therefore, appropriately not used (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent ability to challenge clients through verbalizing inconsistencies &amp; discrepancies in clients’ words &amp;/or actions in a supportive fashion. Used minimally/missed opportunity.</td>
<td>Demonstrates limited ability to challenge clients through verbalizing discrepancies in the client’s words &amp;/or actions in a supportive &amp; caring fashion, &amp;/or skill is lacking.</td>
<td>Demonstrates poor ability to use confrontation, such as degrading client, harsh, judgmental, &amp;/or aggressive.</td>
</tr>
<tr>
<td>1</td>
<td>Goal Setting</td>
<td>Counselor collaborates with clients to establish realistic, appropriate, &amp; attainable therapeutic goals (With couples and families, goal setting supports clients in establishing common therapeutic goals)</td>
<td>Demonstrates consistent ability to establish collaborative &amp; appropriate therapeutic goals with clients (85%).</td>
<td>Demonstrates ability to establish collaborative &amp; appropriate therapeutic goals with client (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent ability to establish collaborative &amp; appropriate therapeutic goals with clients.</td>
<td>Demonstrates limited ability to establish collaborative, appropriate therapeutic goals with clients.</td>
<td>Demonstrates poor ability to develop collaborative therapeutic goals, such as identifying unattainable goals, and agreeing with goals that may be harmful to the clients.</td>
</tr>
<tr>
<td>1</td>
<td>Focus of Counseling</td>
<td>Counselor focuses (or refocuses) clients on their therapeutic goals (i.e., purposeful counseling)</td>
<td>Demonstrates consistent ability to focus &amp;/or refocus counseling on clients’ goal attainment (85%).</td>
<td>Demonstrates ability to focus &amp;/or refocus counseling on clients’ therapeutic goal attainment (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent ability to focus &amp;/or refocus counseling on clients’ therapeutic goal attainment.</td>
<td>Demonstrates limited ability to focus &amp;/or refocus counseling on clients’ therapeutic goal attainment.</td>
<td>Demonstrates poor ability to maintain focus in counseling, such as counseling moves focus away from clients’ goals.</td>
</tr>
<tr>
<td>1</td>
<td>Facilitate Therapeutic Environment: Empathy &amp; Caring</td>
<td>Expresses accurate empathy &amp; care. Counselor is “present” and open to clients. (includes immediacy and concreteness)</td>
<td>Demonstrates consistent ability to be empathic &amp; uses appropriate responses (85%).</td>
<td>Demonstrates ability to be empathic &amp; uses appropriate responses (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent ability to be empathic &amp;/or use appropriate responses.</td>
<td>Demonstrates limited ability to be empathic &amp;/or uses appropriate responses.</td>
<td>Demonstrates poor ability to be empathic &amp; caring, such as creating an unsafe space for clients.</td>
</tr>
<tr>
<td>1</td>
<td>Facilitate Therapeutic Environment: Respect &amp; Compassion</td>
<td>Counselor expresses appropriate respect &amp; compassion for clients</td>
<td>Demonstrates consistent ability to be respectful, accepting, &amp; compassionate with clients (85%).</td>
<td>Demonstrates ability to be respectful, accepting, &amp; compassionate with clients (majority of counseling sessions; 70%).</td>
<td>Demonstrates inconsistent ability to be respectful, accepting, &amp; compassionate with clients.</td>
<td>Demonstrates limited ability to be respectful, accepting, &amp;/or compassionate with clients.</td>
<td>Demonstrates poor ability to be respectful &amp; compassionate with clients, such as having conditional respect.</td>
</tr>
</tbody>
</table>

_________: Total Score (out of a possible 60 points)
<table>
<thead>
<tr>
<th>#</th>
<th>Primary Counseling Dispositions &amp; Behaviors</th>
<th>Specific Counseling Disposition &amp; Behavior Descriptors</th>
<th>Exceeds Expectations / Demonstrates Competencies (5)</th>
<th>Meets Expectations / Demonstrates Competencies (4)</th>
<th>Near Expectations / Developing towards Competencies (3)</th>
<th>Below Expectations / Unacceptable (2)</th>
<th>Harmful (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Professional Ethics</td>
<td>Adheres to the ethical guidelines of the ACA, ASCA, IAMFC, APA, &amp; NBCC; including practices within competencies.</td>
<td>Demonstrates consistent &amp; advanced (i.e., <em>exploration &amp; deliberation</em>) ethical behavior &amp; judgments.</td>
<td>Demonstrates ethical behavior &amp; judgments, but on a concrete level with a basic ethical decision-making process.</td>
<td>Demonstrates limited ethical behavior &amp; judgment, and a limited ethical decision-making process.</td>
<td>Demonstrates poor ethical behavior &amp; judgment, such as violating the ethical codes &amp;/or makes poor decisions.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Professional Behavior</td>
<td>Behaves in a professional manner towards supervisors, peers, &amp; clients (e.g., emotional regulation). Is respectful and appreciative to the culture of colleagues and is able to effectively collaborate with others.</td>
<td>Demonstrates consistent &amp; advanced respectfulness and thoughtfulness, &amp; appropriate within all professional interactions.</td>
<td>Demonstrates consistent respectfulness and thoughtfulness, &amp; appropriate within all professional interactions.</td>
<td>Demonstrates inconsistent respectfulness and thoughtfulness, &amp; acts inappropriate &amp; disrespectful of others within some professional interactions.</td>
<td>Demonstrates poor professional behavior, such as repeatedly being disrespectful of others &amp;/or impedes the professional atmosphere of the counseling setting / course.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Professional &amp; Personal Boundaries</td>
<td>Maintains appropriate boundaries with supervisors, peers, &amp; clients.</td>
<td>Demonstrates consistent appropriate boundaries with supervisors, peers, &amp; clients.</td>
<td>Demonstrates appropriate boundaries consistently with supervisors, peers, &amp; clients.</td>
<td>Demonstrates inappropriate boundaries with supervisors, peers, &amp; clients.</td>
<td>Demonstrates poor boundaries with supervisors, peers, &amp; clients; such as engaging in dual relationships.</td>
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<tr>
<td>2</td>
<td>Knowledge &amp; Adherence to Site &amp; Course Policies</td>
<td>Demonstrates an understanding &amp; appreciation for all counseling site and course policies &amp; procedures.</td>
<td>Demonstrates consistent adherence to all counseling site and course policies &amp; procedures, including strong attendance and engagement.</td>
<td>Demonstrates adherence to most counseling site and course policies &amp; procedures, including strong attendance and engagement.</td>
<td>Demonstrates limited adherence to counseling site and course policies &amp; procedures, including attendance and engagement.</td>
<td>Demonstrates poor adherence to counseling site and course policies, such as failing to adhere to policies after discussing with supervisor / instructor.</td>
<td></td>
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<tr>
<td>2</td>
<td>Record Keeping &amp; Task Completion</td>
<td>Completes <em>all</em> weekly record keeping &amp; tasks correctly &amp; promptly (e.g., case notes, psychosocial reports, treatment plans, supervisory report).</td>
<td>Completes <em>all</em> required record keeping, documentation, and assigned tasks in a thorough, timely, &amp; comprehensive fashion.</td>
<td>Completes <em>all</em> required record keeping, documentation, and tasks in a competent &amp; timely fashion.</td>
<td>Completes required record keeping, documentation, and tasks inconsistently &amp; in a poor fashion.</td>
<td>Failure to complete paperwork &amp;/or tasks by specified deadline.</td>
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<tr>
<td>#</td>
<td>Primary Counseling Disposition &amp; Behavior Descriptors</td>
<td>Exceeds Expectations / Demonstrates Competencies (5)</td>
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<td>2</td>
<td>Multicultural Competence in Counseling Relationship</td>
<td>Demonstrates respect for culture (e.g., race, ethnicity, gender, spirituality, religion, sexual orientation, disability, social class, etc.) and awareness of and responsiveness to ways in which culture interacts with the counseling relationship.</td>
<td>Demonstrates consistent &amp; advanced multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients.</td>
<td>Demonstrates inconsistent multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients.</td>
<td>Demonstrates limited multicultural competencies (knowledge, self-awareness, appreciation, &amp; skills) in interactions with clients.</td>
<td>Demonstrates poor multicultural competencies, such as being disrespectful, dismissive, and defensive regarding the significance of culture in the counseling relationship.</td>
<td></td>
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<tr>
<td>2</td>
<td>Emotional Stability &amp; Self-control</td>
<td>Demonstrates self-awareness and emotional stability (i.e., congruence between mood &amp; affect) &amp; self-control (i.e., impulse control) in relationships with clients.</td>
<td>Demonstrates consistent emotional stability &amp; appropriateness in interpersonal interactions with clients.</td>
<td>Demonstrates inconsistent emotional stability &amp; appropriateness in interpersonal interactions with clients.</td>
<td>Demonstrates limited emotional stability &amp; appropriateness in interpersonal interactions with clients.</td>
<td>Demonstrates poor emotional stability &amp; appropriateness in interpersonal interactions with client, such as having high levels of emotional reactants with clients.</td>
<td></td>
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<tr>
<td>2</td>
<td>Motivated to Learn &amp; Grow / Initiative</td>
<td>Demonstrates engagement in learning &amp; development of his or her counseling competencies.</td>
<td>Demonstrates consistent and strong engagement in promoting his or her professional and personal growth &amp; development.</td>
<td>Demonstrates inconsistent engagement in promoting his or her professional and personal growth &amp; development.</td>
<td>Demonstrates limited engagement in promoting his or her professional and personal growth &amp; development.</td>
<td>Demonstrates poor engagement in promoting his or her professional and personal growth &amp; development, such as expressing lack of appreciation for profession &amp;/or apathy to learning.</td>
<td></td>
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<tr>
<td>2</td>
<td>Openness to Feedback</td>
<td>Responds non-defensively &amp; alters behavior in accordance with supervisory &amp;/or instructor feedback.</td>
<td>Demonstrates consistent and strong openness to supervisory &amp;/or instructor feedback &amp; implements suggested changes.</td>
<td>Demonstrates consistent openness to supervisory &amp;/or instructor feedback; however, does not implement suggested changes.</td>
<td>Demonstrates a lack of openness to supervisory &amp;/or instructor feedback &amp; does not implement suggested changes.</td>
<td>Demonstrates no openness to supervisory &amp;/or instructor feedback &amp; is defensive &amp;/or dismissive when given feedback.</td>
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<tr>
<td>2</td>
<td>Flexibility &amp; Adaptability</td>
<td>Demonstrates ability to adapt to changing circumstance, unexpected events, &amp; new situations.</td>
<td>Demonstrates consistent and strong ability to adapt &amp; “reads-&amp;-flexes” appropriately.</td>
<td>Demonstrates an inconsistent ability to adapt &amp; flex to his or her clients’ diverse changing needs.</td>
<td>Demonstrates a limited ability to adapt &amp; flex to his or her clients’ diverse changing needs.</td>
<td>Demonstrates a poor ability to adapt to his or her clients’ diverse changing needs, such as being rigid in work with clients.</td>
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<tr>
<td>2</td>
<td>Congruence &amp; Genuineness</td>
<td>Demonstrates ability to be present and “be true to oneself”</td>
<td>Demonstrates consistent and strong ability to be genuine &amp; accepting of self &amp; others.</td>
<td>Demonstrates inconsistent ability to be genuine &amp; accepting of self &amp; others.</td>
<td>Demonstrates a limited ability to be genuine &amp; accepting of self &amp; others (incongruent).</td>
<td>Demonstrates a poor ability to be genuine &amp; accepting of self &amp; others, such as being disingenuous.</td>
<td></td>
</tr>
</tbody>
</table>

_______: Total Score (out of a possible 55 points)
Peer feedback explain and support your scoring above…

Please comment on the most salient point

Please note the strength, which you have observed during this supervision session:

Please note the areas that warrant improvement, which you have observed during this supervision session:

_________________________________________
Counselor’s or Trainee’s Name (print)

_________________________________________
Peer Supervisor’s Name (print)

Date

Date
Case Presentation Evaluation Form

*Bring a copy for each classmate each time you present and audio or video tape*

Student Name: ___________________________ Presentation #: ___________ Date: ________

Salient skills that were demonstrated in this session were:
1. 
2. 
3. 
4. 
5. 

Strengths that the student counselor demonstrated. Be specific including knowledge, skills, techniques, or creativity, etc. Each person provides two that are different from his or her peers.
1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9. 
10. 

Suggestions for areas to improve upon, research, or do differently with this client. Be specific: including conducting research, making referrals, gaining more supervision, skills, techniques, or creativity etc. Each person provides two that are different from his or her peers.
1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9. 
10. 

Any additional or follow-up comments from previous supervision: ____________________________

_______________________________ Demonstrates

Competency: Met_____ Not Met_______

This syllabus is subject to change!!!
Assessment of Internship Competency Check sheet

*** To be used in conjunction with “Clinical Mental Health Competency Sheet” of this Syllabus and
Grading Rubric for HPC 6900 both found in this syllabus***

Students will score a “Met” on all competencies to pass internship and a 3 or above on all CMHC Handbook Evaluations

Bring to every class

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<tr>
<th>C</th>
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<th>E</th>
<th>P</th>
<th>Competency Skill</th>
<th>Learning Activity</th>
<th>Assessment Used</th>
<th>Date of Proof &amp; CMHC Grading Rubric</th>
<th>Verifying Faculty</th>
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<tr>
<td>2:1.k</td>
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<td></td>
<td>Demonstrates ability for personal and professional self-evaluation and implications for practice</td>
<td>Counseling activities, Supervision, article #1,#3, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Rubric</td>
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<td>2:1.l</td>
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<td></td>
<td>Demonstrates strategies of self-care that are appropriate to the counselor role</td>
<td>Counseling activities, Supervision, article #1,#3, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Rubric</td>
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<td>2:3.h.</td>
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<td>Understands general framework for differing abilities and strategies to provide differentiated interventions</td>
<td>Counseling activities, Supervision, article #2, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Rubric</td>
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<td>2:5.g.</td>
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<td>Demonstrates essential interviewing, counseling and case conceptualization skills</td>
<td>Counseling activities, Supervision, article #1,#3, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Rubric</td>
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<td>3:</td>
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<td>Applies theory and counseling skill that is modify to the specific diverse population</td>
<td>Counseling activities, Supervision, article #1,#3, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Rubric</td>
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<td>5:C.3a.</td>
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<td></td>
<td>Understanding the purpose of an intake interview that is evidence based for the specific diverse populations of clients with mental and emotional disorders</td>
<td>Counseling activities, Supervision, article #1, #3, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Case Presentation Rubric</td>
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</tbody>
</table>

This syllabus is subject to change!!!
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<thead>
<tr>
<th>Rosen</th>
<th>HPC 6900</th>
<th>Spring 2016</th>
<th>Oral Exam Rating, Case Presentation CCS-R</th>
</tr>
</thead>
<tbody>
<tr>
<td>5:C.3a.</td>
<td>Demonstrates the ability to conduct an intake interview that is modify for the specific diverse populations.</td>
<td>Counseling activities, Supervision, article #1, #3</td>
<td></td>
</tr>
<tr>
<td>5:C.3a.</td>
<td>Understanding the purpose of a mental health evaluation that is evidence based for the specific diverse populations of clients with mental and emotional disorders</td>
<td>Counseling activities, Supervision, article #1, #3, #4, #6, #7</td>
<td>Oral Exam Rating Form, Case Presentation Form Evaluation, Rubric</td>
</tr>
<tr>
<td>5:C.3a.</td>
<td>Demonstrates the ability to conduct an mental health evaluation that is modify for the specific diverse populations appropriate.</td>
<td>Counseling activities, Supervision, article #1,#3, #5, #6, &amp; #7</td>
<td>Oral Exam Rating Form, Rubric</td>
</tr>
<tr>
<td>5:C.3a.</td>
<td>Demonstrates skill in conducting an a biopsychosocial history that is modify for specific diverse population</td>
<td>Counseling activities, Supervision, #1, #2, #3, #4, #6, &amp; #8</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>5:C.3a.</td>
<td>Demonstrates skill in conducting an a mental health history, that is modify for specific diverse populations</td>
<td>Counseling activities, Supervision, #1, #3, #4, #7</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>5:C.3a.</td>
<td>Demonstrates skill in conducting psychological assessment for treatment planning,</td>
<td>Counseling activities, Supervision, article #1, #3, #5,</td>
<td>Oral Exam Rating Form, Rubric</td>
</tr>
<tr>
<td>5:C.3a.</td>
<td>Demonstrates skill in conducting an psychological assessment for caseload management</td>
<td>Counseling activities, Supervision, article #1, #3, #5,</td>
<td>Oral Exam Rating Form, Rubric</td>
</tr>
<tr>
<td>2:3d.</td>
<td>Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring mental disorders.</td>
<td>Counseling activities, Supervision, #1, #3,</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>2:3d.</td>
<td>Applies the assessment of a client’s stage of dependence, change, or recovery to determine the appropriate treatment modality and placement criteria within the continuum of care</td>
<td>Counseling activities, Supervision, #1, #3, #4, #7</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>2.E</td>
<td>Applies relevant research findings to inform the practice of clinical mental health counseling</td>
<td>Counseling activities, Supervision, #1, #3, #4,</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
</tbody>
</table>

This syllabus is subject to change!!!
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Assessment</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>5:C.3b.</td>
<td>Applies techniques and interventions for prevention of a broad range of mental health issues</td>
<td>Presentation and article #5 and #9</td>
<td>Oral Exam Rating Form, Rubric</td>
</tr>
<tr>
<td>5:C.3b.</td>
<td>Applies techniques and interventions for intervention of a broad range of mental health issues</td>
<td>Counseling activities, Supervision, article #1, #3, #5</td>
<td>Oral Exam Rating Form, Rubric</td>
</tr>
<tr>
<td>5:C.3c.</td>
<td>Applies strategies for interfacing with the legal system regarding court-referred clients</td>
<td>Counseling activities, Supervision</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>5:C.3d.</td>
<td>Applies strategies for interfacing with integrated behavioral health care professionals</td>
<td>Counseling activities, Supervision</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>5:C.3e.</td>
<td>Applies strategies for advocating for persons with mental health issues.</td>
<td>Counseling activities, Supervision</td>
<td>Oral Exam Rating Form, Case Presentation Evaluation, Rubric</td>
</tr>
<tr>
<td>3:D.</td>
<td>Familiar with technological resources.</td>
<td>Counseling activities, Supervision, article #2, &amp; #3</td>
<td>Articles</td>
</tr>
<tr>
<td>2:C</td>
<td>Actively Identify with the counseling profession by participating in at least one professional seminar or workshop</td>
<td>Counseling activities, Supervision, article #2, &amp; #3</td>
<td>Articles and proof of CEU or attendance at professional seminar</td>
</tr>
</tbody>
</table>

(Student Signature) (Date)

(Faculty Supervisor Signature) (Date)

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Appalachian State University  
Department of Human Development and Psychological Counseling

Clinical Mental Health Competency Sheet  
Bring a copy to your end of the semester meeting with your university supervisor

Name of Student______________  Name of University Supervisor_____________

Used during the end of the semester individual meetings/supervision with university supervisor. If any of the below is incomplete the student will receive an Unsatisfactory grade (i.e. failing).

_____ One course full 6-credit hrs internship (600-clock hours total, 360 direct, 240 indirect)  
_____ 1st internship course 3 credit hrs, (300 clock hours total, 180 direct, 120 indirect)  
_____ 2nd internship course 3 credit hrs, (300 clock hours total, 180 direct, 120 indirect)

Students will complete a total of 600 clock hours during the internship experience, which can occur over two semesters or one semester (see above).

_____ 1. Obtained 180 hours per 3 credit hours semester (see above) of direct service work with a total of 360 across two semesters; direct hours are: individual counseling, group counseling, couple, and family counseling, assessment, human development skills, consultation services - “relationship between professionals or other pertinent person for the purpose of aiding the consultee(s).” (Learning Activity)

_____ 2. Obtained 120 hours per 3 credit hours of indirect service includes the planning, preparation, research, coordination, site-supervision, referral, case-management, observation, documentation, any other related worked required to perform your duties. (Learning Activity)

_____ 3. Complete one hour a week of supervision with the On-Site Supervisor (minimum of 15 hours). (Learning Activity)

_____ 4. Complete group supervision session weekly throughout the semester (a minimum of 15 hours) (Learning Activity)

_____ 5. Satisfactorily research, summarize, present, and discuss the required articles on the assigned topic and week (see tentative schedule) (Learning Activity)

_____ 6. Satisfactorily development and presentation (oral and written) of comprehensive case(s) as outline on the Oral Case Presentation form on this syllabus. (Learning Activity)

_____ 7. Satisfactorily present audio/video taped counseling sessions that demonstrates the student’s ability:

   (Learning Activity)
   ➢ to conduct an intake interview, diagnosis assessment, and mental health status exam.
   ➢ to modify techniques, treatment, or interventions, to ensure appropriateness for diverse population.
   ➢ to apply the screening and assessment of addiction, co-occurring disorders, aggression.
   ➢ to self and others, and a client’s stage of dependence, change and recovery.

_____ 8. Satisfactorily develop and present a comprehensive case presentation, which identifies the difference between diagnostic and developmental appropriate reactions during crisis, disasters and other trauma-causing events. (Learning Activity)

_____ 9. Satisfactorily complete, licensure and any other credential, documentation for the

This syllabus is subject to change!!!
university supervisor to sign with an address enveloped that can be sealed and signed as appropriate for student career goals (Learning Activity).

10. Satisfactorily made progress a Professional Development Plan, which was reviewed student’s progress at mid-term and the end of the semester. (Learning Activity)

11. Satisfactorily completed a self-assessment of CCS-R at the beginning of the semester, at the mid of the semester and end of the semester. (Learning Activity)

12 CCS-R was completed by site – supervisor at mid-term and end of the semester, with the end of the semester Part 1 scale total no lower than 48, and Part 2 scale no lower than a 44 with no rates lower then an 3 on any, specific skills or professional disposition area. (Learning Activity)

13. CCS-R was completed by university supervisor at mid-term and end of the semester, with Part 1 scale total no lower than 48, and Part 2 scale no lower than 44 with no rates lower then an 3 on any, specific skills or professional disposition area. (Learning Activity)

14. Satisfactorily complete a professional disclosure statement (Learning Activity)

15. Participate at least one “formal” on-site visit by university supervisor, which includes a meeting with the student intern, site supervisor, and university supervisor. (Evaluations) A site visit will be at the discretion of the instructor.

16. Participate in an end of the semester individual meeting with university supervisor to present all required form as stated in the Clinical Field Experience Handbook. And to discuss your inform and format evaluations (peer, self, site-supervisor, and university supervisors), compete grading rubric and competencies scales. (Learning Activity and Evaluations)

__________________________________________  __________________________
(Student Signature)                              (Date)

__________________________________________  __________________________
(Faculty Supervisor Signature)                   (Date)

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Grading Rubric for HPC 6900

**CACREP Curricular Standards** are evaluated according for each student at the end and/or throughout the semester as necessary to check on each student’s progress.

*Bring a copy to your end of the semester meeting with your university supervisor*

To receive an “S” in this course, the student must be successful in all the following areas by receiving all “yes” responses. If a “no” response is received, on any of these questions a student will receive a “U”. If the instructor of the course (after meeting with the site and the students) that the “No” response is out of the students control then an S or I may be considered even the response is “No”. The student will need to consult the CMHC Handbook and the Clinical Field Experience Handbook. The student has:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Required direct hours at site</td>
<td>Yes</td>
</tr>
<tr>
<td>2.</td>
<td>Required in-direct hours at the site</td>
<td>Yes</td>
</tr>
<tr>
<td>3.</td>
<td>Required supervision hours on site</td>
<td>Yes</td>
</tr>
<tr>
<td>4.</td>
<td>Required university supervision hours</td>
<td>Yes</td>
</tr>
<tr>
<td>5.</td>
<td>Miss no more than two classes (2) this semester</td>
<td>Yes</td>
</tr>
<tr>
<td>6.</td>
<td>Been late or left early no more than twice this semester,</td>
<td>Yes</td>
</tr>
<tr>
<td>7.</td>
<td>Returned from break on time, late no more than twice this semester</td>
<td>Yes</td>
</tr>
<tr>
<td>8.</td>
<td>Required the necessary audio/video case presentation</td>
<td>Yes</td>
</tr>
<tr>
<td>9.</td>
<td>Completed all forms for each case presentation</td>
<td>Yes</td>
</tr>
<tr>
<td>10.</td>
<td>Site evaluation form of student:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Received no rating less than a “3”</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Total rating Part 1 less than 48”</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Total rating Part 2 less than 44”</td>
<td>Yes</td>
</tr>
<tr>
<td>11.</td>
<td>University evaluation form of student:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Received no rating less than a “3”</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Total rating Part 1 less than 48”</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Total rating Part 2 less than 44”</td>
<td>Yes</td>
</tr>
<tr>
<td>12.</td>
<td>Student is void of any ethical violations</td>
<td>Yes</td>
</tr>
<tr>
<td>13.</td>
<td>Student has demonstrated skill &amp; knowledge: CACREP standards</td>
<td>Yes</td>
</tr>
</tbody>
</table>

_________________________  __________________________
(Student Signature)         (Date)

_________________________  __________________________
(Faculty Supervisor Signature)         (Date)