

CHICAGO STATE UNIVERSITY

I. PSYC 5991.60/491 Internship in Community Counseling -/300 or 600 Clock Hours field/ (3 or 6)

Chicago State University
Department of Psychology
Three (3) or Six (6) Credit Hours
Harold Washington Hall, Room 308
Fall 2009

II. Instructor:

Professor: Karen McCurtis Witherspoon, Ph.D.
Office Hours: Tues., Wed., & Thur., 3:00 - 5:00pm, & by appt
Office Location: HWH 219, Phone (773) 995-3879
EMAIL: kmccurti@csu.edu
Main Office: Graduate Counseling Office, HWH311, (773) 995-2359

III. Attendance Policy:

Attendance is mandatory. The structure of this course and its importance in your development as a future counselor necessitates that you attend regularly. We cover a considerable amount of information during each session and group supervision is a requirement of the counseling program. Points will be deducted from your final grade if you are absent, tardy or leave class early. Please inform the instructor if you must miss class. University policy will be followed for attendance problems. You may be dropped from the course if you miss more than two class sessions. Please note that it is the student's responsibility to drop this course if necessary.

IV. ADA Policy

The College of Arts and Sciences and the Department of Psychology are strongly committed to taking all reasonable steps to ensure that our students are able to work to their fullest potential. The Abilities Office provides services for all students in attendance at Chicago State University with verified disabilities. Please direct all requests for accommodations due to a disability to the Abilities Office (773) 995-4401. The Office is located in the Student Union Building, Room 198.

V. Course Prerequisites

Completion of all required 5000/400- level courses and written application submitted by appropriate deadline. Admission to the master's degree program.

VI. Conceptual Framework

The College of Education's conceptual framework serves as the model for preparing all candidates to success in helping all urban children learn. This preparation is characterized and distinguished by five core themes. (1) Partnerships with the education community, (2) assessments of teaching and learning that are consistent and frequent, (3) contextualized teaching experiences, (4) technology-integrated curricula and instructional delivery and (5) standards-based teaching and learning. This course creates a basic foundation upon which an understanding of student, teacher and parents behavior can impact the learning process.

Department Mission

The mission of the Counseling Graduate Program is to produce highly qualified graduates equipped to serve the complex counseling needs in the urban setting with specific emphasis on addressing the needs of urban youth and their families. This mission is generated from the belief that counselors equipped to deal with the more difficult problems in large cities will also be effective in other, less challenging settings.

VII. Course Description

Supervised field placement in a community setting. May be taken for three credit hours requiring 300 hours of experience or six credit hours requiring 600 hours of experience. May be taken twice for three credit hours or once for six credit hours to fulfill the required six credit hours of internship.

VIII. Method of Instruction:

Students will engage in individual and group-counseling relationships with clients in internship placement sites. They will gain experience in all of the roles and responsibilities of clinical mental health counselors including: consultation, career counseling, crisis intervention, etc. In addition to analyzing their own work, students will be responsible for presenting their work in class and receiving feedback from peers and supervisor. Supervision will include focusing on (1) students' individual issues which may be adversely impacting their delivery of counseling services, and (2) the continued development of clinical skills in the application of counseling theory to actual counseling situations (3) the ability to diagnose with the DSM-IV and apply said diagnoses to the needs of their clients, (4) the appropriate use of a treatment plan, developed in conjunction with the client and the supervisor.

All internship requirements are clarified in the Handbook for Clinical Courses (Bicknell-Hentges, 2009) and are discussed with off-site supervisors at least once per semester. On-site supervisors will be visited at least once per semester by the on-site supervisor and ongoing phone contact will be maintained in order to maintain appropriate supervision and practicum student experience. The University Supervisor will maintain a supervisory relationship with each on-site supervisor throughout the semester. Both supervisors will play a role in the grading of internship students. Students are required to maintain the required student malpractice insurance throughout the entire intership.

Use of Technology:

Students are expected to be able to use a computer, access the internet, send and retrieve email, turn in assignments via blackboard (the CSU online learning system located at www.csu.edu), open attachments, and conduct a library search online. The CSU blackboard will be used to make announcements, post lecture notes, and assignments. Email will be used to send messages to the class and to individual students. As such, it is your responsibility to ensure that you have access to blackboard and your email account as messages will be sent to the account on file with the university. In the event that you have problems with accessing either blackboard or your email account, contact Academic Computing as soon as possible. If you do not utilize your university email account, Academic Computing can assist you in having your messages forwarded to the address of your preference.

IX. Program Objectives met in this Course (*italicized*):

- 1. Students will demonstrate knowledge in the relationship between human growth and development and counseling.*
- 2. Students will demonstrate knowledge in assessment, research, and evaluation.*
- 3. Students will understand the dynamics of the helping relationship and be able to apply this understanding in counseling and group guidance.*
- 4. Students will understand educational and career planning and be able to apply this understanding effectively including in settings with the complex challenges of urban youth, families and communities.*
- 5. Students will demonstrate a professional orientation and knowledge of professional and ethical issues.*
- 6. Students will understand how to assess a client, including urban youth, as well as develop and implement an appropriate plan of intervention to use in effectively teaching the client.*
- 7. Students will demonstrate knowledge of social and cultural issues relevant to counseling and be able to apply this knowledge in counseling settings.*
- 8. Students will be prepared for employment as a counselor.*
- 9. Students will demonstrate a high level of knowledge in clinical mental health counseling or school guidance and counseling.*

X. Course Objectives and Assessments/Student Outcome Measures

Course Objectives	Measures of Objectives	Standards CACREP = Council for Accreditation of Counseling and Related Educational Programs SC – School CMH – Clinical Mental Health
1. Each student will be afforded an opportunity to counsel with clients in an appropriate internship setting under professional supervision	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 1 a-j
2. Each student will gain insight into personal and professional dynamics through individual supervision, group supervision and peer interaction	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 1. d & e; 2.d. e. & f; CMH = A-K
3. Each student will acquire the necessary skills to assess counselee problems, establish rapport, plan interventions and implement appropriate treatment plans	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 1. c., 5. b, c,d & f; 2.d. e. & f; CMH = G, H, K
4. The student will be exposed to professional and ethical issues in the field of counseling	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 1,j CMH = A
5. To apply the ethical standards of counseling and clinical mental health professional organizations and credentialing bodies, and applications of ethical and legal considerations in counseling.	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 1j CMH = B1
6. To understand individual, couple, family, group, and community strategies for working with an advocating for diverse populations, including multicultural competencies	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 2d
7. To learn to counselor's role in developing cultural self-awareness, advocacy, promoting social justice, and other culturally supported behaviors that promote optimal wellness and growth of human spirit, mind, or body within family members.	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 2e
8. To understand exceptional abilities and strategies for differentiated interventions	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 3e
9. To know career counseling processes, techniques, and resources, including those applicable to specific populations in a global economy	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 4g
10. To understand counseling theories consistent with current professional research and practice that provide models to conceptualize client	Discussion and application within the clinical mental health setting, supervisor evaluations	CACREP = 5d

<p>presentation and that help in selecting appropriate counseling interventions as well as beginning to develop a personal model of counseling</p>		
<p>11. To understand a systems perspective that provides and understanding of families and other major systems theories and major models of family and related interventions</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CACREP = 5e</p>
<p>12. To know group counseling methods, including group counselor orientations and behaviors, appropriate selection criteria and methods, and methods of evaluation and effectiveness</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CACREP = 6d</p>
<p>13. To understand standardized and nonstandardized testing and other assessment techniques, including norm-references and criterion referenced assessment, environmental assessment, performance assessment, individual and group test and inventory methods, psychological testing, and behavioral observations</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CACREP = 7b</p>
<p>14. To apply principles and models of needs assessment and program evaluation and findings to effect program modifications</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CACREP = 8d</p>
<p>15. Understands the roles and functions of clinical mental health counselors in various practice settings and the importance of relationships between counselors and other professionals, including interdisciplinary treatment teams.</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CMH = A3</p>
<p>16. Knows the professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling.</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CMH = A4</p>
<p>17. Understands a variety of models and theories related to clinical mental health counseling, including the methods, models, and principles of clinical supervision.</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CMH = A5</p>
<p>18. Is aware of professional issues that affect clinical mental health counselors (e.g., core provider status, expert witness status, access to and practice privileges within managed care systems).</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CMH = A7</p>
<p>19. Understands the range of mental health service delivery—such as inpatient, outpatient, partial treatment and aftercare—and</p>	<p>Discussion and application within the clinical mental health setting, supervisor evaluations</p>	<p>CMH = C5</p>

the clinical mental health counseling services network.		
20. Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D1
21. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D2
22. Promotes optimal human development, wellness, and mental health through prevention, education, and advocacy activities.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D3
23. Applies effective strategies to promote client understanding of and access to a variety of community resources.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D4
24. Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D5
25. Demonstrates the ability to use procedures for assessing and managing suicide risk.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D6
26. Applies current record-keeping standards related to clinical mental health counseling.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D7
27. Provides appropriate counseling strategies when working with clients with addiction and co-occurring disorders.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D8
28. 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.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = D9
29. Maintains information regarding community resources to make appropriate referrals.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = F1
30. Advocates for policies, programs, and services that are equitable and responsive to the unique needs of clients.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = F2
31. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = F3

32. Understands various models and approaches to clinical evaluation and their appropriate uses, including diagnostic interviews, mental status examinations, symptom inventories, and psychoeducational and personality assessments.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = G2
33. 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.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = H1
34. Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = H2
35. Screens for addiction, aggression, and danger to self and/or others, as well as co-occurring mental disorders.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = H3
36. 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.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = H4
37. Applies relevant research findings to inform the practice of clinical mental health counseling.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = J1
38. Demonstrates appropriate use of diagnostic tools, including the current edition of the <i>DSM</i> , to describe the symptoms and clinical presentation of clients with mental and emotional impairments.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = L1
39. Is able to conceptualize an accurate multi-axial diagnosis of disorders presented by a client and discuss the differential diagnosis with collaborating professionals.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = L2
40. Differentiates between diagnosis and developmentally appropriate reactions during crises, disasters, and other trauma-causing events.	Discussion and application within the clinical mental health setting, supervisor evaluations	CMH = L3

Professional Standard Sets

National Council for Accreditation of Teacher Education (NCATE) <<http://www.ncate.org>>

Illinois State Board of Education Content Area Standards <<http://www.isbe.state.il.us/profprep/standards.htm>>

Council for Accreditation for Counseling and Related Educational Programs (CACREP) <<http://www.cacrep.org>>

XI. Grading Policy

A = 90 - 100 (Mastery of professional clinical mental health counseling practices, skills, and roles)

- B = 80 - 89 (Adequate application of professional clinical mental health counseling practices, skills, and roles)
- C = 70 - 79 (Some, but inadequate demonstration of appropriate application of professional clinical mental health counseling practices, skills, and roles)
- D = 60 - 69 (Extremely inadequate demonstration of appropriate application of professional clinical mental health counseling practices, skills, and roles)
- F = Below 60 (Little to no demonstration of professional clinical mental health counseling practices, skills, and roles or gross ethical violation within the class)

Evaluation Criteria:

* Feedback from field supervisors (including conferences and rating scales) 40%

Evaluation by the University Supervisor

- Effective participation in class seminars
- Analysis and timeliness of weekly logs
- Mid-semester review of student’s progress
- Field experience contract
- Ethical and professional behavior

- Complete Final Checklist
- Clinical Mental Health Counseling Portfolio 40%
- Minimum of three written case studies
- Minimum of three audio tapes
- Minimum of two formal case presentation 20%

- Total 100%

**Thus part of your grade is dependent on your Site supervisors ratings and feedback and the remainder your grade is dependent upon class participation, presentations, and written assignments.*

Course Requirements

Students must complete 300 OR 600 hours of field experience. At least 240 of these hours must be in direct service. Students will be required to attend all the weekly supervision sessions scheduled by their university supervisor. Students must follow the requirements listed in the Handbook for Clinical Courses. The Coordinator of the Psychology Graduate Program must approve all internship sites and all supervisors must have an LCPC (or licensed clinical psychologist) and at least two years experience as a professional clinician following this licensure.

Students are placed in settings that are culturally diverse. Field supervisors sensitize them to the unique cultural characteristics of their setting. Students must complete at least one hour of individual supervision with their field supervisor per week. Other roles and responsibilities are listed in the handbook. Students are held responsible for knowledge of the content of the handbook.

Students must complete weekly logs and have them signed by their field supervisor. Just prior to the end of the semester, students will complete a log summary sheet, which is also signed. Each student will evaluate the field and university supervisors as well as the site at the end of the semester. Students will also complete Clinical Mental Health Counseling Portfolio, as described in this syllabus.

Content Areas to Be Addressed in Course:

- Topics will vary according to the needs and experiences of each internship student. Topics will include but will not be limited to:
- Case presentations by students

Effective development and use of treatment plans
 Needs Assessment: Development and Application
 DSM-IV Diagnosis and treatment planning
 Evidence-based practice
 Strategies for improving academic performance of students with varying abilities
 Factors impacting equity and access
 Counselor as advocate
 Developmental Issues
 Professional organizations and credentialing
 Mental Status Examinations
 Cultural and other variables impacting student performance, development, and counseling
 Consultation Theory and Application
 Emergency preparedness
 Impact and appropriate response to traumatic events
 Team building
 Working parents/families and the community
 Ethical issues and applications
 Individual and group guidance
 Application of career programming in the community setting
 Application of counseling theory and techniques for individuals and groups
 Appropriate use of assessment instruments
 Appropriate use of the DSM-IV for diagnostic purposes
 Interplay of professional skills, interpersonal abilities, and personal qualities
 Self-awareness
 Termination of counseling
 Development of strategies for working with diverse couples, families, and siblings
 Special issues, such as Child Abuse and Neglect, Substance Abuse, etc.
 Risk assessment and crisis intervention

XII. Required Texts

Bicknell-Hentges, L. (2009). *Handbook for Clinical Courses*. Chicago: Chicago State University, Department of Psychology.
 American Psychiatric Association. (1994). *Diagnostic and Statistical Manual of Mental Disorders- Fourth Edition*. Washington, DC: American Psychiatric Association.

XIII. Required Readings

Mental Health: Culture, Race, Ethnicity. A Supplement to Mental Health: Report of the Surgeon General accessible at http://download.ncadi.samhsa.gov/ken/pdf/SMA-01-3613/exec_summ.pdf

Report on Mental Health by Dr. David Satcher accessible at <http://mentalhealth.samhsa.gov/features/surgeongeneralreport/home.asp>

Chapter 1: Introduction and Themes
 Chapter 2: The Fundamentals of Mental Health and Mental Illness
 Chapter 3: Children and Mental Health
 Chapter 4: Adults and Mental Health
 Chapter 5: Older Adults and Mental Health
 Chapter 6: Organization and Financing of Mental Health Services
 Chapter 7: Confidentiality of Mental Health Information: Ethical, Legal, and Policy Issues
 Chapter 8: A Vision for the Future—Actions for Mental Health in the New Millennium

XIV. Bibliography

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- Aponte, J.F. & Wohl, J. (2000). *Psychological intervention and Cultural Diversity*. Boston, MA; Allyn and Bacon.
- Arthur, G.L. & Swanson, C.D. (1993). *Confidentiality and privileged communication*. Alexandria, VA: ACA.
- Avila, D. L. & Combs, A. W. (1985). *Perspectives on helping relationships and the helping professions, past, present, and future*. Boston: Allyn and Bacon, Inc.
- Atkinson, D.R., Morten, G., and Sue, D.W. (Eds.) (1998). *Counseling American Minorities*. (5th) Boston, MA: McGraw Hill.
- Baruth, L. G. & Robinson, E. H. (1987). *An introduction to the counseling process*. Englewood Cliffs, NJ: Prentice-Hall, Inc.
- Beutler, L. E. & Clarkin, J. F. (1990). *Systematic treatment selection: Toward targeted therapeutic interventions*. New York, NY: Brunner/Mazel, Inc.
- Boylan, J., Malley, P., Scott, J. (1995). *Practicum and internship textbook for counseling and Psychotherapy*, (2nd Ed.). Muncie, IN: Accelerated Development.
- Combs, A. W. (1989). *A theory of therapy*. Newbury Park, CA: Sage Publications.
- Corey, M.S. & Corey, G. (1987). *Groups: Process and Practice*. Pacific Grove, CA: Brooks/Cole.
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- Gazda, G. M. et al. (1984). *Human relations development: A manual for educators*. Boston: Allyn and Bacon, Inc.
- Gelso, C. J. & Fretz, B. R. (1992). *Counseling psychotherapy*. Fort Worth: Harcourt Brace Jovanovich College Publishers.
- Hackney, H. & Cormier, S. (1994). *Counseling strategies and interventions*. Boston: Allyn and Bacon, Inc.
- Haley, J. (1980). *Leaving home: The therapy of disturbed young people*. St. Louis: McGraw-Hill Book Company.
- Hart, G. M. (1978). *Values clarification for counselors*. Springfield, IL: Charles C. Thompson.
- Jourard, S. M. (1971). *The transparent self*. New York: Van Nostrand Reinhold.
- Kottler, J. A. (1993). *On being a therapist*. San Francisco: Jossey-Bass.
- Jacobs, E. (1992). *Creative counseling techniques: An illustrated guide*. Odessa, FL: Psychological Assessment Resources, Inc.
- Lynn, S. J. & Garske, J. P. (Eds.). (1985). *Contemporary psychotherapies: Models and methods*. Columbus, OH: Charles E. Merrill Publishing Company.
- McEachern, A., G., Aluede, O., & Kenny, M. (2008). Emotional abuse in the classroom: Implications and interventions for counselors. *Journal of Counseling and Development*, 86, (1), 3 - 10.
- Mosloch, C. (1982). *Burnout: The cost of caring*. Englewood Cliffs, NJ: Prentice-Hall, Inc.
- Murphy, B.C. & Dillon, C. (1998). *Interviewing in action: Process and practice*. Pacific Grove: Brooks/Cole.
- Sacks, O. (1985). *The man who mistook his wife for a hat*. New York: Harper & Row, Publishers.
- Sue, D. W. & Sue, D. (2008). *Counseling the culturally diverse: Theory and practice, 5th Edition*. New York, NY: John Wiley and Sons..

XV. Course Calendar

PSYC 5991.61: Tentative Schedule:

Each week, a portion of class time will be spent in lecture and discussion of the following topics with the latter portion of class spent in case discussion, formal case presentation by students, an other relevant clinical discussions related to students' field experiences.

Week	Topics	Assignment/Assessment with Session Due
1	Role and function of internship student within the community, professionalism, handling conflicts within internship, contracts and other required documentation	Names and contact information of sites and supervisors
2	Case Presentation: Formal and Informal. A. Identifying Information b. Presenting Problems/Referral Source c. Behavioral Observations d. Mental Status Examination Case Presentation (Continued) a. Analysis of the Problem b. Treatment Goals c. Course of treatment d. Recommendations	Initial documentation due: 1) Letter of Intent 2) Resume 3) Site Supervisor Information 4) Contract 5) Counseling Site Registration a) A description of the site, including basic demographics, types of services offered, etc. 6) Goals of Internship Experience 7) Schedule for how goals will be met a) Behavioral Objectives (exactly what will you do to accomplish your goals)
3	Role in Disasters and other Trauma-causing events	Check weekly logs for accuracy and completeness
4	Consultation Theory and Application in the Clinical Mental Health Setting	
5	Barriers and Enhancements to Academic Performance; Developmental Issues	Case Presentations
6	Written Case Reports; Suicidal Risk Assessment; Child Abuse	First Case Report Due
7	Confidentiality and the Limits of Confidentiality; Crisis Intervention	Case Presentations
8	Mental Status Exam and Biopsychosocial history	Case Presentations
9	Multicultural Competence; Case Conceptualization	Second Case Report Due
10	Ethical and Legal Issues for Working with Children and Adolescents in the Community	Case Presentations
11	Group Counseling	Case Presentations
12	Environmental Conditions/Systemic Issues: Marital and Family Issues	Case Presentations
13	Termination Issues	Final Case Report Due
14	Processing the Internship Experience, Professional Organizations, Continued Professional Developments, Credentialing	Documentation book due
15	Individual Meetings	

CHECKLIST FOR PORTFOLIO AND FINAL DOCUMENTS

Packet 1: Documents to be submitted in a spiral bound portfolio for student file

- _____ Portfolio (*School or Clinical Mental Health Counseling*)
- _____ Scoring Guide (*Insert appropriate School or Clinical Mental Health Counseling Portfolio Scoring Guide*)
- _____ Title Page (*Candidate's name, program, admittance & graduation, & university name*)
- _____ Table of Contents (*Consistent with tabbing of major categories used to organize portfolio*)
- _____ Resume
- _____ State testing results (*School Track only - Type 73 and Basic Skills*)
- _____ Introduction (*Describe setting, population, and your reason for choosing site*)
- _____ Philosophy/Theoretical Orientation (*Describe your own personal counseling philosophy and orientation*)
- _____ Assessment of Developmental Counseling Program Scoring Guide (*School Track only*)
- _____ Site Registration Form
- _____ Signed Weekly Logs
- _____ Signed Log Summary Sheet (*Check for adequate direct and indirect hours*)
- _____ Practicum/Internship Student Evaluation by site supervisor (*First Copy*)
- _____ Clinical Supervision and Consultation Record (*To be completed by Site Supervisor*)
- _____ Supervision Contract (s) for Each Site
- _____ Signed HIPPA Form

Packet 2: Documents to submitted separately in a large envelope and not bound together

DOCUMENTS TO BE COMPLETED BY SITE SUPERVISOR

- _____ Field Supervisor Information Form (s) (*2 Page form*)
- _____ Practicum/Internship Student Evaluation by site supervisor (*Second Copy*)
- _____ Clinical Supervision and Consultation Record (*Second Copy*)

DOCUMENTS TO BE COMPLETED BY STUDENT

- _____ Case Studies (*Write number completed*)
- _____ Tapes of counseling Sessions (*Write number submitted*)
- _____ Site Evaluation Form (s)
- _____ Site Supervisor Evaluation Form (s) (*2 page form*)
- _____ University Supervisor Evaluation Form (*Should be returned in attached sealed envelope*)
- _____ Alumni Survey Form (*Internship students only - returned in attached sealed envelope*)

Note: Student is responsible for making additional copies of documents as needed

Review of Submitted Work Completed:

_____ Student

_____ Date

_____ University Supervisor

_____ Date

Review Sheet for Part II of the Comprehensive Examination

How to improve your performance:

1. Write complete sentences, not bullets.
2. Watch the time and allot about one hour per question.
3. Make a quick outline with critical details noted while first reading the case study, but don't spend more than 15 minutes. Your notes will not be graded.
4. Read the questions carefully. Periodically re-read the question to be sure you are focused correctly. Make sure that you are not simply repeating the case study.
5. Number your answers and complete them in order. They are graded separately.
6. Practice actually writing about a case study with time limits.

Recommendations for preparation:

1. Practice case conceptualization with case studies. Books containing case studies are usually required for Abnormal Psychology, but stop reading before the section on case conceptualization. Analyze the problem and the underlying dynamics through a formal case conceptualization. Review the background information for important life details relevant to the problem. Develop a comprehensive treatment plan specific to the problem and informed from a theoretical approach.
2. Review theories of counseling and familiarize yourself with one or more approaches so that you can both conceptualize and plan specific, problem-focused counseling interventions from this approach.
3. Review assessment and how to appropriately interpret assessment results. Be able to identify appropriate assessment tools for specific situations. Be sure to know who can administer different tests.

At a minimum, know the following:

Psychological Assessment:

- I. Cognitive (Ability):
 - A. Intelligence (general, global ability)
 1. Stanford-Binet V (ages 2 –23, Mean = 100, SD = 16)
 2. WISC-IV (ages 6-16, Mean = 100, SD = 15)
Wechsler Intelligence Scale for Children
 3. WAIS-IV (ages 16-74, Mean =100, SD = 15)
Wechsler Adult Intelligence Scale
 4. WPPSI – III (Ages 3 – 7 years 3months; Mean = 100, SD = 15)
Wechsler Preschool and Primary Scale of Intelligence
 5. K-ABC – 2 (ages 2.5 to 12.5; Mean = 100, SD = 15)
Kaufman Assessment Battery for Children

6. KAIT (ages 11 – 85)
Kaufman Adolescence and Adult Intelligence Test
 7. K-BIT – 2 (ages 4 – 90)
Kaufman Brief Intelligence Test
 8. WASI (ages 6 – 89)
 9. Wechsler Abbreviated Intelligence Scale
- B. Achievement (designed to measure the effects of a specific program of instruction or training-used to represent a terminal evaluation of the individual's status at the end of training
Individual – WRAT – 4, WIAT-II; Group - Stanford Achievement Tests, Iowa Test, California Achievement Tests, ISAT, SAT, ACT, etc.
- C. Aptitude (measure the effects of learning under daily living and serve to predict subsequent performance)
Aptitude Tests for creativity, learning a foreign language, manual dexterity, etc.

II. Personality (Emotional)

- A. Structured: (Questionnaires: Strength - more objective; Weakness – people can lie, be defensive, answer in response sets, or give socially desirable responses) questionnaires
1. Millon Clinical Multiaxial Inventory - IV – personality style in terms of source of reinforcement and patterns of coping behavior
 2. MMPI –2 and MMPI- A (Adolescent) – to detect psychopathology, has validity scales (Minnesota Multiphasic Personality Inventory
 3. CPI – California Personality Inventory (3rd Ed.) for use with normal adult populations to assess personality dimensions (e.g., dominance, sociability)
 4. Strong Interest Inventory- interest in different occupations, computer scored
 5. Self-Directed Search - 4th Edition– Self-administered, self-scored, and self-interpreted vocational counseling instrument
 6. Myers-Briggs Type Indicator – for normal population, uses Jung's extroversion-introversion, plus sensing vs. intuiting/thinking vs. judging dimensions)
 7. Children's Depression Inventory –level of depression, hopelessness (ages 7 – 17)
 8. Beck's Depression Inventory - II – level of Depression, hopelessness
- B. Projective (unstructured, taps into the unconscious, poorer reliability and validity than structured tests, but harder to fake false healthy or pathological responses)

Educational Policies: Classroom expectations and procedures will be governed by the policies of Chicago State University

A. *Disclaimer:* Information contained in this syllabus was, to the best knowledge of the instructor, considered correct and complete when distributed for use at the beginning of the semester. However, this syllabus should not be considered a contract between Chicago State University and any student. The instructor reserves the right, acting within the policies and procedures of CSU, to make changes in course content or instructional techniques without notice or obligation.

B. *Academic Honesty:* Students are encouraged and expected, with the assistance of faculty, to conduct themselves in conformance with the highest standards in regard to academic honesty...It is recommended that students seek the advice of instructors as to the proper procedure to avoid such violations.

C. *Plagiarism and Academic Misconduct:* Academic misconduct includes but is not limited to cheating, encouraging academic dishonesty, fabrication, plagiarism, bribes, favors, threats, grade tampering, non-original work, and examination by proxy. Procedures regarding academic misconduct are delineated in "Student Policies and Procedures," article X, section 2. If an incident of academic misconduct occurs, the instructor has the option to notify the student in writing and adjust the grades downward, award a failing grade for the semester, or seek further sanctions against the student.

D. In addition to the policies described above, this course, like other courses in the Counseling program, requires that students maintain absolute confidentiality regarding all personal material revealed in class. Any breach of confidentiality will be considered a serious ethical and academic violation.

E. *Unattended Children:* Unattended children are not allowed in the Harold Washington Hall and other campus buildings. Please consider leaving your child at the CSU Child Care Center (x2556) where they will be safe while you are in class.