Assessment in the Major

For the

M.S. in Mental Health Counseling

Prepared by

John Klem, Ph.D., Program Director

Department of Rehabilitation and Counseling
College of Education, Health, and Human Services

Academic Year 2011 - 2012
Assessment in the Major
M.S. Mental Health Counseling 2011 – 2012

Introduction

During the 2011-2012 academic year the Mental Health Counseling program was officially accredited by the Counsel for the Accreditation of Counseling Related Educational Programs (CACREP). This is the result of almost four years of continuous effort by the Mental Health Counseling faculty, staff and students. The program is officially accredited until October of 2014, when it will be re-reviewed to receive an additional 6 years of accreditation. The only stated concern of the CACREP accreditation board was our ongoing evaluation system. Based on this feedback, the program will now assess and document student learning on a far more comprehensive scale. These changes will be outlined in the planning section.

Methods Used to Assess Learning Outcomes

Multiple data sources were used to assess the M.S. in Mental Health Counseling for the 2011-2012 academic year.

- **Assessment of Clinical Skills and Practice**
  - Midterm and final practicum evaluations
  - First and second semester supervisor’s final internship evaluations
  - Student self-evaluations at the end of their internship experience
- **Assessment of Foundational Knowledge**
  - Mental Health Counseling comprehensive exam
  - Bi Annual Assessment of Student Learning
    - Note: The bi-annual assessment of student learning will begin in the Fall semester of 2012, therefore these results will not be included in this report.
- **Yearly Dispositional Review**
  - Use to assess student on the following domains; personal and social maturity, interpersonal relations, communication skills, and professional and ethical conduct.

Description of Methods/Assessments

1. Internship evaluations (Appendix A) are done at the end of each semester of internship with the site supervisor meeting with the student to explain the evaluation results. This course assists counselors-in-training in developing their professional counseling skill competence. Internship is a capstone course within the program and serves as one of the summative measures of the knowledge and skill development of the students. Each of the items assessed in the Internship evaluation is tied directly to the overall program goals.

   Rating for internship evaluations are on a six-point Likert scale, with 0 = Unsatisfactory; 1 = Needs Substantial Improvement; 2 = Needs Some Improvement; 3 = Acceptable; 4 = Very
Satisfactory; and 5 = Outstanding. Nineteen items are examined and grouped into two content areas: The means for the Inter/Intra Personal Competencies and Professional Core Competence for each of the nineteen items are calculated and compared, as are overall means for the Inter/Intra Personal Competencies areas and Professional Core Competencies. A score of 5.0 (Outstanding) was the highest possible rating and a score of 0.0 (Unsatisfactory) was the lowest. As this is summative course in the program, a mean score of 3 for any item was considered minimally acceptable.

Each student also completes a self-evaluation of their abilities at the end of their internship experience. The student self-evaluations are done at the end of the internship experience and are scored in the same manner as the Internship evaluation outlined above.

2. Practicum evaluations (Appendix B) are used to assess student development in their first clinical experience. This course assists counselors-in-training in developing their professional counseling skill competence. At the end of the course, students will possess an improved understanding of their counseling strengths and specific areas for counseling skill improvement. Students are evaluated at the end of the semester by the university supervisor and the site supervisor. The evaluation consists of 36 total items divided between the following domains: counseling skills, behavioral elements, therapeutic relationships skills, supervision, and clinical and professional behavior. Students are rated on a 5 points Likert scale; 1 = undeveloped and/or negative impacted session, 2 = some evidence of development, need additional work practice, 3 = fairly developed, still issues with use or presentation, 4 = used effectively to enhance the counseling process and/or the relationship, 5 = highly develop and/or well-timed use of the skills. As this is a formative course, a mean score of 2 for any item was considered minimally acceptable.

3. The comprehensive examination assesses key knowledge from the core courses in the Mental Health Counseling Program. The comprehensive exam consisted of 105 multiple choice questions. A score of 70% or above is the cut-off point for passing. The exam was offered twice during the 2011–2012 academic year.

4. The one year review is completed after students have finished the first full year of course work. Students must obtain a minimum average rating of ‘satisfactory’ in each of the assessment areas. Students are rated on the following domains; personal and social maturity, interpersonal relations, communication skills, and professional and ethical conduct. Satisfactory student performance at the one-year review must be supported by two-thirds of the Mental Health Counseling graduate faculty for program. The following rating scale is used for this assessment: N/O = not observed, 1 = Unsatisfactory: student is significantly below minimum competencies in this area, 2 = Needs Improvement: student does not currently meet minimum competencies in this area, 3 = Satisfactory: student meets minimum competencies in this area, 4 = Exceeds: student is operating above minimum competencies in this area. A copy of the scoring rubric can be found in Appendix C.

Results of the Assessments

1. During the 2011-2012 academic year twenty-two students were assessed by their internship site supervisor on their performance at the end of their first semester internship.
experience. Eighteen students were assessed at the end of their second internship experience.

a. Mean scores at the end of the first semester for the nineteen items ranged from 3.86 to 4.85, with most above the minimally acceptable level of 3. The overall mean for the Inter/Intra Personal Competencies was 4.54 and the Professional Core Competencies was 4.38. The lowest rated area was in the ability to use and interpret psychological appraisal instruments with clients (item 14).

b. Mean scores at the final internship evaluation for the nineteen items ranged from 4.33 to 4.93, all being well above the minimally acceptable level of 3.5. The overall mean for the Inter/Intra Personal Competencies items was 4.67, and for the Professional Core Competencies were 4.74. As expected both of the overall means improved from the first to the second evaluation. The item with the lowest mean from the first semester (psychological appraisal) improved by a significant margin (from 3.86 to 4.50). Scores in two areas, social and cultural issues in counseling and the ability to communicate ideas clearly, decreased by a small amount (from 4.85 to 4.80 and 4.77 to 4.68 respectfully) but still far exceed manually acceptable standards.

The following is a breakdown of the mean scores in each of the major domains of the evaluation:

<table>
<thead>
<tr>
<th>Question</th>
<th>Supervisor’s First Semester Evaluation</th>
<th>Supervisor’s Final Evaluation</th>
<th>Change</th>
<th>Students Self-Assessment</th>
<th>First X</th>
<th>Final X</th>
<th>Self X</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>4.69</td>
<td>4.85</td>
<td>+0.16</td>
<td>4.58</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>4.54</td>
<td>4.80</td>
<td>+0.26</td>
<td>4.45</td>
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<td></td>
<td></td>
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<tr>
<td>3</td>
<td>4.62</td>
<td>4.73</td>
<td>+0.11</td>
<td>4.70</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>4.00</td>
<td>4.45</td>
<td>+0.45</td>
<td>4.23</td>
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<tr>
<td>5</td>
<td>4.54</td>
<td>4.80</td>
<td>+0.26</td>
<td>4.38</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>6</td>
<td>4.85</td>
<td>4.80</td>
<td>-0.05</td>
<td>4.50</td>
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<td></td>
<td></td>
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<tr>
<td>7</td>
<td>4.46</td>
<td>4.68</td>
<td>+0.22</td>
<td>4.48</td>
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<tr>
<td>8</td>
<td>4.77</td>
<td>4.65</td>
<td>-0.12</td>
<td>4.50</td>
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<tr>
<td>9</td>
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<td>4.68</td>
<td>+0.41</td>
<td>4.30</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>10</td>
<td>4.54</td>
<td>4.80</td>
<td>+0.26</td>
<td>4.53</td>
<td></td>
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<td></td>
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<tr>
<td>11</td>
<td>4.69</td>
<td>4.90</td>
<td>+0.31</td>
<td>4.73</td>
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<tr>
<td>12</td>
<td>4.64</td>
<td>4.93</td>
<td>+0.29</td>
<td>4.70</td>
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<td></td>
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<tr>
<td>13</td>
<td>4.14</td>
<td>4.41</td>
<td>+0.27</td>
<td>3.97</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>14</td>
<td>3.86</td>
<td>4.50</td>
<td>+0.64</td>
<td>4.08</td>
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<tr>
<td>15</td>
<td>4.17</td>
<td>4.33</td>
<td>+0.15</td>
<td>4.82</td>
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<td></td>
<td></td>
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<tr>
<td>16</td>
<td>4.15</td>
<td>4.58</td>
<td>+0.43</td>
<td>4.33</td>
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<td></td>
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<tr>
<td>17</td>
<td>4.30</td>
<td>4.50</td>
<td>+0.20</td>
<td>4.00</td>
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<td>18</td>
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<td>4.79</td>
<td>+0.10</td>
<td>4.61</td>
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</tr>
<tr>
<td>19</td>
<td>4.33</td>
<td>4.72</td>
<td>+0.39</td>
<td>4.28</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Inter/Intra Personal Competencies**: 4.54 4.67 4.48 (+.13 change)
- **Professional Core Competencies**: 4.38 4.74 4.37 (+.36 change)
Mean scores for student self-evaluations (see chart above) are generally in line with site supervisor scores, though lower. Scores on the nineteen items ranged from 3.97 to 4.82. The overall mean for the Inter/Intra Personal Competencies items was 4.48 and for the Professional Core Competencies were 4.37.

2. Ten students completed the Mental Health Counseling Practicum course in the Fall of 2011 and thirteen students completed the course in the Spring of 2012. Mean scores at the end of the Fall semester ranged from 4.17 to 4.78. Mean scores at the end of the Spring course ranged 4.00 to 4.64. Scores in all domains were well above the minimally acceptable level of 2. The following is a breakdown of the mean scores in each of the major domains of the evaluation:

<table>
<thead>
<tr>
<th>Domain</th>
<th>University Supervisor Rating</th>
<th>Site Supervisor Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Skills</td>
<td>4.17</td>
<td>4.16</td>
</tr>
<tr>
<td>Behavioral Elements</td>
<td>4.65</td>
<td>4.63</td>
</tr>
<tr>
<td>Therapeutic Relationship</td>
<td>4.50</td>
<td>4.41</td>
</tr>
<tr>
<td>Supervision</td>
<td>4.78</td>
<td>4.56</td>
</tr>
<tr>
<td>Clinical and Professional Behavior</td>
<td>4.35</td>
<td>4.36</td>
</tr>
<tr>
<td>Overall Average</td>
<td><strong>4.49</strong></td>
<td><strong>4.25</strong></td>
</tr>
</tbody>
</table>

For the Spring of 2012:

<table>
<thead>
<tr>
<th>Domain</th>
<th>University Supervisor Rating</th>
<th>Site Supervisor Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling Skills</td>
<td>4.00</td>
<td>4.17</td>
</tr>
<tr>
<td>Behavioral Elements</td>
<td>4.58</td>
<td>4.50</td>
</tr>
<tr>
<td>Therapeutic Relationship</td>
<td>4.23</td>
<td>4.37</td>
</tr>
<tr>
<td>Supervision</td>
<td>4.23</td>
<td>4.54</td>
</tr>
<tr>
<td>Clinical and Professional Behavior</td>
<td>4.64</td>
<td>4.10</td>
</tr>
<tr>
<td>Overall Average</td>
<td><strong>4.28</strong></td>
<td><strong>4.34</strong></td>
</tr>
</tbody>
</table>

3. Fourteen students took the comprehensive exam during the Fall of 2011, with thirteen passing and one failing. The one student who failed the exam has since retaken the exam and passed. Eleven students took the exam during the Spring 2012 semester, with all eleven receiving passing scores.

4. For the one year review, nine students were reviewed during the Fall of 2011, with eight receiving at least satisfactory scores and passing their review. Eleven students were reviewed during the Spring of 2012 with nine passing. Each student who failed the one year review was placed on a remediation plan. The specific results of the remediation plans are be discussed below.
Interpretation and Dissemination of Results

1. The scoring from the internship site supervisors suggest that our students are well prepared for their final clinical experiences. There does seem to be some ongoing disconnect between the student perception of their abilities as a counselor and that of their supervisor (this was noted last year). At some level this could be the reason for the significant increase in scores between the first and second semester supervisor evaluations as students were highly driven to develop in all areas of the profession.

In terms of the development of our student both interpersonally and clinically, the results are promising. In almost all the domains measured the scores from the first semester increased with only a couple of exceptions. Furthermore, the score in the lowest domain (psychological appraisal) on the initial evaluation increased a significant amount from the first to second semester of internship. Two areas slightly decreased from the first to second semester of internship (social and cultural issues in counseling and the ability to communicate ideas clearly). While the decreases were minimal we will continue to monitor these scores in future assessments.

This is the first year all students in the program completed a clinical practicum before beginning internship. Students in the previous years completed a 900 internship. For this academic year, students complete a 150 hours clinical practicum followed by a 600 hour internship. Practicum has a significant supervision element in comparison to old internship only model at the cost of reducing overall clinical hours by 150 (from 900 to 750). When comparing the data from previous semesters it would appear that the site supervisors see our students as competent as in previous years in the intra/inter personal core and as capable in the professional core measured in the internship evaluations. This will be an important trend to monitor into the future.

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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Inter/Intra Personal</td>
<td>4.60</td>
<td>4.68</td>
<td>4.42</td>
<td>4.54</td>
<td>4.67</td>
<td>4.48</td>
</tr>
<tr>
<td>Professional Core</td>
<td>4.27</td>
<td>4.47</td>
<td>4.17</td>
<td>4.38</td>
<td>4.74</td>
<td>4.37</td>
</tr>
</tbody>
</table>

2. This is the first time the Mental Health Counseling practicum data has been used in the assessment of the MHC program. While it is difficult to assess the data without context from the previous semesters, the initial results are encouraging. Based on the current scores, it seems clear that students are learning the necessary skills to be successful in their internship.

3. Overall, the results of the comprehensive exam seem to indicate that students nearing the completion of their program have integrated the information and knowledge received throughout their time in the program. This conclusion is further supported by the evaluation completed by internship supervisors.
4. In regards to the one year review, most students at the end of their first programmatic year are performing at least at an adequate level. Scores on the one year review are generally in the satisfactory domain with three students falling below satisfactory. In the three cases where students did not meet the standards set forth in the one year review process, those students were required to meet with core faculty where a remediation plan was presented. All three students agreed to follow through with the presented remediation plan. At this time, two of the students are successfully meeting the requirements of the remediation plan, while a third student was unable to meet the criteria outlined in the program. This student has since withdrawn from the program and would need to reapply to the program to continue his progress toward his degree. Overall it would seem the one year review process is an effective tool to identify struggling students and help them understand the specific areas where improvement is needed.

**Plans for Program Improvement**

The MHC program was recently accredited by CACREP for 2 years. Based on the final report received from the CACREP board, the MHC program is in compliance with all but one accreditation standard (Standard AA). This standard is divided into five parts and is related to how the program faculty “engages in a continuous systematic program evaluation that demonstrates how the mission, objectives, and student learning outcomes are measured and met”. While the on-site reviewers did indicate that we meet many aspects of this standard, the program has begun the process of making changes to the overall structure of the evaluation systems used to assess student learning. Furthermore, we are changing the manner we disseminate and document this information as this was a key part of Standard AA.

One of the major changes we have undertaken is how we assess student learning. This process is thoroughly outlined in the student handbook. Below is an excerpt from the student handbook describing this process:

Semester Reviews:

At the beginning of the fall and spring semester the core faculty in the Mental Health Counseling program will meet and evaluate each student’s progress toward meeting the CACREP professional identify and program specific standards. These standards are listed on pages four through nine of this handbook and are tied to specific course objectives found in the syllabus in each core course. This evaluation is completed in addition to the normal grading aspects of your courses. This evaluation serves as a more specific measure of the developing knowledge and skills needed to be an effective and ethical counselor.

For each course taken the preceding semester you will be rated on a 4 point Likert scale (1 = unsatisfactory, 2 = need improvement, 3 = satisfactory, 4 =exceeds) for each CACREP standard met in those courses. In most cases students have a number of courses in which to meet each standard. Students who fail to achieve a 3 on any specific standard will be required to meet with the program director to determine the next course of action. In some cases students may be asked to retake the course or complete additional outside assignments to indicate competency in that specific area. In some cases a student’s progress in the
program may be considered “unsatisfactory” and a remediation plan will be developed by the program faculty.

In regards to ongoing documentation of our assessment practices, we will continue to use the measures outlined in this report but have added a more streamlined assessment system which will track all student data in one comprehensive spreadsheet. Some of the specific measures detailed in the spreadsheet include; 1) Semester reviews (described above), 2) Scores on the one year review, 3) Scores on the comprehensive exam, and 4) Scores on all practicum and internship evaluations. The overall goal of this new system is to have a comprehensive way to assess and document student learning.

In addition to the new rating and assessment system, the program will now have a formalized process to disseminate the results of our assessment to our employers and graduates. Each year the program will now send all site supervisors a newsletter outlining the details of this report as well as any specific programmatic accomplishments. Furthermore, employer, site supervisors, and graduates will be given specific information on how to access the programs yearly Assessment in the Major report.

Finally, the program has begun a systematic process of surveying our recent graduates. In last year’s report the results of a 10 year assessment of the program was completed and a number of recommendations were made that have since been incorporated into the program. We will now survey our alumni one month after graduation and every two years. This information will be discussed during the semester in department and program specific meetings. These results will also be added into the yearly Assessment in the Major report and the end of year reports to stakeholders of the program.

Concluding Remarks

At present, the Mental Health Program seems to be ideally positioned. The program is one of three CACREP accredited programs in the state and the only program on the western side of the state. Furthermore, national accreditation means far more exposure as the program is now listed on the CACREP website which is a starting point for many students seeking a counseling program. With the implementation of the ideas outlined in the “Plans of Program Improvement” section of this report the, the program will be positioned to respond to CACREP in two years which will lead to 6 more years of accreditation.
Appendix A: Internship Assessment Form
Site Supervisor Evaluation
(CACREP STANDARD G6)
COUN-794 MS Mental Health Counseling Internship
Department of Rehabilitation and Counseling

Student Name: ___________________________________________

University Supervisor: _____________________________________

Site Supervisor: ___________________________________________

Semester: ___________ Midterm Review Date: ___________ Final Review Date: ___________

Semester of Internship (circle) ________ First ________ Second ________

Please evaluate the student’s performance relative to the listed competencies. Rate each competency by circling a number from 0-5 after each item. If an item is not applicable to this Internship setting, circle NA. The last several items are open-ended and are to be used to add and rate additional competencies specific to this internship setting.

5 = Outstanding  2 = Needs some improvement
4 = Very satisfactory  1 = Needs substantial improvement
3 = Acceptable  0 = Unsatisfactory--no effort expended
NA = Does not apply in this internship setting

INTER/INTRA-PERSONAL COMPETENCIES

1. Demonstrated a spirit of cooperation with colleagues/supervisor(s).  5 4 3 2 1 0 NA
   Comments:

2. Demonstrated an ability to use effective interpersonal communication skills with colleagues/supervisors/clients.  5 4 3 2 1 0 NA
   Comments:

3. Accepted suggestions from supervisor(s) and was willing to make changes.  5 4 3 2 1 0 NA
   Comments:

4. Demonstrated an ability to handle stressful situations constructively.  5 4 3 2 1 0 NA
   Comments:

5. Indicated a consistent enthusiasm for the Internship position and the profession.  5 4 3 2 1 0 NA
   Comments:
6. Demonstrated awareness and an open-minded attitude about gender, racial, ethnic, religious and age-related issues which may affect professional interaction with clients, supervisors, colleagues, and agency constituents.
   Comments:

   PROFESSIONAL CORE COMPETENCIES

7. Demonstrated the ability to initiate and complete a variety of tasks related to the professional work of the agency.
   Comments:

8. Demonstrated the ability to effectively convey information orally as well as in writing.
   Comments:

9. Demonstrated the ability to provide a clear rationale for professional interventions using current and acceptable theoretical, empirical and research-based formulations.
   Comments:

10. Demonstrated knowledge and acceptance of agency's/institutions policies.
    Comments:

11. Worked within the guidelines of professional ethics, statutes, and federal laws.
    Comments:

12. Consulted with supervisor(s) when faced with an ethical dilemma.
    Comments:

13. Demonstrated an ability to use the DSM-IV to make client diagnoses.
    Comments:

14. Demonstrated the ability to use and interpret psychological appraisal instruments with clients.
    Comments:

15. Demonstrated the ability to utilize career information and career appraisal with clients.
    Comments:
16. Demonstrated effective organizational and leadership abilities. 
   Comments:  
   5 4 3 2 1 0 NA 

17. Demonstrated skills in group counseling, family and couples' 
   counseling, and consultation (specify and describe). 
   Comments:  
   5 4 3 2 1 0 NA 

18. Demonstrated skills in individual counseling (i.e., developing a 
   professional relationship with the client: empathy, rapport, 
   attending skills, utilizing strategies appropriate to the client 
   and the situation, goal definition, etc.). 
   Comments:  
   5 4 3 2 1 0 NA 

19. Demonstrated skills in consulting, i.e., working with parents, staff, 
   other agencies, conducting in-service activities, workshop, etc.). 
   Comments:  
   5 4 3 2 1 0 NA 

<table>
<thead>
<tr>
<th>ADDITIONAL COMPETENCIES APPROPRIATE TO SETTING</th>
</tr>
</thead>
<tbody>
<tr>
<td>20.  (Write In)                  5 4 3 2 1 0 NA</td>
</tr>
<tr>
<td>21.  (Write In)                  5 4 3 2 1 0 NA</td>
</tr>
<tr>
<td>22.  (Write In)                  5 4 3 2 1 0 NA</td>
</tr>
<tr>
<td>23.  (Write In)                  5 4 3 2 1 0 NA</td>
</tr>
</tbody>
</table>

Student’s Signature______________________________________ Date__________________

Supervisor’s Signature ____________________________________Date___________________

INCLUDE THIS FORM WITH THE REST OF THE EVALUATION PACKET AND SEND OR 
BRING TO THE UNIVERSITY INTERNSHIP SUPERVISOR.
Appendix B: Practicum Assessment Form
University of Wisconsin-Stout  
MS Mental Health Counseling Program  
Counseling Skills and Techniques Competency Scale

Student Name: ___________________________________________

University Supervisor: _____________________________________

Site Supervisor: ________________________________

Semester: ___________  Midterm Review Date: ___________  Final Review Date: __________

At both the midpoint and at the end of the semester this rubric needs to be scored by the student, site supervisor, and university supervisor. The following criteria (Counseling Skills, Behavioral Elements, Therapeutic Relationship, Supervision, and Clinical and Professional Behavior) are the counselor functions that a needed to develop and maintain a therapeutic relationship and to promote personal growth and wellness within our clients.

Each of the items listed below with be rated in the following Likert scale:

N/A= NOT APPLICABLE
1= UNDEVELOPED AND/OR NEGATIVITLY IMPACTED SESSION
2= SOME EVIDENCE OF DEVELOPMENT; NEED ADDITIONAL WORK PRACTICE
3= FAIRLY DEVELOPED; STILL ISSUES WITH USE OR PRESENTATION
4= USED EFFECTIVELY TO ENHANCE THE COUNSELING PROCESS AND/OR RELATIONSHIP
5= HIGHLY DEVELOPED AND/OR WELL TIMED USE OF THE SKILLS

COUNSELING SKILLS:

1) Paraphrasing/Reflection/Summary: from statements and on-verbal cues, the counselor accurately describes the client’s issues, affect, and behavior: a) Content  b) Feelings  c) Process  d) Non-Verbal
Rating:___________Notes:_____________________________________________________________________

2) Probes/Questions: the counselor’s statements result in the client providing additional information about his/her cognitions, behaviors, and/or feelings: a) Clarification b) Open-ended questions c) Close-ended questions
Rating:___________Notes:_____________________________________________________________________

3) Self- Disclosure: uses appropriate self-disclosure to enhance the counseling relationship
Rating:___________Notes:_____________________________________________________________________

4) Immediacy: the counselor addresses the client’s behavior in the “here and now”
Rating:___________Notes:_____________________________________________________________________

5) Identifies the Core Affect(s): names the central feeling(s) experienced by the client
Rating:___________Notes:_____________________________________________________________________


6) Explores and Tracks: the counselor stays with the client cognitively and affectively
Rating: ___________ Notes: ________________________________________________________________

7) Confrontation: include noticing discrepancies and challenging clients as appropriate
Rating: ___________ Notes: ________________________________________________________________

8) Use of Metaphors: counselor demonstrate the use of metaphor during session
Rating: ___________ Notes: ________________________________________________________________

9) Closure/ Termination: the counselor provides closure in each individual session, discusses termination in the
sessions proceeding the last session, and is international in bringing a positive end to the counseling process
(CACREP CMHC STANDARD D1).
Rating: ___________ Notes: ________________________________________________________________

BEHAVIORAL ELEMENTS:

10) Physical Presence: the counselor’s body posture, facial expression, and gestures are natural and congruent
with those of the client.
Rating: ___________ Notes: ________________________________________________________________

11) Activity Level: the counselor maintains a level of activity appropriate to the client’s activity level. Non-
verbal: a) the counselor’s physical movements are appropriate to the client’s activity level during the counseling
session, b) Voice: the counselor’s tone of voice and rate of speech are appropriate to the client’s present state
and/or counseling session.
Rating: ___________ Notes: ________________________________________________________________

12) Dress Code: Dresses professionally/appropriately based on site guidelines
Rating: ___________ Notes: ________________________________________________________________

THERAPUTIC RELATIONSHIP:

13) Supportive/Unconditional Positive Regard: the counselor makes statements that accept the client’s
cognitions, accepts the client’s behavior, and/or shares with the client that his/her feelings are not unusual
Rating: ___________ Notes: ________________________________________________________________

14) Genuineness: the counselor’s responses are sincere
Rating: ___________ Notes: ________________________________________________________________

15) Respect for Cultural Needs: shows appreciations for cultural and/or spiritual concerns and provides
responsive treatment based on unique client needs (CACREP CMHC STANDARD F2).
Rating: ___________ Notes: ________________________________________________________________
16) Transference and Counter transference: Counselor is aware of transfer issues within counseling and discusses these issues with both client and/or supervisor.
Rating:_________ Notes:________________________________________

17) Validates positive by identifying client’s strengths and resources
Rating:_________ Notes:________________________________________

SUPERVISION
18) Student recognizes own limitations and seeks out supervision as needed (CACREP CMHC STANDARD D9).
Rating:_________ Notes:________________________________________

19) Non-Defensive: the counselor gives and receives feedback interactively with clients, peers, and supervisors in an appropriate, professional manner.
Rating:_________ Notes:________________________________________

20) Implements feedback into counseling sessions
Rating:_________ Notes:________________________________________

21) Timeliness: arrives on time to supervision, notifies supervisor in a timely manner about any challenges with attendance. Keeps supervisor updated with regard to circumstances that affect supervision attendance.
Rating:_________ Notes:________________________________________

22) Participation in Supervision: actively participates in individual or group supervision. Is prepared with recordings of sessions and analysis of session other than those required
Rating:_________ Notes:________________________________________

23) Is prepared in each supervision session with recorded and previously viewed counseling sessions.
Rating:_________ Notes:________________________________________

CLINICAL AND PROFESSIONAL BEHAVIOR:

24) Is developing and demonstrate identity as a professional counselor;
Rating:_________ Notes:________________________________________

25) Demonstrates awareness of the ACA code of ethics, statues, and federal laws and uses these standards to guide practice (CACREP CMHC STANDARD B1).
Rating:_________ Notes:________________________________________
26) Completely all paperwork in a timely manner, maintains relevant client case notes, demonstrates understanding of documenting counseling sessions relevant to site requirements (CACREP CMHC STANDARD D7).

Rating:___________Notes:_____________________________________________________________________

27) The counselor is able to work with the client to set meaningful goals and assigns homework that is directly tied into these goals (CACREP CMHC STANDARD D1).

Rating:___________Notes:_____________________________________________________________________

28) Creates and revises a comprehensive treatment plan for each continuing client (CACREP CMHC STANDARD D1).

Rating:___________Notes:_____________________________________________________________________

29) Demonstrates an ability to handle stressful situations constructively.

Rating:___________Notes:_____________________________________________________________________

30) Demonstrates an ability to use the DSM-IV to make client diagnoses (CACREP CMHC STANDARDS D1, L1, L2).

Rating:___________Notes:_____________________________________________________________________

31) Applies theory to practice. Use acceptable theoretical, empirical and research-based formulations in counseling sessions and in the treatment planning process.

Rating:___________Notes:_____________________________________________________________________

32) Demonstrates the ability to use and interpret psychological assessment instruments with clients (CACREP CMHC STANDARDS L1, L2).

Rating:___________Notes:_____________________________________________________________________

33) Student is gaining further knowledge related to public mental health policy, aspects of financing/billing and regulatory processes in clinical mental health counseling (CACREP CMHC STANDARD B2).

Rating:___________Notes:_____________________________________________________________________

34) Student actively promotes optimal human development, wellness, and mental health through prevention, education, and advocacy activities (CACREP CMHC STANDARD D3).

Rating:___________Notes:_____________________________________________________________________

35) Applies effective strategies to promote client understanding of and access to a variety of community resources (CACREP CMHC STANDARDS D4, F1).

Rating:___________Notes:_____________________________________________________________________
36) Demonstrates the ability to use procedures for assessing and managing suicide risk and can differentiate between diagnosis and developmentally appropriate reactions during times of crisis (CACREP CMHC STANDARD D6, L3).
Rating:___________Notes:_____________________________________________________________________

GOALS FOR CONTINUOUS IMPROVEMENT:

Create 3 goals that you will focus on for the semester. Please revise these goals at midterm if needed.

37._____________________________________________________________________________________
Rating:___________Notes:____________________________________________________________________

38._____________________________________________________________________________________
Rating:___________Notes:____________________________________________________________________

39._____________________________________________________________________________________
Rating:___________Notes:_____________________________________________________________________

Site Supervisor’s Signature: _______________________________________ Date _____________
University Supervisor’s Signature: ________________________________ Date _____________
Student’s Signature: ____________________________________________ Date _____________
Appendix C: One Year Review Assessment Rubric
Mental Health Counseling One-Year Review

In order to continue in the Mental Health Counseling Program, students must obtain a minimum average rating of satisfactory (3) in each of the assessment areas. Satisfactory student performance at the one-year review must be supported by two-thirds of the Mental Health Counseling graduate faculty for program continuation.

Satisfactory academic achievement is based on students’ grades obtained in their graduate coursework. Suitable academic conduct (as per UW-Stout policy) is assumed unless noted elsewhere.

Rating Scale

N/O = not observed
1 = Unsatisfactory: student is significantly below minimum competencies in this area (faculty rationale/explanation required)
2 = Needs Improvement: student does not currently meet minimum competencies in this area (faculty rationale/explanation required)
3 = Satisfactory: student meets minimum competencies in this area
4 = Exceeds: student is operating above minimum competencies in this area

_____________________________________________

Assessment Criteria

Personal and Social Maturity: Characteristics and behaviors suitable to work in a professional capacity with vulnerable populations. Includes respectfulness, patience, empathy and compassion towards others. Generally demonstrates cooperative attitude, adaptability, self-regulation and ability to benefit from feedback.

Interpersonal Relations: Ability to establish positive interpersonal interactions with others, including peers, staff, faculty and clients.

Communication Skills: Written and Oral
A. Written communication skills appropriate to the situation and/or audience. Ability to effectively express ideas, needs and outcomes in a clear accurate manner.

B. Oral communication skills appropriate to the situation and/or audience in interpersonal or small group settings such as classes, teamwork, meetings, counseling sessions and/or staffings.

Professional and Ethical Conduct: Demonstrates professional behavior appropriate to the situation and ethical conduct consistent with the American Counseling Association Code of Ethics, including confidentiality, professional boundaries, and ethical decision