



**COUN 6376: SUPERVISED PRACTICE IN COUNSELING
FALL 2017**

COUN 6376 is a required course for Professional School Counselor Certification, and to meet academic requirements for the Professional Counselor (LPC Intern), and Marriage & Family Therapist (LMFT Associate) licenses.

College of Education, Department of Counselor Education

Instructor: Rick Bruhn, Ed.D., LPC-S, LMFT and Supervisor, Member, Texas State Board of Examiners of Marriage and Family Therapists (TSBEMFT*)

CEC, Room 114

Doctoral Students: TBA

P.O. Box 2119/SHSU

Office phone: (936) 294-1132

Email: edu_rab@shsu.edu ; FAX: (936) 294-4277

*Disclaimer: While Dr. Bruhn is a TSBEMFT Board Member, he does not represent the views of the TSBEMFT

Office hrs.: Tue. 10-11:30 AM, 2-3 PM, Thu. 10-11:30 AM, 2-3 PM. & by apt.

Class Format: This practicum course includes group supervision, individual supervision, and direct service to clients seeking mental health services. Three and one-half hours of class are devoted to individual or group counseling, couples or family counseling, play therapy, intake assessment, record keeping, case management activities, and observing colleagues counseling sessions. One and one half hours are devoted to group supervision for case presentation, consultation, feedback, discussion of counseling issues, and viewing and listening to recordings.

Class day and time: Tuesdays, 4:30 P.M.-9:20 P.M.

Class location: Community Counseling Clinic, SHSU-The Woodlands Center

Course Description: This laboratory course is designed to prepare the student in the practical application and integration of the principles and methods of counseling.
Prerequisite: *Admission to candidacy and COUN 6374.*

Required Textbook:

Johnson, Sharon L. (2004). *Therapist's guide to clinical intervention: The 1-2-3s of treatment planning*. (2nd ed.) San Diego, CA: Academic Press.

Recommended texts:

American Psychiatric Association. (2012). *Diagnostic and statistical manual of mental disorders, fifth edition (DSM-5)*. Arlington, VA: American Psychiatric Association.

Corey, G. (2013). *Case approach to counseling and psychotherapy* (8th ed.). Belmont, CA: Brooks/Cole.

Blum, D., & Davis, T. (2010). *The school counselor's book of lists* (2nd ed.). Warminster,

PA: Mar Co., Inc.

Jobes, D. (2006). *Managing suicidal risk: A collaborative approach*. New York, NY: Guilford.

Jongsma, A., Peterson, L.M., & Bruce, T. (2006). *The complete adult psychotherapy treatment planner* (4th ed.). New York, NY: Wiley.

Jongsma, A., Peterson, L.M., McInnis, W., & Bruce, T. (2006). *The adolescent psychotherapy treatment planner* (4th ed.). New York, NY: Wiley.

Jongsma, A., Peterson, L.M., McInnis, W., & Bruce, T. (2004). *The child psychotherapy treatment planner* (4th ed.). NY: Wiley.

Martin, D. G. (2011). *Counseling therapy and skills* (3rd ed.). Long Grove, IL: Waveland Press, Inc.

Course Objectives:

CMHC/MCFC Standards Matrix:

Objectives/Learning Outcomes	Activities/Assignments (* indicates field-based activity)	Measurement (including performance-based)	<ul style="list-style-type: none"> • CACREP (CMHC & MCFC) Standards • COE Conceptual Framework (CF) • NCATE Standards
1. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Supervisor Assessment of Record Keeping	CMHC: D.2 CF 1, 3-4, 6
2. Applies current record-keeping standards related to clinical mental health counseling.	*Record-keeping for individual, marital, family, and / or group counseling practice in clinic	Supervisor assessment of record-keeping as meets CMHC standards. Using the proficiencies form	CMHC: D.7 CF 1, 3
3. Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring mental disorders. Demonstrates the ability to use procedures for assessing and managing suicide risk.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Supervisor assessment of record-keeping.	CMHC: H.3; MCFC D.4 CF 1, 3-4
4. Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Supervisor rating of the interns' demonstrated ethical behavior using the 6376 Proficiencies rating form Supervisor Rating of Practice Skills	CMHC: D.1 CF 1, 3-4 NCATE: Standards 1e, f, g, 3 a, b, c, 4 a, c, d
5. Demonstrates the ability to recognize his or her own limitations as a clinical mental health counselor and to seek supervision or refer clients when appropriate.		Supervisor Assessment of Practice Skills	CMHC: D.9
6. MCFC-Demonstrates the ability to apply and adhere to ethical and legal standards in marriage, couple, and family counseling		Supervisor Assessment of Practice Skills	MCFC B.1
7. MCFC-Uses systems theories to implement treatment, planning, and intervention strategies		Supervisor Assessment of Practice Skills	MCFC D.3

8. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations. Demonstrates the ability to provide effective services to clients in a multicultural society.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Designs and Implements in-session and out-of-session interventions congruent with the problem situation and the counseling goals. Supervisor Assessment of Practice Skills	<i>CMHC: F.3; MCFC F.1</i> CF 1, 3-4, 6
9. 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. Uses systems assessment models and procedures to evaluate family functioning.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Selects assessment interventions while demonstrating awareness of potential cultural bias of certain protocols. Supervisor Assessment of Practice Skills	<i>CMHC: H.1; MCFC H.2</i> CF 1, 3-4
10. Demonstrates skill in conducting an intake interview, a mental status evaluation, a bio-psycho-social history, a mental health history, and a psychological assessment for treatment planning and caseload management. Applies skills in interviewing, assessment, and case management for working with individuals, couples, and families from a system's perspective.	*Individual assessment practice in clinic	Demonstrates intake interview and assessment skills appropriate for clinical mental health counseling. Supervisor Assessment of Practice Skills	<i>CMHC: H.2; MCFC H.1</i> CF 1, 3-4
11. Develops measurable outcomes for clinical mental health counseling programs, interventions, and treatments. Develops measurable outcomes for marriage, couple, and family counseling programs, interventions, and treatments.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Instructor observation and skills checklist (page 53 in Handbook and Skills Checklist Assignment and rubric). Supervisor Assessment of Practice Skills Feedback form to other students (page 52 in Handbook).	<i>CMHC: J.2; MCFC J.2</i> CF 1, 3-4
12. Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Write treatment plans for each client after the third session (pp. 26 and 27 in Handbook). Supervisor Assessment of Treatment Planning	<i>CMHC: D.5</i> CF 1, 3-4
13. Analyzes and uses data to increase the effectiveness of clinical mental health counseling interventions and programs.	*Individual, marital, family, and / or group counseling practice in clinic; Serve on reflection teams in the program clinics.	Supervisor assessment of intern's capacity to conceptualize and complete multi-axial diagnosis of disorders presented by a client. Supervisor Assessment of Treatment Planning	<i>CMHC: J.3</i> CF 1, 3-4
14. Participate in one hour of face-to-face supervision weekly with doctoral student supervisor, 90 minutes of group supervision weekly, and completes 100 hours of experience with at least 40 of those as direct client contact.	Individual supervision will be scheduled outside of class time. Supervision sessions may be video recorded and viewed during doctoral student's class.	Supervisor signs logs showing completion of required hours.	<i>CACREP Core: III A, B, C, F 1-5</i> CF 1, 3-4 <i>NCATE: Standards 1e,f,g, 3 a, b, c, 4 a, c, d</i>

Web address for CACREP standards: <http://www.cacrep.org/template/index.cfm>

IDEA Objectives: The instruction in this course will address the following major objective as assessed by the IDEA evaluation system:

Essential: Developing specific skills, competencies, and points of view needed by professionals in the field most closely related to this course

2009 CACREP Standards: Section III Professional Practice – Practicum

III. E. Supervision contracts for each student are developed to define the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum.

- III. F. Students must complete supervised practicum experiences that total a minimum of 100 clock hours over a minimum 10-week academic term. Each student's practicum includes all of the following:
1. At least 40 hours of direct service with actual clients that contributes to the development of counseling skills.
 2. Weekly interaction that averages one hour per week of individual and/or triadic supervision throughout the practicum by a program faculty member, a student's supervisor, or a site supervisor who is working in biweekly consultation with a program faculty member in accordance with the supervision contract.
 3. An average of 1 ½ hours per week of group supervision that is provided on a regular schedule throughout the practicum by a program faculty member in accordance with the supervision contract.
 4. The development of program-appropriate audio/video recordings for use in supervision or live supervision of the student's interactions with clients.
 5. Evaluation of the student's counseling performance through the practicum, including documentation of a formal evaluation after the student completes the practicum.

“The Big Picture”:

Effective counselor training constitutes a progression of knowledge and skills acquisition as well as personal and professional development on the part of the student. These components are assumed to be interrelated and in the process of becoming integrated into an individual counseling style through varied methodology and content. As this integrative process approaches completion, in relation to the training components, the student should have a realistic appraisal of her or his level(s) of command and functioning across these several categories. Therefore, the student will have the opportunity to check, improve, synthesize, and evaluate her or his counseling skills, theory and knowledge, and personal style of counseling through actual counseling experiences. This is to be done in a setting wherein the supervisor(s) can assist the student in evaluating his or her strengths and weaknesses and in confirming the strengths and improving the weaknesses as they are evidenced across several relevant categories (including but not limited to reactions to stressful situations).

Course Requirements:

1. Each student will be required to engage in a minimum of 100 hours of supervised counseling experiences including:
 - a. In COUN 6376, students must complete a minimum of 40 direct client contact hours and must have 1 hour individual or triadic supervision weekly. If students earn 10 hours of direct client contact in COUN 6374 Group Practicum with documentation of weekly supervision, he or she may use the 10 hours toward the 40-hour direct client contact requirement for COUN 6376 and reduce the number of direct contract hours to 30;
 - b. Client assessment, including intakes, testing and test interpretation where appropriate;
 - c. Individual and group supervision. Each M.A. CMHC/MCFC student, and each M.Ed. student will receive one hour of individual (triadic) supervision from a designated doctoral student or other qualified supervisor. Supervisors must sign a weekly log for documenting supervision (CACREP requirement);
 - d. Record keeping relative to client caseload (session logs, counselor's notes, etc.);
 - e. Attending professional counseling conferences (needs instructor's approval).
2. During the practicum hours when a student is not counseling, she or he should be participating in receiving feedback from the instructor, serving as a “reflecting team”

- member, observing a counseling session, role-playing counseling skills with other practicum student(s), or becoming familiar with specified assessment instruments.
3. Each client session is to be audio- **and** video-recorded for critique and supervision purposes.
 4. Prompt, regular attendance is expected for class, client sessions, and supervision. **All assignments must be completed in order to pass this course.**
 5. Whether a member of ACA or not, the counselor intern must adhere at all times to the *Ethical Standards of the American Counseling Association*.
 6. Each counselor intern is responsible for the following written papers, as well as any others which may be assigned, as deemed necessary, by the instructor:
 - a. Session summary for each client session
 - b. Intake, mental status, background history, and treatment plans for each client
 - c. Termination/transfer summary for each client (even if seen only one session) upon termination
 - d. Treatment plan for every client, couple, or family should be ready in rough draft form prior to the 3rd session and both completed and approved by your supervisor by the start of the 4th session. **A DSM diagnostic impression is required.** This treatment plan is an educational exercise and is NOT to be shared with the client unless approved by the instructor.
 7. Students need to have a professional disclosure prepared by the **first class meeting**. Two copies should be available for each new client (one for client and one for client file).

Specific assignments:

All assignments must be completed to earn a grade of 'A' in this course! No late assignments will be accepted for a score. However, **ALL** assignments must be completed at minimally a 70% criterion level in order to pass the course.

1. **Self-Evaluation (6 points each x 10 = 60):** It is expected that the intern will complete **one session self-evaluation per week for 10 weeks** based upon their review of one of their recorded sessions. You will turn in one self-evaluation each week. Use the Self-Evaluation form to complete these assignments. There will not be a self-evaluation due the weeks that Session Transcripts are due. Due 4:30 P.M. Wednesdays.
2. **Weekly Readings (6 points each x 12 = 72):** It is expected that the intern will read one journal article, textbook chapter, etc., for every new case or clinical issue encountered throughout the semester and also list the reference on the reading log form. Readings should be a minimum of 15 pages per week (include the outline of Raskin, Rogers, and Witty as one reading). Readings from the required and recommended textbooks are encouraged. You may combine several articles to make the minimum of 15 pages.

-Read and outline, in detail, "Client-centered therapy" by Nathaniel Raskin, Carl Rogers and M. Witty. The reference is:

Raskin, N., Rogers, C., & Witty, M. (2014). Client-centered therapy. In D. Wedding & R. J. Corsini (Eds.), *Current psychotherapies* (10th ed., pp. 95-150). Belmont, CA: Thomson Brooks/Cole.

Due: 3rd class period. This is on electronic reserve in the library under Dr. Bruhn's

name and COUN 6376. The password is “overseen” (password is case specific).

<http://www.shsulibraryguides.org/er.php>

3. **Session Transcripts/Session Critiques (37 points each x 2 = 74):** Type two (2) complete transcripts (from clinical caseload to exclude the initial visit with the client) and your critique. At the professor’s discretion, a student may be asked to do additional transcripts.

First transcript due: Week 5. Second transcript due: Week 9.

- a. **The treatment plan for the client must be attached to the transcript**
- b. **The treatment plan will be evaluated in conjunction with your work with the client**

4. **Mid-Term and Final Skills & Practices Evaluation (Pass/Fail):** You must complete a self-evaluation using the Skills & Practices Checklist of CACREP specialty standards that are appropriate for your degree and CMHC or MCFC specialization. Then have your individual supervisor complete and turn-in the evaluation of your work to the instructor. Your instructor will consider the ratings on the Skills & Practices Checklist as she or he assesses your clinical proficiencies for a grade. Your mid-term evaluation will not be for a grade; however, will only serve as an indication for the direction your grade is going. Evaluations will be rated on the following scale: novice, competent, and proficient. **Due October 17 and December 5.**

5. **Recording Keeping:** You must complete case notes for each client and session you complete. An evaluation of a selection of your case notes will be completed by your instructor for a grade. A selection of case notes will be evaluated by your instructor between week four and week ten of the semester.

7. C-IV Sessions (35 points each x 2 = 70): Students are expected to combine basic skills with case conceptualization during an entire session “aka Carkhuff IV” so that your instructor experiences your counseling session as “good from beginning to end”. Within the session there should be examples of reflection of content and affect deeper than the client expresses. Additionally, the instructor should be able to “infer” the implied treatment goals or theoretically consistent response patterns (and perhaps, interventions) so that he can experience the flow of the session. There should be no “stalling-out” in the session flow.

8. Professionalism (24): Attendance, punctuality, turning in assignments when due, satisfactory performance on assignments, participation, ethical behavior, case presentation, keeping adequate records, and your ability to critique your sessions and those of other students. Students are expected to assist in maintaining a classroom environment that is conducive to learning. Students are to treat faculty and other students with respect.



Student Guidelines

University Policies

- SHSU Academic Policy Manual-Students

- [Procedures in Cases of Academic Dishonesty #810213](#). N.B. Students violating the APA 6th Edition Style Manual guidelines for plagiarism will, on the first occasion, earn a grade of zero for the applicable assignment. A second instance of plagiarism will cost a letter grade deduction from the overall class grade. A grade of F for the class will be applied to a third offense.
- **Students with Disabilities #81106**
<http://www.shsu.edu/dotAsset/187f9029-a4c6-4fb4-aea9-2d501f2a60f3.pdf>
- [Student Absences on Religious Holy Days #861001](#)
- [Academic Grievance Procedures for Students #900823](#)
- **SHSU Academic Policy Manual-Curriculum and Instruction**
 - [Use of Telephones and Text Messagers in Academic Classrooms and Facilities #100728](#)
 - Technology during instruction: Cell phones and laptops/I-Pads should be turned off or set on vibrate during class. Exceptions occur when the instructor asks a student or students to access information using the technology
 - Technology in emergencies: Students may use cell phones and computers during class to respond to a medical or family emergencies
- Classroom- Only registered students may attend class. Exceptions can be made on a case-by-case basis by the professor. In all cases, visitors must not present a disruption to the class by their attendance.

Attendance:

This is a practicum course where you are responsible to providing direct services to clients and as such requires attendance at every class session. If a student must be absent, she or he is required to make up the missed group supervision and is responsible for making arrangements to have clients contacted to notify them that she or he will be absent. That being said:

- ☐ Students are permitted to miss one class with no penalty, but a call or email to the professor of the class is expected. Please know that other counselor(s) will need to cover your counseling session(s).
- ☐ With a second absence, a drop of one letter grade will occur unless the student writes a letter to the Counseling Faculty explaining the extenuating circumstances for the second absence. The faculty will decide if the second absence is excusable. If disallowed, the letter grade drop will occur.
- ☐ A drop of a letter grade will occur for each subsequent absence.
- ☐ Tardiness for client sessions is not tolerated. Total time of tardiness will be tallied and may be added up to equal an absence.
- ☐ As per CACREP requirements, each student must attend a minimum of 10 group supervision sessions. A missed group supervision is equivalent to a class absence.
- ☐ A minimum of **14 hours of individual supervision must be completed** and signed for on the Supervision Log form.

Bibliography

(students will keep a log of readings completed and reviewed for this course)

Evaluation of Student Progress

Each student will be evaluated in terms of the following:

1. Counseling performance skills (e.g., in-session behavior, facilitative skills, procedural skills, theoretically-based techniques) will be assessed using video-recordings, live observations, and class case presentations. Class case presentations may be accompanied by audio or video examples of the session.
2. Counseling cognitive skills (e.g., case conceptualization, rationale for interventions).
3. Openness to supervisory suggestions and recommendations, and displaying efforts at integrating suggestions and recommendations into your work with clients.
4. Progress developmentally during the course of the semester.
5. Attendance, punctuality, turning in assignments when due, satisfactory performance on assignments, participation, case presentation, keeping adequate records, and your ability to critique your sessions and those of other students.
6. Unless unusual extenuating circumstances occur (e.g., medical, death, emergency), students are expected to complete all course requirements by the end of the semester.
7. To successfully complete the course, the student must demonstrate all of the basic proficiencies in the **COUN 6376 -Supervised Practice in Counseling Proficiencies form** at a rate of average or higher. Additionally, students must score Competent or Proficient on all of the applicable CMHC or MCFC standards identified in the CMHC/MCFC Standards Matrix in order to pass this course.

Final Grades will be assigned as follows:

Total points available: 300

A – Earns at least 270 points on graded assignments, **AND** demonstrates all the basic proficiencies at a level of competent or proficient, and completes all assignments, **AND** *demonstrates the ability to respond consistently to client(s) at a noticeably deeper level than the client expresses for an entire session (a.k.a. “Carkhuff Level 4”) for a minimum of two sessions during the semester, as observed by the instructor or the instructor’s designate. To receive an A, all written assignments must be completed by the original due dates.*

B - Earns at least 240 points on graded assignments, **AND** demonstrates all the basic proficiencies at a level of competent or proficient, and completes all assignments, **BUT** does not *demonstrate the ability to respond consistently to client(s) at a noticeably deeper level than the client expresses for an entire session (a.k.a. “Carkhuff Level 4”) for a minimum of two sessions during the semester, as observed by the instructor or the instructor’s designate.*

OR

B – Earns between 240 and 269 points on graded assignments **AND** demonstrates all the basic proficiencies at a level of competent or proficient, and completes all assignments, **AND** *demonstrates the ability to respond consistently to client(s) at a noticeably deeper level than the client expresses for an entire session (a.k.a. “Carkhuff Level 4”) for a minimum of two sessions during the semester, as observed by the instructor or the instructor’s designate.*

C – Earns between 210 and 239 points on graded assignments, **AND** demonstrates all the basic proficiencies at a level of competent or proficient, and completes all assignments, **AND** *demonstrates the ability to respond consistently to client(s) at a noticeably deeper level than the client expresses for an entire session (a.k.a. “Carkhuff Level 4”) for a minimum of two sessions during the semester, as observed by the instructor or the instructor’s designate.*

OR

C - Does not demonstrate all the basic proficiencies at a level of competent or proficient. The student typically responds at a superficial level (a.k.a. Carkhuff Level 3) at the end of the semester, yet has completed all other requirements for the class.

F - Students who have not demonstrated all of the basic proficiencies at a level of competent or proficient and have not satisfactorily met the other requirements of the class.

OR

F - Students who earn less than 210 points on graded assignments

College of Education Information

Accreditation

The programs within the SHSU College of Education have the distinction of receiving accreditation and national recognition from multiple accrediting bodies. All educator certification programs, including teaching and professional certifications, have received ongoing accreditation from the Texas Education Agency ([TEA](#)). Additionally, the educator preparation program has been accredited by the Council for the Accreditation of Educator Preparation ([CAEP](#)-formerly NCATE) since 1954. Many of the educator preparation concentration areas have also chosen to pursue national recognition from their respective Specialized Professional Associations ([SPA](#)), signifying the program is among the best in the nation. The programs within the Department of Counselor Education have also received accreditation from the Council for Accreditation of Counseling and Related Educational Programs ([CACREP](#)).

Course and Program Evaluation

Near the end of the semester, students are asked to take part in the University's adopted course evaluation system, IDEA. The assessments are completed online and instructions are emailed to each student. Students' assessments of courses are taken and systematically reviewed by the Dean, Associate Deans, Department Chairs, and individual faculty members. Only after the semester has completed are faculty members allowed to view aggregated results of non-personally-identifiable student responses.

The College of Education conducts ongoing research regarding the effectiveness of the programs. Students receive one survey in the final semester prior to graduation regarding the operations of the unit during their time here. A second survey occurs within one year following completion of a program, and is sent to students and their employers. This survey requests information related to students' quality of preparation while at SHSU. Students' responses to these surveys are critical to maintaining SHSU's programs' excellence.

APPENDIX D: Supervised Practice in Counseling Proficiencies

In order to complete COUN 6376, all proficiencies must be met with a competent or proficient rating.

TO BE DETERMINED BY INSTRUCTOR

In order to complete COUN 6376, all proficiencies must be met with a rating of average or better.

<i>Proficiencies</i>	Poor	Below Average	Average	Above Average	Excellent
<i>Practice</i>					
Able to develop rapport and a beneficial counseling relationship					
Responds accurately to content					
Responds accurately to feelings					
Responds accurately at Carkhuff Level 4					
Is timely and thorough in documentation					
<i>Personal</i>					
Demonstrates ethical behavior					
Demonstrates use of good judgment in counseling skills					
Is able to accept and learn from feedback					
Is an asset to the profession					

CACREP Standards Ratings – Skills and Practices

To be completed at during mid-term and final skills evaluation by the instructor

PRACTICE SKILLS	Novice (1 pt.)	Competent (2 pts.)	Proficient (3 pts.)
Counseling, Prevention, and Intervention			
1. Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling. (CMHC D.1);			
2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders. (CMHC D.2)			
3. Demonstrates the ability to recognize his or her own limitations as a clinical mental health counselor and to seek supervision or refer clients when appropriate. (CMHC D.9);			
4. MCFC Demonstrates the ability to apply and adhere to ethical and legal standards in marriage, couple, and family counseling (MCFC B.1)			
5. MCFC Uses systems theories to implement treatment, planning, and intervention strategies (MCFC D.3)			

6. Applies current record-keeping standards related to clinical mental health counseling. (CMHC D.7)			
7. Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring mental disorders. (CMHC H.3); Demonstrates the ability to use procedures for assessing and managing suicide risk. (MCFC D.4);			
Diversity & Advocacy			
8. <i>Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations. (CMHC F.3); Demonstrates the ability to provide effective services to clients in a multicultural society (MCFC F.1).</i>			
Assessment			
9. <i>Selects appropriate comprehensive assessments interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols. (CMHC H.1); Uses systems assessment models and procedures to evaluate family functioning. (MCFC H.2)</i>			
10. <i>Demonstrates skill in conducting an intake interview, a mental status evaluation, a bio-psychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management. (CMHC H.2); Applies skills in interviewing, assessment, and case management for working with individuals, couples, and families from a system's perspective. (MCFC H.1)</i>			
Research Skills			
11. <i>Develops measureable outcomes for clinical mental health counseling programs, interventions, and treatments. (CMHC J.2); Develops measurable outcomes for marriage, couple, and family counseling programs, interventions, and treatments. (MCFC J2).</i>			
Assessment of Treatment Planning and Transcript			
Evaluative Item	Novice (1)	Competent (2)	Proficient (3)
Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling. (CMHC D.5)			
Analyzes and uses data to increase the effectiveness of clinical mental health counseling interventions and programs. (CMHC J.3)			

Novice: Minimal to no demonstration of the stated proficiency. Student has been unable to apply the necessary skill in their practice with clients.

Competent: The student has been able to demonstrate an ability to utilize the stated proficiency appropriately at a basic level, albeit inconsistent. Practice is required in order to improve the implementation of the skill with clients.

Proficient: The student demonstrates an ability to appropriately implement the stated skill on a consistent basis with clients. Skills are applied in a way that demonstrates an in-depth understanding of client therapeutic needs.

Session Transcript Guide and Rubric

Session Transcripts. You will transcribe 15 continuous minutes (of your best work) verbatim (exact word-for-word) of a session of your choosing, including any empathic grunting and minimal encourages you vocalize. You will need to identify the type of response you provided and provide your rationale for that response, including what you were responding to and what you hoped to accomplish with your response. If you have a better response (one you wish you would have said) then note your better response AND provide a rationale for your better response, as shown in the example below:

T = Therapist C = Client BR = Better Response

Transcript 1: (date, time of session, and room # for session)

T: I'm not sure what brings you in today, but I'm here to listen.

Response Type: Session opening

Rationale: I like this response. It is the opening we practiced in class and leaves room for the client to explore whatever is going on for her in this moment.

C: Today's been rough so far. My boss at work is giving me a hard time and I'm on the verge of quitting. I just don't know what to do.

T: Maybe you should talk to your boss.

Response Type: Advice Giving

BR: You feel stuck because you're frustrated with your boss and are considering quitting, but aren't sure if that's the best thing for you.

BR Response Type: Reflection of Feeling – Carkhuff Level 4

Rationale: My original response did not communicate any understanding of the client and gave her advice, which puts me in charge of her decisions, which is not the role of counseling. My role as a counselor is to empower my clients. My better response demonstrates the counseling skills of reflection of feeling, which communicates a deeper level of understanding to my client, accurately communicates her ambivalence, and invites a deeper exploration of her frustration with her boss if she chooses to do so.

C: I don't know if that's the best way to go. He really doesn't seem to like me much.

T: You're feeling nervous about talking to your boss because you're worried he already doesn't like you.

Response Type: Reflection of Feeling – Carkhuff Level 4

Rationale: I recovered pretty well after I tried giving advice. I reflected feeling at a slightly deeper level than the client communicated to me, which lets the client know I really understand what she's going through and continues to explore her underlying feelings about her situation with her boss, which seem to be causing her to feel stressed.

C: I know that he hates me! He's always so rude to me and barking orders at me like I'm some kinda child or something. It sucks having to go to work. I hate it there.

Session Critique. You will report the strengths and areas for growth of your counseling skills by addressing the following:

1. Short summary of the session (4-5 sentences)
 - a. Information about the presenting client
 - b. Presenting problem
 - c. Any assignment agreed upon
2. What were your strengths in this session?
3. What challenged you in this session?
4. What do you wish you had done differently? (Note: If you say that you would do nothing different, you must explain why.)
5. Possible direction to take next session.
6. Any additional comments related to your performance and plans to include a comprehensive treatment plan.

****Your critique should be no more than one typed single-spaced page (or 2 double-spaced pages) with the client treatment plan attached.**

PROFESSIONAL DISCLOSURE STATEMENT**Your Name Here**

Supervised Counseling Practicum Student,
Jack Staggs Counseling Clinic
Sam Houston State University
(936) 294-1121

This document is designed to provide you with information concerning your counselor intern's competency, philosophy, and chosen techniques and to ensure that you understand the professional relationship of counselor and client.

FORMAL PROFESSIONAL EDUCATION

I am a counseling student in the master's degree program at Sam Houston State University (SHSU). I have a Bachelor's of **(your degree here)** degree **(year of graduation)** in **(your major)** from **(your university)**.

AREAS OF COMPETENCE

As a graduate student in the counseling program, I am seeking to become a Licensed Professional Counselor, and my areas of training include **(list specific trainings you have received as a counseling master's student, such as: individual counseling, group counseling, play therapy, couples and/or family counseling)**. I am not able to prescribe medications to clients or provide you with guidance regarding medication. My education as a counselor began at SHSU in **month and year**.

I believe that clients have the ability to choose how to resolve their own problems and can make their own decisions with my assistance as a facilitator. I believe that clients are responsible for their own behaviors, thoughts, and feelings. As a counselor, I hope to facilitate for my clients greater self-awareness through their life experiences that lead to increased confidence, self-esteem, independence, mental health, and the capacity to effectively navigate the complex challenges of life.

Some clients need only a few counseling sessions to achieve these goals, while others may require more counseling. As a client, you maintain control of yourself and you may end our counseling relationship at any point, and I will be supportive of that position. If you are dissatisfied with my work, I will help you find another counselor with whom you might be able to work effectively.

TECHNIQUES

Because I believe that a client's self-awareness is key to developing self-direction and independence, my counseling practice will be guided by (insert one theoretical orientation), and my counseling approach will include (insert techniques, approaches, or procedures endorsed by your guiding theory). My approach will provide you with methods to solve problems utilizing your own strengths. Even when counseling with an individual client, I may attempt to incorporate the entire family when appropriate and possible. Occasionally, and with your consent, I may use other approaches, such as (list other techniques in which you have training, such as sand tray, mindfulness practice, expressive arts, etc.) to help facilitate your progress in counseling

PROFESSIONAL RELATIONSHIP

While our sessions might be very intimate psychologically, it is important for you to understand that we have a professional relationship rather than a social relationship. Our contacts, other than chance meetings, will be limited to appointments you arrange with me. According to the ethical codes of the State of Texas, I may not attend your social gatherings, accept gifts from you, or relate to you in any way other than within the professional context of our counseling sessions. You will be best served if our relationship remains strictly professional and our sessions concentrate exclusively on your concerns. While you might learn much about me as we work together, it is important for you to remember that you are experiencing my professional role.

CONFIDENTIALITY

I will keep confidential the things we discuss in your counseling sessions, with the following exceptions: (a) you direct me to tell someone else, and I agree to do so; (b) I decide you are a danger to yourself or others; (c) I am ordered by a court to disclose information; (d) you disclose abuse of a child, a disabled person, or an elderly person; (e) you disclose that a previous therapist sexually exploited you; or, (f) other reasons as specified in laws of this state. Confidentiality also does not extend to criminal proceedings or to legitimate subpoenas in a civil proceeding. I will maintain a written record of our counseling sessions. In addition, because this is a training facility, our sessions will be audio and video-recorded, and I will seek supervision from my assigned supervisor, course professor, and other interns currently working at this clinic this semester. However, all staff and faculty at this clinic are bound by the same standards of confidentiality as listed above.

OTHER

It is my intention to render my services in a professional manner consistent with accepted standards of practice. Our sessions will be 50 minutes in duration for individual, couple, or family counseling, and 90 minutes in duration for group counseling. While it is impossible to guarantee any specific results regarding your counseling goals, together we will work to achieve the best possible results for you.

There is no fee for my services because this is a training facility. Your participation is your contribution. In addition, the course in which I am enrolled, COUN 6376 Supervised Practicum, is designated by the university as an Academic Civic Engagement course, which means that we strive to promote growth and development within the community, and your participation in counseling helps us to reach that goal.

Should you be unable to keep an appointment, you agree to call (936) 294-1121, the Jack Staggs Counseling Clinic, 24 hours in advance of the session you must miss. Because we maintain a waitlist at most times, missing a session without providing 24 hours notice may mean that you forfeit your designated counseling time. If you have any questions regarding any of this information, please feel free to ask me. If miss three consecutive sessions, you may also forfeit your designated counseling time even if you provide notice.

I am receiving supervision from Rick Bruhn Ed.D., LMFT-S, LPC-S, who has over 40 years of experience in the counseling field. If you have any complaints or concerns, you may contact Dr. Bruhn at 936-294-1132.

I hereby consent to and agree to receive counseling services and acknowledge that I have received a copy of the Professional Disclosure Statement for Your Name.

Your Name,
Counseling Practicum Student

Date

Client' Signature

Date

Please include the name and phone number of any person you wish for me to contact in case of an emergency or crisis.

Name

Phone #