

Keiser University
Master of Science
Clinical Mental Health Counseling



Graduate Student Handbook
Summer 2020
1900 W. Commercial Blvd. Suite 100
Fort Lauderdale, Florida 33309

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WELCOME

Dear Counseling Student,

Congratulations on embarking on a career in the counseling profession! You have entered during an exciting time for the field as counselors across the country are witnessing a great deal of growth and development. In the upcoming years, you will be an important part in the lives of others and in the advancement of the counseling profession.

*Hopefully your time at Keiser University will be a journey filled with personal growth, the development of clinical skills, and an increased knowledge related to the counseling field. We hope this is just the first step in what will hopefully be a lifelong pursuit of knowledge and skills. Please read this handbook thoroughly. It is a critical resource for you in your progress as a student in. This is an official point of reference for students regarding the clinical mental health counseling program requirements including **course curriculum descriptions**. Information regarding students and on-site -supervisors' responsibilities when participating in clinical Practicum and Internship.*

***The information in this handbook is your responsibility.** It constitutes our agreement with you for providing your academic training in clinical mental health counseling.*

Thank you for choosing Keiser University. We wish you a warm welcome to the Master of Science in Clinical Mental Health Counseling program!

Sincerely,

The Counseling Faculty

ACCREDITATION

Keiser University has met the standards of accreditation by the following recognized accreditation commissions:

Keiser University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award certificates and degrees at the associate, baccalaureate, masters, specialist, and doctoral levels. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Keiser University. *Please note: Normal inquiries about Keiser University, such as admission requirements, financial aid, educational programs, etc., should be addressed directly to Keiser University and not to the Commission's office. The Commission should be contacted only if there is evidence that appears to support an institution's significant non-compliance with a requirement or standard.*

The Clinical Mental Health Counseling Program is currently seeking accreditation by the Council for the Accreditation of Counseling and Related Educational Programs (CACREP) which is a specialized accrediting body recognized by the Council for Higher Education Accreditation (CHEA). Although CACREP has not formally granted accreditation status to this graduate-level program, the Clinical Mental Health Counseling Program continues to follow the standards set by the Council while in the accreditation process.

No person, in whatever relation with Keiser University, shall be subject to discrimination on the basis of race, color, sex, age, national and ethnic origin, religion, or handicap. Keiser University complies with the provisions of Title VI and Title VII of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; and the Age Discrimination Act of 1967.

This handbook is for information only and does not constitute a contract. Keiser University reserves the right to make necessary changes without further notice in courses, programs or financial charges. Additional specific academic information can be obtained from the Registrar's Office.

INTRODUCTION

Scope of the Student Handbook

The Master of Science in Clinical Mental Health Counseling Student Handbook is designed to assist students in the understanding of important policies and procedures. This handbook is a brief collection of information and policy related to the Clinical Mental Health Counseling program at Keiser University. This includes, but is not limited to, the college catalog, state specific information, student handbook, additional policy statements, and documents pertinent to all aspects of being a counseling student. Therefore, the handbook is a required reference for students enrolled in the program.

The Clinical Mental Health Counseling Program follows Keiser University policies. This manual is intended to supplement the Keiser University Graduate Catalog. Copies of the Graduate School Catalog are available through the Keiser University website at www.keiseruniversity.edu/catalog. All policies pertaining to the Clinical Mental Health Counseling Program should be interpreted in conjunction with that publication. These official documents are revised periodically. All questions or concerns related to degree requirements or program policy should be referred to the Dean of the Graduate School.

In order to ensure a student's successful completion of his or her program, this Handbook must be carefully read, understood, and followed by the student. All students are bound by the policies and program requirements of the Student Handbook and Graduate School Catalog for the year in which they are fully accepted into the program. Students should retain a copy of this handbook as well as the Graduate School Catalog.

Failure to read this handbook does not excuse students from the requirements and regulations described herein.

KEISER UNIVERSITY

Mission Statement

Keiser University is a regionally accredited private career university that provides educational programs at the undergraduate and graduate levels for a diverse student body in traditional, nontraditional and online delivery formats. The main campus is located in Fort Lauderdale, with campuses located throughout the State of Florida and internationally. Through quality teaching, learning, and research, the university is committed to provide students with opportunities to develop the knowledge, understanding, and skills necessary for successful employment. Committed to a “students first” philosophy, Keiser University prepares graduates for careers in business, criminal justice, health care, technology, hospitality, education, and career-focused general studies.

Inherent in the Mission is service to the community. This service includes community partnerships, involvement with various constituencies and various continuing education programs.

Goals

The institutional goals of Keiser University support both the institution’s long-range strategic directions and the institution’s mission. As such, Keiser University seeks to:

1. Continually change, improve and ensure the effectiveness of the University's programs in preparing students for successful careers.
2. Engage and maintain a faculty that is well-qualified academically, possesses current technical and professional knowledge and experience and has the ability to convey this knowledge to students.
3. Improve written and verbal competencies of students as well as analytical and technical skills.
4. Provide facilities that support educational programs and enable students to develop profession-specific skills.
5. Engage and maintain a staff that is caring, provides student support and meets the University’s educational goals and objectives.

6. Attract qualified students of diverse backgrounds.
 - a. Provide a collegiate atmosphere of academic freedom that encourages open exchange of ideas.
 - b. Provide distance learning activities through Web-based courses and degrees. Provide a commitment to research at the doctoral level.

Equal Opportunity Statement

Keiser University's policy of equal opportunity, consistent with Federal policy, is that no person shall, on the grounds of race, creed, color, handicap, national origin, sex, age, political affiliation, sexual orientation, marital status or belief, be excluded from any training, be denied the benefit of training or be subjected to discrimination in any hiring practice or activity of the University.

To ensure continued success in achieving equal opportunity and non-discrimination in all of its programs and departments, Keiser University hereby reaffirms that it is the responsibility of all staff, administration and supervisory personnel to work actively to ensure equal opportunities within their respective departments, as well as to demonstrate a personal and professional commitment to equal opportunity for all persons. Management and supervisory personnel have a responsibility to provide leadership and support for equal opportunity programs.

ORGANIZATION OF THE CLINICAL MENTAL HEALTH COUNSELING PROGRAM

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CLINICAL MENTAL HEALTH COUNSELING PROGRAM

Program Description

The Master of Science in Clinical Mental Health Counseling is designed to provide students with comprehensive preparation for professional practice as a counselor through rigorous coursework and carefully supervised practical experiences in field settings. The program integrates mental health counseling theories and approaches, principles and practices of diagnosis, evidence-based treatments, and strategies for referral, prevention, and advocacy to meet the needs of diverse clients. Graduates will be prepared to assume a variety of positions in the counseling field and be equipped to model the highest standards and ethics of the profession.

Program Mission

The mission of the Clinical Mental Health Counseling program at Keiser University is to provide the highest level of ethical, diagnostic, interpretive skills, and professional competence to prepare well-rounded mental health counselors for independent practice. Graduates are eligible to apply for counseling licensure in clinical mental health, and work in a variety of roles and settings.

Program Goals

The goals of the program are to prepare graduates who demonstrate evidence of being reflective practitioners and critical thinkers who seek to be culturally competent while respecting diverse worldviews, demonstrate self-evaluation and self-reflection strategies, and participate in the ongoing process of interpersonal skill development. Students will develop professional identities as counselors and engage as active members of their communities. In addition, each student will:

1. Cultivate an understanding of the field while developing a professional identity as Clinical Mental Health Counselors
2. Have knowledge of social and cultural foundations.
3. Have knowledge of human growth and development across the lifespan.
4. Have knowledge of diverse social and cultural populations to be effective counselors.
5. Be knowledge of career development and related assessment and evaluation.
6. Be knowledgeable and skillful in counseling and consultation process.
7. Be knowledgeable and understand career development and related factors to the lifespan.

8. Be knowledgeable of individual and group approaches to assessment and evaluation.
9. Be knowledgeable about various research methods and, statistical analysis, needs assessment and program evaluation.
10. Be knowledgeable about the profession of counseling including history, organizational structures, ethics, standards and credentialing.
11. Obtain appropriate state licensure as professional counselors (i.e., LPC).
12. Develop a professional identity through engagement in professional organizations (i.e., ACA).

Program Objectives

The Clinical Mental Health Counseling program enables students to contribute to the profession through independent learning, scholarship, and research. Upon completion of this program, student's will have increased his/her knowledge and demonstrate competency in the areas of:

1. Human growth and development
2. Personal characteristics, professional orientation, and ethical practices of counselors consistent with the American Counseling Association Code of Ethics and state and federal laws that govern the practice of counselors
3. Theoretical approaches to counseling and case conceptualization, including articulation of a personal theory of counseling and an integrative approach to wellness and prevention as a professional counselor
4. Helping relationships and counseling skills and techniques
5. Group dynamics, process, and counseling, including various types of group (i.e., counseling and psychoeducational)
6. Career development and practice that is appropriate to the student's employment setting
7. Multicultural and social justice issues in counseling, including advocating for the profession and diverse client populations
8. Appraisal and assessment, including application of developmental theory
9. Crisis intervention, including skills necessary to communicate and collaborate with, or refer to, multidisciplinary teams of professionals in schools, agencies, and higher education settings
10. Issues in addictions

11. Research and program evaluation methods, including use of research and evaluation methods necessary to identify and critique evidence-based practices and to use data to improve program outcomes, and Clinical Mental Health Counseling specific roles, skills, duties, and issues

Admission Requirements

Admission to the program is based on a review of application materials by the program faculty. Strong applicants show evidence of academic success and potential for success in graduate school, potential success in developing interpersonal relationships in the counseling context, and an openness to personal and professional development.

Students are required to submit the following admission materials. All documents must be submitted prior to the first semester of enrollment.

1. Completed Graduate School Application
2. Official transcripts showing successful completion of a bachelor's or master's degree from a regionally accredited institution.
3. Official Graduate Record Examination (GRE) general test scores, if applicable based on the minimum requirements for admission to the program as stated above. Scores must be from within five years of application.
4. A two- to three-page Personal Statement indicating the applicant's reasons for undertaking graduate study in clinical mental health counseling, personal attributes, and future goals.
5. Three professional letters of recommendation. Letters should be from individuals who can address the applicant's academic and professional potential.
6. Résumé or curriculum vitae.

Minimum requirements for admission include:

- 1) An undergraduate or master's degree in psychology, behavioral science, social work, human development, or a closely related field from a regionally accredited institution. Alternatively, applicants may demonstrate aptitude to work in counseling through at least one year professional, volunteer, or research experience in a mental health or closely related field.
- 2) Evidence of academic success and potential success in graduate school by meeting one of the following:

- a. An overall undergraduate grade point average (GPA) of at least 3.0 on a 4.0 scale from a regionally accredited institution.
 - b. A master's degree with an overall GPA of at least 3.0 on a 4.0 scale or higher from a regionally accredited institution.
 - c. An overall undergraduate GPA of at least 2.7 on a 4.0 scale from a regionally accredited institution and submission of official Graduate Record Exam (GRE) general test scores. GRE scores will be weighed with other application materials to make a determination regarding admission to the program.
- 3) Successful criminal background check.
 - 4) Successful interview with program faculty.

An applicant who meets these requirements is not automatically assured admission. Given the unique nature of the field of counseling, which requires the mastery of cognitive skills and the demonstration of relevant and appropriate interpersonal skills, the faculty retains the right to deny admission to the program for any candidate whose level of interpersonal competence is considered incompatible with that required for effective functioning as a counseling practitioner. This might be evidenced by poor academic performance, inappropriate behavior, or behavior not becoming of a professional counselor or lack of fit between applicant interests and program emphasis.

Program admissions requirements are subject to change. It is the responsibility of the student to assure all admissions materials are submitted prior to the start of the first semester of enrollment.

Academic Advisors

Upon admission to the program, students are assigned a faculty member to be an Academic Advisor. The importance of a graduate student's Academic Advisor cannot be overemphasized. Students and advisors discuss the academic plans; academic requirements; and the department and/or university policies, regulations, and procedures. Students are recommended to meet via email or phone call at least once a semester with their advisor.

Course Schedules

Students are enrolled in courses by their Academic Advisor upon admission to the program and for each term of enrollment. Course offerings may vary and there may be changes to schedules. It is important for students to regularly check the Student Portal and consult with their advisor

regarding their schedule. Further, if a student wishes to change their schedule or withdraw from a course, they are required to speak with their academic advisor before proceeding.

Due to the experiential, competency, and performance-based nature of the courses, students are limited to taking a maximum of three courses per semester. However, if a student believes that he or she can verify a need to take more than three courses, the student should consult with their Academic Advisor, who will determine the appropriateness of the request. If the student is unsatisfied with the Academic Advisor's decision, he or she may petition the Department Chair, in writing, of their situation for approval.

Student Orientation

All students accepted into the Clinical Mental Health Counseling program are required to attend the new student orientation.

Orientation is held three times a year, at the beginning of the Fall, Winter, and Summer semesters in conjunction with the introductory course (MHC501: Foundations of Counseling). The orientation session date and time is announced in the MHC501 Blackboard course room, the announcement is also emailed to students.

The primary objectives of the meeting are to introduce students to program requirements and materials; facilitate good communication and promote student retention; inform new students of their assigned academic advisors; answer questions student may have about the program; and provide a brief introduction to using the online learning platform and navigating the courses.

Time Limit for Completing Program

Students must fulfill all requirements for the M.S. in Clinical Mental Health Counseling within six years of initial enrollment. This time limit applies to all graduate coursework in the program, including the practicum and internship requirements, as well as completion of all required residencies and successful completion of the comprehensive exam requirement.

Students should make every effort to complete their degrees within the time limits established. Students who require an extension on the time limit must submit, in writing, their request to the Department Chair, explaining the need for the extension, as well as the projected timetable for completion of the degree. The Department Chair will share the student's appeal with the Graduate School Dean or Associate Vice Chancellor of Academic Affairs to make a determination on the appeal. The Department Chair will report to the student on the resolution of the appeal.

Technology Competence

Students are expected to have basic computer skills, regular access to a personal computer, and reliable high-speed internet access. All courses are facilitated through the Blackboard learning system. Students may access Blackboard by logging on to:

<http://keiseruniversity.blackboard.com>. The username is the student's Keiser email address; the password is the student's ID number. The Chrome internet browser is considered the most compatible with Blackboard. For technical difficulties, students are encouraged to contact the Blackboard helpdesk at 1-855-412-3720.

All students are required to regularly access and utilize their Keiser student email account. All official correspondence from the University (including emails and announcements from instructors through Blackboard) will be sent only to the student's Keiser email address.

Students are expected to respond to communication from faculty and administrators in a timely fashion.

Students in the Clinical Mental Health Counseling Program (CMHC) are expected to have a home computer or laptop, Internet access, and basic Microsoft Office software (Microsoft Word, PowerPoint, and Excel). In addition, students should develop competencies in the following areas. These competencies are based on the Association for Counselor Education and Supervision (ACES) Technical Competencies.

1. Be able to use productivity software to develop group presentations, letters, and reports.
2. Be able to use such audiovisual equipment as video recorders, audio recorders, projection equipment, video conferencing equipment, and playback units.
3. Be able to use email.
4. Be able to help clients search for various types of counseling-related information via the internet, including information about careers, employment opportunities, educational & training opportunities, financial assistance/scholarships, treatment procedures, and social and personal information.
5. Be able to subscribe, participate in, and sign off counseling related list serves.
6. Be able to access and use counseling related CD-ROM and online data bases.
7. Be knowledgeable of the legal and ethical codes which relate to counseling services via the Internet.
8. Be knowledgeable of the strengths and weaknesses of counseling services provided via the Internet.

9. Be able to use the Internet for finding and using continuing education opportunities in counseling.
10. Be able to evaluate the quality of Internet information.

These competencies meet or exceed the recommendations of the American Counseling Association.

Retention of Course Syllabi

Many state licensure boards require a copy of the syllabus of the actual course taken by an applicant. It is the responsibility of the student to maintain personal copies of course syllabi. Since course content changes from semester to semester in response to new knowledge and practices, neither the faculty nor the Clinical Mental Health Counseling program can guarantee that a current course description and/or syllabus adequately represent a course as it was taught previously.

POLICIES AND PROCEDURES

Background Check Policy

An initial criminal background check is required prior to enrollment in the program. The University reserves the right to deny an application to or continuance in the program for students whose background check reveals a criminal history.

Once the student has been accepted into the program, should the student become involved in criminal activity, in which the initial criminal background clearance status becomes compromised, the student may be withdrawn from the program. Students are required to report any change in their criminal background status to the Department Chair immediately. Failure to promptly notify the Department Chair of offenses occurring after admission shall be grounds for dismissal from the program.

The Clinical Mental Health Counseling program requires students to complete clinical experiences in the practicum and internship courses for hands-on training. It is at the discretion of each practicum and/or internship site to implement a standard protocol regarding student admittance for educational purposes. Students should be prepared to abide by set protocols and incur any associated fees that may arise in the safety screening process to which the individual sites adhere.

Students should be aware that many agencies and credentialing bodies require a criminal background check as a prerequisite for granting licensure or certification to practice as a counselor. Having been convicted of a felony, and some misdemeanors, may prevent the student from being licensed. It is the responsibility of each applicant to research eligibility for the examination, license, and/or certification being sought.

Transfer of Credits

Transfer of course credit is not automatic. A maximum of six graduate semester hours may be transferred from a regionally-accredited institution. The student is required to present the course syllabi and/or other evidence that relates to the content of the course(s). Approval of any transfer credits is at the discretion of the Department Chair.

Acceptance of transfer credits for a course is dependent upon the following provisions:

- a. The student received a grade of B or higher (3.0 on a 4.0 scale) in the course. The course was relevant to the Clinical Mental Health Counseling program curriculum.
- b. The course is listed on an official transcript received by the admissions department and/or the registrar's office.
- c. The course was completed within the six years preceding admission to the program.

Students may not receive transfer credit for MHC660: Practicum in Counseling or MHC661: Internship in Counseling.

Non-Degree Seeking Students

The program prepares students for licensure and/or certification as a professional counselor. As such, students must complete the admissions process and be formally admitted to the program in order to take program area courses.

However, as an exception to this restriction, individuals who already possess a Master's Degree (or above) in counseling and are taking courses toward licensure in Mental Health Counseling may take the following courses as a non-degree seeking student, pending available space after admitted students have been placed in those courses:

MHC555: Psychopathology and Diagnosis

MHC560: Counseling in Community Settings

MHC570: Foundations of Addiction and Addictive Behavior

MHC575: Counseling and Sexuality

If a student who is enrolled as a non-degree seeking student and subsequently wishes to seek a degree, he or she must make application to the program and request a change in status. The student must meet all criteria for graduate admission. If approved, the student may carry forward no more than 12 hours of credit earned as a non-degree student. The same commitment to high standards and professionalism is expected of non-degree seeking students and is a requirement for continued participation.

Ethical and Professional Conduct

Professionalism includes adherence to ethical standards such as those of the American Counseling Association (ACA), the National Board of Certified Counselors (NBCC), and the American Mental Health Counselors Association (AMHCA). The faculty expect students to be knowledgeable of these standards and to act in accord with them. Professionalism also includes appropriate and effective manners of interacting with others, manners of personal conduct and self-presentation, and respect for people, property, and processes.

Students are expected to maintain professional behavior in the classroom. These behaviors include class attendance, active class participation, and successful completion of all class assignments. Course instructors should be kept informed of situations that might affect class performance or completion. Further, students expected to adhere to the Keiser University standards for academic honesty as stated in the Student Code of Conduct and the Graduate Student Catalog.

As a program that includes field experiences in community sites, students are also expected to display professionalism in their practicum and internship experiences. Students should maintain appropriate dress, demeanor, behavior, and dispositions that meet, not only the professional standards, but also those expected by the field site.

If students have any concerns about the appropriateness of their own professional conduct or that of another, they are encouraged to consult with their faculty advisor or the program chair.

Absences

Classes meet in a variety of formats. Students with severe absences (as indicated in the tables below) may be required to retake the course. Students with greater than severe absences will be required to retake the course.

Students are required to contact their instructors regarding absences as soon as possible to make arrangements for any missed course content, assignments, or make-up work. Make-up work for an absence will be at the discretion of the instructor. Some instructors may not allow make-up work due to the nature of the missed work (i.e., experiential class activities, hands-on instruction, etc.). All make-up work must meet the same high academic standards expected of any other assignment.

Instructors may make accommodations for those students who encounter extreme circumstances (e.g., hospitalization or death of an immediate family member). Under these circumstances, supporting documentation may be required.

Late Assignment Guidelines

To avoid late penalty deductions, assignments should be submitted on or prior to the due date. Any work a student submits after the due date is subject to a corresponding point deduction. Work can only be accepted up to 7 days late unless arrangements were made with the instructor. For an extenuating circumstance, a student should not be penalized for late work, but only if he/she contacts the instructor prior to the due date to discuss possible options. When circumstances are beyond the control of the student, an alternate due date will be set.

Note: All work must be submitted by the last day of the class. Late policy does not apply to assignments due in week 16.

Incomplete Grades

“A grade of I (incomplete) is given when circumstances beyond a student’s control prevent completion of course requirements. Students must be in good academic standing and have completed at least 70% of the course work to be eligible for an incomplete. Students must request the incomplete before the last day of the class. All course work must be completed within four weeks. Incompletes must be approved by the instructor, the Academic Program Coordinator, Department Chair and the Dean of graduate studies. If work is not completed within the allotted time, the “I” grade will automatically be changed to an “F”, unless arrangements for extension have been made by the faculty member and approved by the Dean. Incomplete grades are given at the discretion of the instructor and should be documented in writing if they are granted extend time. The highest grade awarded if an incomplete is granted will be a B. If the student does not complete outstanding work by the deadline, the grade

assigned will be an F or grade earned to date, whichever is higher. Students on Probation will not be granted an incomplete.

Academic Integrity

All students are expected to abide by the Keiser University Academic Integrity Policy. Acquiring or providing information dishonestly, plagiarism, conspiracy, fraudulent behavior, fabrication of information, submitting the same work for credit in different courses, facilitating academic dishonesty, falsifying records, clinical misconduct, and/or disclosure of confidential information are all considered violations of academic honesty.

Academic dishonesty will not be tolerated. Plagiarism detection software is integrated into the course. All written assignments will be analyzed by the software and a report will be generated. It is the student's responsibility to review and revise assignments, if needed, prior to assignment due date. Students should review the Student Code of Conduct in the Graduate School Catalog for detailed information and sanctions that may apply.

Endorsement Policy

The Clinical Mental Health Counseling faculty supports and encourages its graduates to become active professionals in the counseling field. At various times, students require an endorsement from the Clinical Mental Health Counseling program or faculty in order to gain employment or credentials. The faculty will endorse graduates only for positions, employment, or credentials which are directly related to the graduate's specialty area and for which the graduate has been prepared. Students should be aware of this policy and should seek endorsement only for employment and credentials for which the relevant training has been successfully completed.

Expectations of Counselors-In-Training (Professionalism)

Throughout your program of study, you will learn about the importance of acting as an ethical counselor. You will learn the American Counseling Association (ACA) Code of Ethics which is based on core values and which will inform your approach to problems.

The mission statement of the ACA is to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity.

The ethical standards articulated in the ACA code of ethics will guide your behavior as you practice counseling. The ACA code of ethics is based on five moral principles: autonomy,

justice, beneficence, nonmaleficence, and fidelity. You will learn about these principles throughout your program of study.

You will also learn that as a professional counselor, you must adhere to the ACA code of ethics, practice within your boundaries of competence, participate in professional counseling associations, be knowledgeable of evidence-based and best practices, and engage in self-care activities as appropriate.

As a counselor-in-training, you will be introduced to the importance of personal development beginning with a personal growth and development group experience. Through this and other opportunities of self-reflection, you will have the opportunity to develop an awareness of your own thoughts and behavior and how they might impact on others.

Americans with Disabilities Act

Any student who self-identifies as a person with a disability requiring auxiliary aids and/or academic adjustments should contact the University's Americans with Disabilities Act (ADA) campus president/coordinator and provide current documentation for assistance. The documentation should state, as determined by an appropriate licensed professional, what reasonable adjustments/accommodations are needed by the student. The auxiliary aids and academic adjustments are provided at no cost to students with disabilities.

Transfer of Credit

All graduate students wishing to transfer graduate credits from other institutions to Keiser University to be applied to the Clinical Mental Health Counseling degree should be aware of the following criteria:

1. Transfer credits must carry a grade of “A” or “B” and must be earned at the graduate level.
2. Transfer credits must be consistent with the program’s curriculum which comprises the required program structure, and they must be judged to be equivalent to the Clinical Mental Health Counseling program coursework. Elective credits must also be comparable to graduate courses consistent with the student’s course of study.
3. No more than twelve (12) credit hours may be transferred into the Clinical Mental Health Counseling program. Exceptions must be approved by the Academic Program Coordinator and/or Department Chair.

PROGRAM OF STUDY

Curriculum

To receive a Master of Science in Clinical Mental Health Counseling, students must earn 60 graduate semester credit hours. Fifty-four of the program hours must be completed through Keiser University. Program requirements are as follows:

Core Counseling Courses (36.0 credit hours)

MHC501	Foundations of Counseling	3.0 credit hours
MHC505	Counseling Across the Lifespan	3.0 credit hours
MHC510	Counseling Skills and Technique	3.0 credit hours
MHC515	Counseling Theories and Practice	3.0 credit hours
MHC520	Ethical and Legal Issues in Counseling	3.0 credit hours
MHC525	Group Theories and Practice	3.0 credit hours
MHC530	Career Counseling	3.0 credit hours
MHC535	Counseling Advocacy with Diverse Populations	3.0 credit hours
MHC540	Crisis Counseling	3.0 credit hours
MHC545	Counseling Intervention and Treatment Planning	3.0 credit hours
MHC550	Assessment in Counseling	3.0 credit hours
RSM610	Research and Program Evaluation	3.0 credit hours

MHC501 is taken in the first semester of the program. Students must successfully complete all core courses prior to enrolling in MHC660.

Specialization Courses (15.0 credit hours)

MHC 555	Psychopathology and Diagnosis	3.0 credit hours
MHC560	Counseling in Community Settings	3.0 credit hours
MHC565	Couples and Family Counseling	3.0 credit hours
MHC570	Foundations of Addiction and Addictive Behavior	3.0 credit hours
MHC575	Counseling and Sexuality	3.0 credit hours

Clinical Experiences (9.0 credit hours)

MHC660	Practicum in Counseling	3.0 credit hours
MHC661	Internship in Counseling (taken final two semesters)	6.0 credit hours

Students take two MHC661 courses after completion of MHC660. MHC661 is taken in the final two semesters of the program.

Courses in the program are 16 weeks in length and held online through the Blackboard learning platform. Courses are generally asynchronous in nature but may require students to meet at certain at certain times for lecture, discussion, group activities, or supervision.

Residency Requirements

Quality distance learning programs present both benefits and challenges for students. A key challenge faced by students and faculty within the program is to find alternative ways to create the personal interaction and connectivity that develops more naturally in the traditional face-to-face classroom course. Residency offers an opportunity for the cohort to gather, meet, and build relationships with one another, faculty and staff, while building a learning community. In addition, residencies provide enriching in-person networking and mentoring opportunities for students with faculty and peers.

The program includes three weekend-long residencies. Students focus on skill development in individual and group counseling, applying knowledge gained in coursework. Students receive individual interaction, direction, and feedback from faculty members, opportunities to share experiences and insights with peers, and preparation for clinical work in practicum and internship settings.

Each residency coincides with one of the required courses (e.g., MHC510, MHC525, and MHC660) and is therefore offered at specific times during the program. When following a typical student program plan, students will come to campus once per semester during the first year of the program and again while completing the practicum experience.

Residency dates and location will be posted early each semester in the Blackboard courses, as well as announced via email. Students are responsible for making their own travel, lodging, and other meal arrangements. Students should budget for the following residency costs:

- a) Transportation
- b) Hotel accommodations
- c) Food cost

Although some students consider bringing their families with them during residency, **this is discouraged**. Students' daily schedules during residency are occupied with many activities that they are required to attend. The coursework is intensive and requires a considerable amount of study and preparation time, and students typically do not find the residency period conducive to being able to spend time with their families.

Attendance of the residency is required and part of the course grade. Students who do not attend all sessions of residency will earn a failing grade in the associated course and will be required to retake the course. Waiving of the residency requirement will not be considered.

Course Descriptions

MHC501 (3.0 credit hours)

Foundations of Counseling

This course provides students with an introduction to the counseling profession. The history, philosophy, and theoretical foundations of the profession, and the scope of practice, credentialing, and other professional issues will be explored. The course provides an overview of the clinical mental health counseling program, the profession, and professional competencies. (Program co- requisite)

MHC505 (3.0 credit hours)*Counseling across the Lifespan*

This course will present theories and research on the nature and needs of individuals at all levels of life span development. Consideration will be given to socio-emotional, intellectual, physical, moral, and spiritual aspects of development. Students will review theoretical frameworks describing optimal human development, as well as the developmental etiology of problematic behaviors that will serve to introduce students to behaviors and concepts relevant to clinical practice with both children and adults.

MHC510 (3.0 credit hours)*Counseling Skills and Techniques*

This course will introduce students to basic counseling skills. Students will gain experience through role play, practice interviews, and videotaped presentations to learn and practice basic counseling skills. Ethical and culturally responsive practices will be emphasized.

MHC515 (3.0 credit hours)*Counseling Theories and Practice*

This course provides students with the theoretical background and therapeutic skills necessary for the practice of counseling. The course will focus on the major approaches to counseling and psychotherapy in current use, including historical foundations, empirical foundations, advantages, and limitations to determine which are most appropriate. Students will also begin to develop a personal theory of counseling.

MHC520 (3.0 credit hours)*Ethical and Legal Issues in Counseling*

This course covers the standards for professional conduct in counseling, including ethical principles and legislation and court decisions affecting professional behavior. Students will examine and apply standards of the counseling profession, including the American Counseling Association (ACA) Ethics and counselor ethical decision-making processes. Case examples, current federal and laws/statutes, ethical codes, and standards on assessment, diagnosis, and placement data will be discussed in relation to counseling a variety of culturally diverse populations in multiple settings.

MHC525 (3.0 credit hours)*Group Theories and Practice*

This course explores leadership styles, group dynamics, and group process necessary to run successful groups. The major group counseling theories will be explored, and group skills will be practiced. Students will engage in a variety of practical application assignments and discussions, focusing on counseling of different types of groups, the efficacy of using group therapy as the treatment method with multicultural and diverse populations, and the stages of group development. The course requires that students gain experience as both a growth group participant and as a co-leader.

MHC530 (3.0 credit hours)*Career Counseling*

This course surveys the major theories of career choice, planning, and development as well as standardized methods of assessing vocational interests and aptitudes. Social, psychological, and economic factors influencing career choice are examined. An emphasis will be placed on individual career counseling skills across diverse populations.

MHC535 (3.0 credit hours)*Counseling and Advocacy with Diverse Populations*

This course addresses cultural diversity and its implications for counseling. It considers the psychological impact of factors such as gender, race, ethnicity and culture, religious preference, socioeconomic status, sexual orientation, and physical disability in a variety of counseling and educational settings. Finally, it reviews counseling issues and advocacy strategies for diverse clients.

MHC540 (3.0 credit hours)*Crisis Counseling*

This course focuses on the personal and systemic impact of crises, disasters, and other trauma-causing events on diverse individuals across the lifespan. Students will explore theory and models applied to crisis situations and will explore emergency management systems and collaboration among schools, agencies, and governmental entities. Students will explore and discuss topics related to counselor competencies, vicarious trauma and counter transference, specific diagnoses, and advocacy. Through contemporary articles and case studies, students will consider and discuss cultural, legal, and ethical issues related to crisis, trauma, and disaster events and response.

MHC545 (3.0 credit hours)*Counseling Intervention and Treatment Planning*

This course prepares students for their roles as counselors in areas of prevention and intervention with specific populations in diverse settings. The course is designed to develop competencies in clinical interviewing, diagnostic assessment, case conceptualization, and treatment planning. Diversity considerations and current models of evidence-based practice will be emphasized. Students will explore therapeutic approaches related to a broad range of mental health issues, aspects of therapeutic alliance, goal-setting, and outcome evaluation. (Prerequisite: MHC515)

MHC550 (3.0 credit hours)*Assessment in Counseling*

This course is designed to provide an overview of principles and application of mental health assessment in a multicultural society. Students will gain an understanding of basic methods of assessment in counseling, to include evaluating, selecting, and using appropriate techniques

and standardized testing methods, and to conduct a thorough, culturally sensitive, and ethically responsible assessment.

MHC555 (3.0 credit hours)

Psychopathology and Diagnosis

This course covers the etiology and presentation of major mental health disorders as classified in the Diagnostic and Statistical Manual of Mental Disorders. Multiple perspectives of clients' emotional and psychological distress, disturbances, and behaviors are considered, while including acknowledgment of client strengths and resilience and the social and cultural context. Additionally, the course introduces students to skills in selecting and implementing appropriate treatment strategies and in case presentation.

MHC560 (3.0 credit hours)

Counseling in Community Settings

This course will cover the history of community psychology, with a focus on the various approaches and techniques used by community counselors across diverse populations. Distinctions between traditional clinical interventions and community interventions are highlighted. Students will also develop strategies to promote client understanding of and access to a variety of community based resources.

MHC565 (3.0 credit hours)

Couple and Family Counseling

This course provides counseling students with the theoretical background and therapeutic skills necessary for therapeutic intervention in families, couples, and systems. Information will be provided on contemporary approaches, ethical considerations and professional issues. Counseling practices for different populations and types of families will be explored.

MHC570 (3.0 credit hours)

Foundations of Addiction and Addictive Behavior

This course provides students with the major theories, concepts, issues, and data in the diagnosis and treatment of addictive behaviors. Students will develop conceptual knowledge, practical skills, and self-awareness concerning the etiology of addiction and its impact across the life-span. Assessment, diagnosis, and treatment of addictions with diversity and advocacy issues will also be explored. (Prerequisite: MHC555)

MHC575 (3.0 credit hours)

Counseling and Sexuality

This course focuses on increasing students' awareness, knowledge, and skills regarding the broad range of issues in the field of counseling when addressing human sexuality issues. Students will develop competence and comfort in addressing sexuality issues in counseling with clients across the developmental spectrum. Students will develop the skills and tools necessary to strengthen positive relational and sexual functioning in a therapeutic setting.

Personal values clarification, sex education, cultural messages, gender role development, and relational patterns will be examined throughout the course. (Prerequisite: MHC505)

MHC660 (3.0 credit hours)

Practicum in Counseling

This supervised practicum experience has a minimum of 100 clock hours over one 16-week semester. The practicum must include 1) at least 40 clock hours of direct service with actual clients that contributes to the development of counseling skills; weekly interaction that averages one hour per week of individual and/or triadic supervision throughout the practicum by a program faculty member or a site supervisor who is working in biweekly consultation with a program faculty member in accordance with the supervision contract; 2) an average of 1 1/2 hours per week of group supervision that is provided on a regular schedule throughout the practicum by a program faculty member or a student supervisor; 3) the development of program-appropriate audio/video recordings for use in supervision or live supervision of the student's interactions with clients; 4) evaluation of the student's counseling performance throughout the practicum, including documentation of a formal evaluation after the student completes the practicum. Site supervisors must have a minimum of a master's degree in counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses, a minimum of two years of pertinent professional experience, and relevant training in counseling supervision. (Prerequisites: MHC501, MHC505, MHC510, MHC515, MHC520, MHC525, MHC530, MHC535, MHC540, MHC545, MHC550, RSM610)

MHC661 (3.0 credit hours total 6.0 credit hours)

Internship in Counseling

This course is taken twice for a minimum of 600-hours of internship experience. Each student's internship includes: 1) at least 240 clock hours of direct service, including experience leading groups; 2) weekly interaction that averages one hour per week of individual and/or triadic supervision throughout the internship, usually performed by the onsite supervisor; 3) an average of 1 1/2 hours per week of group supervision provided on a regular schedule throughout the internship and performed by a program faculty member; 4) the opportunity for the student to become familiar with a variety of professional activities and resources in addition to direct service (e.g., record keeping, assessment instruments, supervision, information and referral, in-service and staff meetings); 5) the opportunity for the student to develop program-appropriate audio/video recordings for use in supervision or to receive live supervision of his or her interactions with clients; 6) evaluation of the student's counseling performance throughout the internship, including documentation of a formal evaluation after the student completes the internship by a program faculty member in consultation with the site supervisor. Site supervisors must have a minimum of a master's degree in counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses, a minimum of two years of pertinent professional experience, and relevant training in counseling supervision. (Prerequisite: MHC660)

RSM610 (3.0 credit hours)*Research and Program Evaluation*

This course provides students with a foundation in the concepts and techniques of hypothesis testing, research design, and analysis as used in counseling research and program design. Students will gain an understanding of qualitative, quantitative, and mixed-methods approaches to research and evaluation, as well as the strengths and limitations of each method. Students will explore the history and theory underlying program evaluation, approaches to evaluation, and techniques used to perform the evaluation and demonstrate program effectiveness.

Incomplete Grades or Grades of “I”

A grade of “I” (Incomplete) is given when circumstances beyond a student’s control prevent completion of course requirements. The student must complete an Incomplete Grade Form which specifies what coursework must be completed within 4 weeks, or as mutually agreed upon (in writing) with the instructor. The grade of “Incomplete” (I) is assigned only when the student submits all required documentation. Approval by the instructor, the Academic Program Coordinator, or Department Chair is required. If work is not completed within the specified length of time, the “I” grade will automatically change to an “F.”

Independent Study

An independent study course refers to an existing course that is scheduled to meet some extraordinary need of the student because he/she is unable to take the course at the scheduled time or must repeat the course. Students making a request for an independent study course should meet with his or her Academic Advisor. The Academic Advisor will then forward the request to the Academic Program Coordinator (APC) who forwards it to the Department Chair and/or Dean of Graduate School for approval.

Orientation

To help students transition into the graduate program, an orientation is held for each incoming cohort. Students will be notified of the date and location of the orientation. Additional orientation will be held during the required Residency. It is important that all incoming students participate in orientation to be introduced to the Mission, Goals and operational procedures of the graduate program.

Textbooks

Students have a few options when it comes to obtaining textbooks for class. Students may choose to order their books from the Keiser University Bookstore and have them delivered to their address on record. Students may also order their books from a vendor of their choosing. The ISBNs for courses can be found at the bookstore or through the professor on record. Some courses use Access Codes for accessing supplemental publisher content. Access codes are available through the bookstore and often through direct contact with the publisher.

Personal Awareness and Experiential Exercises

During a student's program of study, certain exercises and experiential activities will be presented to students to demonstrate clinical techniques and promote the student's self-awareness. These activities are in no way intended as therapy or counseling for the student. Be aware, however, that personal reflection has the potential to evoke certain emotions, memories, or personal insights which may prove unpleasant or disconcerting.

It is recommended that any individual, in preparation for a career as a professional counselor, strongly consider individual or group counseling as a means of resolving issues and facilitating personal growth. Students interested in pursuing counseling are encouraged to contact their Academic Advisor.

Student Evaluations

Students are evaluated using the Graduate Student Review and Recommendation Rubric following their first, second, and fifth semesters. Additional evaluations will be completed under the following circumstances:

1. After completion of MHC 660: Practicum in Counseling
2. Poor academic performance
 - a. When a student receives a "C" or below grade
 - b. On Academic Financial Aid Warning (AFAW) Status
3. Re-entry to the program
4. Concerns surrounding Personal and/or Professional Dispositions

The criteria and possible outcomes of this evaluation can be found in the appendix. on the Graduate Student Review and Recommendation Rubric.

Student Referral

If, at any time, a student realizes that his or her goals have changed and are no longer aligned with the objectives of the Clinical Mental Health Counseling program, program faculty are available to assist that student in exploring alternatives and referrals. For more information or to begin this process, please contact the appropriate the advisor on record.

COMPREHENSIVE EXAMINATION

All Clinical Mental Health Counseling students are required to successfully complete a comprehensive exam as part of their degree requirements. The program uses the Counselor Preparation Comprehensive Examination (CPCE). The CPCE is an objective test developed by the Center for Credentialing and Education (CCE), an affiliate of the National Board for Certified Counselor (NBCC), to assess counseling students' knowledge of counseling information viewed as important by counselor preparation programs. The exam is designed as a summative evaluation that may serve as an educational resource to measure pertinent and professionally-relevant knowledge obtained by students during their program.

Requirements to Sit for the Exam

Students must meet the following requirements prior to taking the CPCE:

Students must have completed all of the core counseling courses (i.e., MHC501, MHC505, MHC510, MHC515, MHC520, MHC525, MHC530, MHC535, MHC540, MHC550, and RSM610).

Students must have a minimum 3.0 grade point average (GPA).

Students must have passed the following clinical courses with a grade of B or higher:

- MHC510: Counseling Skills and Technique
- MHC515: Counseling Theories and Practice
- MHC525: Group Theories and Practice
- MHC545: Counseling Intervention and Treatment Planning

Administration

Each student is expected to take the Counselor Preparation Comprehensive Examination (CPCE) during Internship I. Administration of exams is Pearson Vue utilizing Computer-Based Testing

(CBT). Instructions regarding the exam will be provided during Pre- Practicum and Practicum. The examination cost for taking the CPCE is \$150.00 and will be paid by the student at the time of registration. Graduate Students are encouraged to begin preparing for the CPCE as soon as they begin their Practicum training.

The CPCE is given once per semester and lasts four hours. Exam dates and application deadlines are posted early each semester in Blackboard and are sent via email to all students. Students with disabilities that need accommodations should consult with their Academic Advisor to obtain assistance in arranging individual examination requirements.

Criterion for Passing

Students are provided a score upon completion of the CPCE. However, this is not a pass or fail score.

Students will be notified by the Academic Program Coordinator or Clinical Coordinator of their test results. Each exam score consists of a score for each section, as well as a total score. Pass or fail of the exam is determined by national average.

An overall passing score must satisfy both of the following:

- 1) Achieving a total score that is within one standard deviation of the national mean for total scores.
- 2) Achieving a score that is within one standard deviation of the national mean for each of the eight content areas.

Students **may not** enroll in their second internship courses only after successfully completing the comprehensive exam requirement.

Exam Content and Format

The CPCE consists of 160 multiple-choice items with 20 items per core curriculum area. The exam is administered in whole and not by sections. The eight areas include:

- 1) Human Growth and Development – studies that provide an understanding of the nature and needs of individuals at all developmental levels.
- 2) Social and Cultural Diversity – studies that provide an understanding of issues and trends in a multicultural and diverse society.
- 3) Helping Relationships – studies that provide an understanding of counseling and consultation processes.

- 4) Group Work – studies that provide an understanding of group development, dynamics, counseling theories, group counseling methods and skills, and other group work approaches.
- 5) Career Development – studies that provide an understanding of career development and related life factors.
- 6) Assessment – studies that provide an understanding of individual and group approaches to assessment and evaluation.
- 7) Research and Program Evaluation – studies that provide an understanding of types of research methods, basic statistics, and ethical and legal considerations in research.
- 8) Professional Orientation and Ethical Practice – studies that provide an understanding of all aspects of professional functioning, including history, roles, organizational structures, ethics, standards, and credentialing.

Remediation Procedures

Students who do not pass the first attempt at the CPCE must retake the examination the following semester. Students are required to meet with their academic advisor to develop strategies to prepare to be successful in their second attempt at the exam. These remediation procedures may include such things as:

1. A written action plan to prepare for the exam.
2. Completing an essay exam and/or case study specific to the area(s) that were not passed on the CPCE.
3. Writing a comprehensive paper specific to the missing content. Retaking the course where the failed content was covered.

Students who retake the CPCE will not be allowed to enroll in MHC661: Internship in Counseling (second course) and must be placed on a schedule gap to complete the action plan and retake the exam. The retake will involve the entire exam; the student is responsible for reapplying and repaying for the exam.

If the student is unable to pass the examination after two attempts the student may be granted one oral examination at the discretion of the program chair. If granted, the oral exam will be scheduled by the program chair or clinical coordinator at a mutually agreed upon time in front of the Oral Exam Committee which will be comprised of at least three program faculty.

All students are required to pass the comprehensive exam requirement. Students unable to pass the CPCE or the oral exam, if granted, will be dismissed from the program.

ASSESSMENT OF STUDENT PROGRESS

Faculty members regularly review students for the purposes of retention in the program.

Students may be withdrawn from the program if their academic performance is substandard, if their personal or professional conduct is inappropriate, or if they are unable to demonstrate the essential functions of an effective counselor as defined by the professional societies and research literature.

Specific students may also be reviewed during monthly program faculty meetings when concerns are raised by program faculty and/or other constituents (e.g., internship site supervisors). Faculty members contribute input based on students' academic performance, personal and professional behaviors in the class, ability to get along with peers, openness to feedback and constructive criticism, as well as other aspects of their functioning as future counseling professionals.

Academic Requirements

The following academic standards are required for all students in the program:

1. Students are required to maintain a grade point average (GPA) of at least 3.0 throughout the program.
2. Students are required to earn at least a “B” grade in clinical courses (i.e., MHC510, MHC515, MHC525, MHC545, MHC660, MHC661). Earning lower than a B will require the student to retake the course.
3. Students may have no more than two courses with a grade of “C”. Students who earn a third “C” grade will be required to retake one of the courses.
4. Students are required to regularly attend their courses. Attendance involves logging in and participating in the online course. Students who do not post attendance will be administratively withdrawn from the program. If there is a need to withdraw from a class, students must discuss the situation with their academic advisor for assistance.
5. Students are required to successfully complete at least 67% of the credits they attempt.

Students should review the “Graduate Satisfactory Academic Progress” section of the Graduate School Catalog for further information on minimum academic requirements for graduate students and remediation procedures.

Non-Academic Requirements

In addition to academic performance, students need to demonstrate personal qualities, dispositions, and behaviors that are consistent with becoming an effective counselor. Students need to communicate an awareness of personal values, attitudes, beliefs and behaviors and their influence on the counseling process. Likewise, students must also demonstrate the ability to avoid personal values on clients and a commitment to understanding the diverse backgrounds of others. Finally, students are expected to follow the current ACA Ethical Codes and Standards of Practice.

Procedures for Remediation and/or Dismissal

The following guidelines describe procedures for remediation and/or dismissal from the program for non-academic reasons.

As a result of any evaluation of student progress, three options will be considered:

- a) Student is identified as meeting adequate progress.
- b) Student is recommended for remediation (details to be determined by the faculty)
- c) Student is recommended for dismissal from the program.

Option A

If option (a) is decided upon, no action is taken other than sharing this information individually with the student.

If option (b) or (c) is decided upon, a meeting will be scheduled with the student. This meeting includes selected program, faculty members and the student's advisor. The faculty's concerns and recommendation are clearly explained to the student. The student will be allowed to discuss his or her thoughts, feelings, and reactions.

Option B

If option (b) is decided upon, the student and faculty develop a plan of remediation. This plan will be specific to remediating the identified behaviors, may involve outside parties (e.g.,

counseling professionals), and adherence will be determined by the student's Academic Advisor. Some possible recommendations for remediation include asking the student to participate in personal counseling or some other self-reflective, change-oriented experience; asking the student to take additional coursework to complete the degree; or asking the student to take a leave of absence from the program for a period of time.

If the student fails to adhere to the plan, this may result in dismissal from the program. As such, faculty will help facilitate the student's transition out of the program and, if possible, into a more appropriate area of study. The written remediation plan will state the exact actions the student must take for remediation. This plan will:

1. Advise the student of the faculty's concerns and expectations,
2. Provide the student with an opportunity to correct these concerns, and
3. Make the student aware of the consequences of not following through with the stated plan.
4. The plan will clearly specify what changes in behavior are expected and what time limits are in place.
5. All involved parties will sign the remediation plan and the student will be given a copy of the plan. A copy of the signed plan will be placed in the student's academic file.

Option C

If option (c) is decided upon or option (b) is not completed by the student, faculty members will help facilitate the student's transition out of the program and, if possible, into a more appropriate area of study.

All situations involving any behavior that is in violation of the ACA Code of Ethics and/or the Keiser University Student Code of Conduct will be reported to the University's Ethics Committee.

Appeals Process

Students may appeal any of the above decisions through the appropriate channels beginning with the program chair, who will then follow the procedures for mediating and adjudicating student complaints. Students should follow the policies and procedures for Student Grievances as stated in the Graduate School Catalog.

COUNSELOR LICENSURE AND CERTIFICATION

A counseling license allows counseling professionals with the proper education, experience, and supervision to offer counseling services. The M.S. in Clinical Mental Health Counseling was developed to be in line with national standards for licensure. All states require professional counselors to go through a licensing process; however, the specific rules and regulations vary by state.

Students are strongly encouraged to contact their state licensing board to determine the requirements needed in the state in which they are seeking licensure prior to beginning any counseling program. The program prepares students for, but does not guarantee, licensure in any state. Information about licensure in professional counseling and links to each state's professional counselor licensure board can be obtained from the American Counseling Association.

In general, the following are required to obtain licensure as a professional counselor:

1. A master's degree in counseling, including state-specific coursework and supervised clinical experience
2. Passing scores on one or more national and/or state-specific examinations
3. Supervised post-master's clinical work
4. Completion of additional state-specific continuing education courses
5. Demonstration of appropriate fitness to practice counseling

There are two national examinations. Some states use the National Counselor Examination for Licensure and Certification (NCE), while others require the National Clinical Mental Health Counseling Examination (NCMHCE). Both exams are offered by the National Board of Certified Counselors. Additional information about the exams, including a state board directory, is available on the NBCC website.

National Counselor Exam (NCE)

The National Counselor Examination is a national exam that many states require for licensure. Information regarding sitting for the National Counselor Examination may be found at www.nbcc.org. Students may sit for the exam upon graduation at one of the many Test Centers where it is offered.

Professional Development

In addition to the responsibilities inherent in the curricular demands of the graduate program, students are encouraged to aggressively pursue professional development through attendance and participation at local, regional, state, and national professional conferences and workshops. Program faculty welcome the opportunity to collaborate with students in writing, presentation, and other professional development activities. Graduate students are expected to be active and involved in the professional organizations that pertain to their areas of specialization.

Credentialing

The credentialing of professional counselors takes various forms. Credentialing itself is an umbrella term to cover areas such as licensure, certification, and registry. Please consult the appendix for information about national and state credentials as well as professional associations.

Faculty Endorsement

Program faculty are pleased to provide recommendation and endorsement for program graduates. It should be noted, however, that endorsement will reflect the student's overall competence. Requests for recommendation should be made directly to the program faculty member from whom the endorsement is solicited.

State Requirements for Practicum, Internship, and Licensure

Educational requirements for licensure vary from state to state. Therefore, Graduate Students who intend to seek licensure in any particular state are obligated to review those state's requirements to ensure that they are completing all the necessary educational requirements.

The NBCC website has every state's license requirements listed:

<http://www.nbcc.org/Search/StateBoardDirectory>

Activities Appropriate for Students

Students are encouraged to seek out opportunities that allow for skill development and allow them to gain familiarity with counseling settings. However, students are encouraged to accept positions, paid or volunteer, only for which they are qualified or trained. Students are advised to seek positions where supervision and guidance will be provided.

ACADEMIC HONESTY AND PROFESSIONAL BEHAVIOR

Academic Honesty Policy

The University can best function and accomplish its mission in an atmosphere of high ethical standards. As such, the University expects students to observe all accepted principles of academic honesty. Academic honesty in the advancement of knowledge requires that students respect the integrity of one another's work and recognize the importance of acknowledging and safeguarding the validity of intellectual property. Students are expected to maintain complete honesty and integrity in all academic work attempted while enrolled at the University. Academic dishonesty is a serious violation of the trust upon which an academic community depends. There are different forms of academic dishonesty including, but not limited to, the following:

Acquiring or Providing Information Dishonestly

Using unauthorized notes or other study aids during an examination; using unauthorized technology during an examination; improper storage of prohibited notes, course materials and study aids during an exam such that they are accessible or possible to view; looking at other students' work during an exam or in an assignment where collaboration is not allowed; attempting to communicate with other students in order to get help during an exam or in an assignment where collaboration is not allowed; obtaining an examination prior to its administration; altering graded work and submitting it for re-grading; allowing another person to do one's work and submitting it as one's own; or undertaking any activity intended to obtain an unfair advantage over other students.

Plagiarism

Plagiarism is the deliberate or unintentional use of another's words or ideas without proper citation for which the student claims authorship. It is a policy of Keiser University that students assume responsibility for maintaining honesty in all work submitted for credit and in any other work designated by an instructor of a course. Plagiarism, because it is a form of theft and dishonesty that interferes with the goals of education, must carry severe penalties. Keiser University understands that in some cases students commit acts of plagiarism due to carelessness, ignorance, inexperience and unfamiliarity with academic environment and APA standards, or a general lack of understanding or knowledge of the concepts of academic integrity; offenses of this type are characterized as level one. Offenses characterized by being more serious

in nature and affecting a larger portion of the work submitted are considered level two offenses. Level one and level two plagiarism offenses carry penalties appropriate to the level of offense.

Major Written Projects

All major written projects in Clinical Mental Health Counseling must follow specified guidelines for style and format. Students should refer to the *APA Publications Manual*, 7th Edition.

Deadlines

It is the student's responsibility to be aware of all deadlines applicable to his or her academic program. Information regarding deadline dates can be obtained from the advisor on record.

Conspiracy

Agreeing with one or more persons to commit any act of academic dishonesty.

Fraudulent Behavior

Fraudulent behavior includes sharing one's confidential login information with another person, which can also be an instance of misrepresenting oneself. In addition, allowing another student to participate in class assignments under your name and submitting work under another student's name constitute violations of academic integrity.

Fabrication of Information

Falsifying or inventing any information, citation, or data; using improper methods of collecting or generating data and presenting them as legitimate; misrepresenting oneself or one's status in the University; perpetrating hoaxes unbecoming to students in good standing or potentially damaging to the University's reputation or that of the members of its academic community of students and scholars.

Multiple Submissions

Submitting the same work for credit in two different courses without the instructor's permission. Students may not submit the same work completed for one course in any other course, earning credit for the same work each time.

Facilitating Academic Dishonesty

Aiding another person in an act that violates the standards of academic honesty; allowing other students to look at one's own work during an exam or in an assignment where collaboration is not allowed; providing information, material, or assistance to another person knowing that it may be used in violation of course, departmental, or University academic honesty policies; providing false information in connection with any academic honesty inquiry.

Abuse or Denying Others Access to Information or Resource Materials

Any act that maliciously hinders the use of or access to library or course materials; the removing of pages from books or journals or reserve materials; the removal of books from libraries without formally checking out the items; the intentional hiding of library materials; the refusal to return reserve readings to the library; or obstructing or interfering with another student's academic work. All of these acts are dishonest and harmful to the community.

Falsifying Records and Official Documents

Forging signatures or falsifying information on official academic documents such as drop/add forms, incomplete forms, petitions, letters of permission, or any other official University document.

Sanctions for Violating the Academic Honesty Policy

After determining that the student has violated the Academic Honesty Policy, the instructor may impose one or more of the following sanctions (please note: separate sanctions apply to Plagiarism as described above).

THE PENALTIES ARE AS FOLLOWS:

Academic Integrity Violation:

1. The student must revise and resubmit the assignment for a lower grade.
2. The student is given an additional assignment (i.e., an essay on academic integrity).
3. The student is required to take part in an ethics/academic integrity workshop.
4. The first occurrence results in an automatic "F" for that assignment.
5. The second occurrence results in an automatic "F" for the course.
6. The third occurrence may result in an automatic dismissal from the University.

Plagiarized Assignments

1. The first occurrence of a student turning in plagiarized assignment results in an automatic “F” for the course.
2. The second occurrence of a student turning in plagiarized assignment may result in an automatic dismissal from the University.

All progressive disciplinary measures described above are cumulative throughout the program and not limited to occurrences within a specific course or term. Students who have been dismissed may reapply to Keiser University after remaining out of school for one full semester and advising from the program chair.

Keiser University believes strongly that each student against whom the University is forced to take action has a right to procedural due process where the student has notice and an opportunity to be heard. If the administration has to take disciplinary measures against a student or other action related to the student, the student may appeal the decision to the Grievance Committee. The procedures for the grievance are found in the Keiser University catalog.

Student Retention and Remediation Policy

The Clinical Mental Health Counseling Program is dedicated to student success, growth and remediation. As such, an expectation exists for students to read and follow professional standards set forth by the American Counseling Association Ethical Guidelines, the Keiser University Student Code of Conduct and the Clinical Mental Health Counseling (CMHC) Guidelines for Professional and Academic Behavior. As professionalism is foundational in one’s program of study, behaviors deemed below this standard will involve a remediation process as outlined below.

Level I: This level is utilized for a first behavioral incident of mild to moderate nature. The faculty/staff member reporting a behavioral incident will contact the student and the student’s Advisor, within two weeks of the incident occurrence and cooperatively endeavor to resolve the issue. This may include creating a behavioral rehabilitative contract with the expectation of student initiation, implementation, and documentation. The student will be placed on Program Warning. This contract/plan will be documented by the Advisor utilizing a Remediation Letter. A copy of this contract/plan will be sent to

the student and placed in the student's file. Compliance with the contract/plan will be reviewed by the student and the student's Advisor at the end of the semester.

Level II: This level is utilized for a second behavioral incident OR a first offense of a moderately severe nature. The incident is reported by the faculty/staff member within one week of the incident occurrence to the student's Advisor and the Academic Program Coordinator (APC) or the Department Chair of the Department of Psychology. The APC/Department Chair will contact the student within one week of the incident occurrence, discuss the remediation issue(s) and cooperatively endeavor to resolve in a beneficial manner. This may include creating a behavioral rehabilitative contract with the expectation of student initiation, implementation, and documentation. The student will be placed on Program Warning and his or her program admission status will be returned classified as conditional. This contract/plan will be documented by the APC/Department Chair utilizing a Level II Remediation Letter. A copy of this contract/plan will be sent to the student, placed in the student's file, and sent to the Department Chair and the Dean of the Graduate School. Compliance with the contract/plan will be reviewed by the student, student's Advisor/APC and the Department Chair at the end of the semester, and that review will be discussed with the Dean of the Graduate School and documented in the student's file.

Level III: This level is utilized for a third incident of behavioral misconduct OR an offense of a significantly severe nature. The incident is reported by the faculty/staff member within 3 business days of the incident occurrence to the APC and/or Department Chair. The Department Chair reports the incident to the Dean of the Graduate School. Once the Department Chair has obtained any necessary clarifying documentation, he or she will schedule a meeting with the student, Advisor/APC and the faculty/staff member as appropriate. Following this meeting, the Department Chair in collaboration with the APC and other participating faculty/staff will render a decision. Consequences may include a requirement to obtain professional counseling, a behavioral contract, other activities as required, program warning status, conditional acceptance status or suspension or dismissal from the program and/or university.

Academic Warning

Any student who earns a term GPA of less than 3.0 in a semester will be placed on academic probation. The student will have the next semester to raise his or her semester GPA and cumulative GPA to 3.0 or higher or be subject to suspension from the graduate program. *During the probation term, the student will meet with his or her Academic Advisor to develop a plan to remediate the academic area of concern.* **No student will be allowed to enroll for a Practicum or Internship while on academic warning.**

Two “C” Policy

Students who receive 2 “C”’s while in the program will be placed on academic probation and subject to a review and suspension or termination from the program. During the probation, the student will meet with his or her Academic Advisor to develop a plan to remediate the failing classes (see below for options). If the student receives a GPA less than 3.0 while on an academic probation, consequences may include a requirement to obtain professional counseling, a behavioral contract, other activities as required, program warning status, conditional acceptance status or suspension or dismissal from the program and/or university.

Level I: If Student has earned 1 C the student may elect retake the course to a higher grade.

Level II: If a Student has earned 2 C’s they may elect to retake the course to option higher grade. In addition, the student will be placed on program probation even if the student maintains a 3.0 Student may not fail an additional course.

Level III: If a student has earned more than 2 C’s they will be suspended from the program until they have retaken the course(s). The student is required to meet with their advisor within the proceeding semester to update their schedule. If he or she fails to meet with his or her advisor to make arrangements to retake the course(s) they will be terminated from the program and required to petition for reentry into the program.

Academic Suspension

At the end of the probation semester, students who continue to fall below a cumulative grade

point average of 3.0 will be suspended from the program and University for a semester. Students may appeal their suspension to the Department Chair. Appeals will be reviewed individually according to the following considerations:

1. Mitigating circumstances (health, family, and personal considerations, etc.);
2. The performance trend as reflected in the GPA performance over earlier graduate semesters;
3. Other individual circumstances and considerations.

Readmission after Academic Suspension

Students who are suspended may be readmitted to the Clinical Mental Health Counseling program after a semester through application to the Academic Program Coordinator and/or CMHC admissions committee. The readmission decision will be based upon the student's compliance with conditions of suspension, evidence suggesting potential for improvement, and/or other individual factors. Readmission to the Clinical Mental Health Counseling program is not guaranteed and should not be assumed.

Other Causes for Suspension

Graduate students in the Clinical Mental Health Counseling program who demonstrate a callous disregard for learning as stated in the Student Handbook, may be subject to suspension by the Clinical Mental Health Counseling program or the Academic Affairs Office. In addition, students who commit academic dishonesty may be subject to suspension or expulsion from the University (See Academic Honesty and Professional Behavior). Graduate students in the Clinical Mental Health Counseling program are expected to act in accordance with all federal, state, and local laws as well as adhere to the code of ethics of the American Counseling Association. Students who fail in this responsibility will be subject to disciplinary action up to and including suspension from the program or university.

Student Complaint Policy

Students are encouraged to first discuss any concerns with their instructor. If the concern is not resolved, they should discuss their concerns with the Academic Program Coordinator. If the student feels his/her concerns are still unresolved they should follow the process outlined in the university handbook (see Professional Behavior Policy). In the event a student has a complaint the follow the following are the appropriate steps to follow:

NOTE: This process governs situations in which:

1. Students have issues with their instructor regarding the grading of an assignment; or
2. Students have personal issues with their instructor and/or the conduct of the class.
3. In the event the student is still not satisfied, or the problem has not been resolved, the student should communicate with the academic program coordinator.

Step 1: Student MUST first attempt to resolve the issue with the instructor. All correspondence should be conducted in writing via Keiser University e-mail.

Step 2: If student, for personal reasons, feels they cannot approach the instructor, OR if the student is dissatisfied with the resolution by the instructor in Step 1, the student can appeal to the Department Chair. If a student wishes to protest a grade, the student agrees to accept the grade of the new reviewer. All correspondence will be communicated in writing via Keiser University e- mail with the understanding that the Instructor may be copied on ALL communication between the student and the Department Chair.

Step 3: Student Appeal: If a student is dissatisfied with the resolution by the Department Chair, the student can appeal to the dean. This appeal must be communicated in writing via Keiser University e-mail with the understanding that the department chair AND the instructor may be copied on ALL communication between the student and the Dean. The Department Chair, Dean and Associate Vice Chancellor reserve the right to withhold communication with the instructor due to special circumstances.

The Associate Vice Chancellor's decision is FINAL and will be communicated to the student, the department chair and the instructor in writing via Keiser University email.

Academic Advisor Notification

Academic Advisors may also be copied on all correspondence. If a student starts the complaint process through their advisor, the Academic Advisor will re-route the complaint to the Academic Program Coordinator and the appropriate Department Chair, and a copy of the correspondence may also be sent to the course instructor.

Netiquette

When communicating online, you should always:

1. Treat your instructor(s) with respect, even in email or in any other online communication. *Always use your professors' proper title: Dr. or Prof., or if you are in doubt use Mr. or Ms. (Corollary: Make sure if you use a gender-specific title that you are clear on their gender. Some names can be gender ambiguous. When in doubt, go find a picture of them online.)*
2. Unless specifically invited, don't refer to them by first name. Some will be OK called "Bob" and others will expect to be "Dr. Smith".
3. Be sure to use clear and concise language and always respect your reader's time.
4. Remember that all college level communication should have correct spelling and grammar.
5. Avoid slang terms such as "wassup?" and texting abbreviations such as "u" instead of "you".
6. Use standard fonts that are optimized for online reading (e.g., sans serif) along with a consistent and readable size (12 or 14 pt.)
7. Avoid using the caps lock feature AS IT CAN BE INTERPRETED AS YELLING.
8. Limit and possibly avoid the use of emoticons. Not everyone knows how to interpret them.
9. Be cautious when using humor or sarcasm as tone is sometimes lost in an email or discussion post and your message might be taken literally or offensively.
10. Be careful sharing personal information online (both yours and others).
11. If you are in a health-care course, follow HIPPA guidelines including not sending confidential client information via e-mail or posting online.

Discussion Board "NETIQUETTE" And Guidelines:

When posting on the Discussion Board in your online class, you should:

1. Make posts that are on topic and within the scope of the course material. If necessary, re-read the instructions from your instructor.
2. Take your posts seriously and review and edit your posts before sending. (Would you put sloppy writing with poor grammar in a formal research paper?)

3. Be as brief as possible while still making a thorough comment. Remember this is a discussion area, not a doctoral thesis.
4. Always give proper credit when referencing or quoting another source. (Corollary: Don't copy and paste another Student's post and claim it as original as that is essentially plagiarism.)
5. Be sure to read all messages in a thread before replying.
6. Don't repeat someone else's post without adding something of your own to it. (See corollary above regarding reuse of someone else's post.)
7. Avoid short, generic replies such as, "I agree." You should include why you agree or add to the previous point. The point of a discussion in an online course is to help you and your other Students learn through in-depth consideration of important topics.
8. Always be respectful of others' opinions even when they differ from your own. When you disagree with someone, you should express your differing opinion in a respectful, non-critical way. (Corollary: Do not make personal or insulting remarks.)
9. Be open-minded as that is one of the major points of participating in an open classroom discussion.

Email Netiquette:

When you send an email to your instructor or classmates, you should:

1. Use a clear and descriptive subject line as a way to give them a reason to open your email.
2. Be brief. Don't make the reader have to scroll to read the entire message.
3. Put the most important part at the very beginning. They may not read it to the end.
4. Avoid attachments unless you are sure your recipients can open them. This is especially important with many people using smart -phones and tablet PCs to view email.
5. Sign your message with your name and return e-mail address. Make sure they know how to contact you back.
6. Think before you send the e-mail to more than one person. Does everyone really need to see your message? (Corollary: Be sure you REALLY want everyone to receive your response when you click, "reply all".)
7. Similarly, be sure that the message author intended for the information to be passed along before you click the "forward" button.

8. If you are sending an email while upset or angry, think about not sending it until you've cooled off. A 24-hour resting period is often a good idea.

Security

1. Remember that your password is the only thing protecting you from pranks or more serious harm.
2. Always follow Keiser University guidelines with respect to password security. Keep it private and never share it with anyone.
3. Change your password immediately if you think someone else might know it.
4. Always logout when you are finished using any secured system - especially if you are using a shared computer in a public place.

Overall, you should use common sense when communicating electronically. In the same way that you would present yourself in person to make a positive and constructive impression you should always do the same when taking an online course. Remember that the majority of what we communicate to others is in nonverbal ways (body language, voice inflection, etc.) and all you have in online courses is in a text form. Make sure your digital impression is a clear and positive one.

Social Media

“Social media” is a term used to describe tools and platforms that enable individuals to share ideas and content quickly and easily. Examples of popular social media include, without limitation, texting, blogs and proprietary platforms such as Twitter, Facebook, LinkedIn®, My Space, YouTube and Flickr®, Instagram, SnapChat, etc.

Social media has fundamentally changed the way we communicate. The Clinical Mental Health Counseling program recognizes and embraces the power and use of social media. It is important that students recognize that the use of social media reflects on them in the same manner as their physical behavior. Social media behavior is governed by policies, rules of conduct and etiquette that apply to all other activities involving students. Certain behaviors within the capacity of social media may subject students to disciplinary action if such behaviors raise concern. When posting to any social media site or communicating with others, students should keep in mind how this may reflect on them as a Student and as a future professional. Students should remember that there are policies governing inappropriate conduct such as sexual (or other) harassment, bullying, discrimination, defamation, infringement of copyright and trademark

rights, and unauthorized disclosure of student records. Much of the content and subject matter within in the Keiser Live classroom and in the Clinical Mental Health Counseling online program is sensitive in nature. As such, the Students should keep in mind that this information is to be kept confidential and private by all Students through social media. Students enrolled in the Clinical Mental Health Counseling program are training to become professionals and will work in their community. Therefore, students should carefully consider the accuracy, clarity, and tone of their comments before posting them. Posts on social media sites should be professional in tone and in good taste. Students should utilize good judgement and refrain from posting content that is obscene, pornographic, defamatory, racist, excessively violent, harassing, threatening, bullying or injurious.

Clinical Training

Practicum and Internship

CLINICAL TRAINING IN COUNSELING

In partnership with the faculty or Clinical Coordinator, the student is responsible to secure an official affiliation agreement with a qualified clinical site and on-Site Supervisor. Before student placement is approved, the faculty or Clinical Coordinator and/or the Academic Program Coordinator will determine appropriateness of the clinical site and Site Supervisor based on the ability to:

- Provide students the opportunity to satisfactorily meet the course objectives
- Meet programmatic goals representing progression in their development as Counselors in Training.

The clinical curriculum assists in the development and mastery of knowledge, skills and concepts practice in Clinical Mental Health. Students from micro-counseling skills towards application of macro-counseling skills and application of evidence-based practice.

BEFORE PRACTICUM in COUNSELING

Upon successful completion of clinical courses (e.g., MHC510, MHC515, MHC525, and MHC545) with a grade of B or higher. Eligible students will complete a self-directed pre-practicum course in preparation of clinical experiences. Successful completion of the pre-practicum course is required to matriculate to practicum and internship. Pre-practicum will include information pertaining to finding and securing a site, and professional and ethical expectations for clinical mental health counseling. Upon completion of the pre-practicum course, clinical applications will be submitted via the clinical software program, Supervision Assist, which will be used throughout your clinical experiences for documentation and evaluation of your work and clinical hours.

In the semester before practicum, it is important to identify your site and get all the necessary paperwork completed. The deadline for completing and submitting this paperwork for MHC 660 is the following:

Winter semester	1 st Friday in November
Summer semester	1 st Friday in March
Fall semester	1 st Friday in June

SELECTING A SITE SUPERVISOR

Selected site-supervisors are considered appropriate on the basis of their qualifications and clinical experience to support student achievement of individual course objectives and overall program objectives. In a Collaborative Supervision Model, the site-supervisor facilitates and guides students in meeting practice-based objectives and achieving clinical learning outcomes. The site-supervisor and student work together to arrange times, select appropriate experiences,

and meet goals. The student is expected to exercise initiative, sound judgment, and ethical behavior throughout the clinical experience.

1. Review course outcomes:

It is the responsibility of the student to provide the site-supervisor with any student specific clinical objectives identified for the clinical practicum. The student should also provide the site-supervisor a copy of the course objectives, evaluation criteria and Site-supervisor Agreement.

2. Verify appropriateness of clinical site with Clinical Faculty:

Each student will complete ALL required documents essential to establishing the clinical site and submit these documents to the clinical coordinator and/or via Supervision Assist. The clinical coordinator must approve the site-supervisor arrangement **before** students begins their clinical hours. The clinical faculty in conjunction with the Academic Program Coordinator has final authority over the appropriateness of a clinical site and site-supervisor arrangement.

3. Review site-supervisor qualifications, including verification of site-supervisor credentials:

The site-supervisor must be approved prior to the student beginning the clinical experience. The student should submit the site-supervisor information to the Clinical Coordinator for the Clinical Mental Health Program using the Application for a New Clinical Training Site and/or On-Site Supervisor Form (Appendix). A copy of a recent CV/resume, national certifications, and professional license information is required for the site-supervisor to be approved by the Program Director.

4. Ensure there is a valid contract between Keiser University and the clinical site:

All clinical sites must have a duly executed Affiliation Agreement (Appendix) with Keiser University **prior** to starting clinical experiences at the site. Students are responsible for providing contact information on the site-supervisor Information Form to the clinical coordinator to facilitate the contracting process. Ideally, this information should be submitted to the Clinical Coordinator a minimum of three months in advance of the expected clinical start date.

5. Interview or meet with Site-supervisor, as indicated:

Some site-supervisors require interviews for the student seeking a placement. Students should use this opportunity to demonstrate their commitment to their coursework, knowledge of the client-counselor ethical responsibilities (confidentiality), and willingness to adapt their schedule to the site-supervisor's practice. The purpose of the interview is to:

- a. Provide the site-supervisor with an understanding of the level, ability, and personality of the student.
- b. Enable the site-supervisor to assess if the student would be a "good fit" for the clinical site and the population it serves. Students must put their best foot forward by being prepared with a CV or portfolio describing their professional accomplishments and dress in a professional manner.

PRACTICUM AND INTERNSHIP

Practicum and Internship Clinical Training

The purpose of practicum/internship training courses is to prepare you to perform all of the requirements of a professional mental health counselor. By the end of your final internship, you should be able to conduct a thorough intake interview; conduct ongoing individual and group counseling sessions; write professional session notes, treatment plans, and termination summaries; perform suicidal and homicidal assessments; make appropriate referrals for treatment; consult with other mental health professionals in a professional manner; and be able to discuss your theoretical orientation to counseling and how you utilize this orientation with your clients. Each clinical training course will build on the one before. Let us begin by reviewing what the practicum experience is all about.

The Practicum course is the first opportunity for Graduate Students to apply the skills and knowledge acquired from their coursework. The Graduate Student is expected to find a field placement site where he or she can function in a role similar to that of an employed counselor while under the supervision of an On-Site Supervisor as well as a Group Supervisor. For most of our Graduate Students, the practicum means that you will finally be doing what you enrolled in your graduate program to do. You will conduct actual counseling sessions with real clients, writing real case notes, and consult with licensed professional counselors about the client and your performance.

It is fully expected through this field placement experience that the practicum student will grow in their counseling skills, knowledge, and confidence in large part due to the professional mentoring relationship with their supervisors. Finding a good On-Site Supervisor who is willing to share their knowledge is integral to a “good” clinical experience.

Each Internship course provides Graduate Students with the opportunity to continue to learn and enhance their clinical skills. It is expected that during each internship, the Graduate Student will begin to take more responsibility for client care and will be given the opportunity to experience different populations and different issues. The more varied of an experience a Graduate Student can have, in terms of populations worked with and presenting issues, the better. Graduate Students are encouraged to gain as much clinical experience as possible while enrolled in an internship experience, so that they will be able to practice in more of a generalist way and will discover populations they are more attracted to working with versus populations that are less attractive.

Time Requirement

Each field course requires a specific number of minimum hours for its completion. For MHC660: Practicum in Counseling, students are required to complete at least 100 clock hours over one 16-week semester. At least 40 clock hours of direct service (face-to-face counseling) with actual clients that contributes to the development of counseling skills is required.

Internship students (MHC661) are required to complete experiences that total a minimum of 600 clock hours over two 16-week semesters. At least 240 clock hours of direct service(face-to-face counseling) with actual clients, including individual and group therapy, is required. In addition, internship experiences must provide the opportunity to become familiar with a variety of professional activities and resources in addition to direct services (e.g., record keeping, assessment instruments, supervision, information and referral, in- service and staff meetings). In some states, including Florida, students who do not graduate from a CACREP-accredited program may be required to obtain a greater number of practicum/internship hours to fulfill licensure requirements. *Students are encouraged to obtain a minimum of 1000 hours of clinical experience (of which 40% should be face-to-face client contact hours) to meet various state requirements.*

Practicum and internship are separate, sequential experiences; concurrent registration in MHC660: Practicum in Counseling and MHC661: Internship in Counseling is not permitted.

Further, students cannot accumulate internship hours while they are enrolled in practicum and they cannot accumulate practicum or internship hours prior to the beginning of the semester in which they are enrolled in the practicum or internship class.

Incompletes are not granted for practicum or internship courses. Students who are unable to meet the course requirements must retake the course the following semester.

Supervision

Each student enrolled in a practicum or internship has a site supervisor and a faculty supervisor. The site supervisor is a professional employed in the setting who has volunteered to provide supervision and must meet minimum requirements. Site supervisors must have a minimum of a Master's Degree in counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses, a minimum of two years pertinent professional experience, and relevant training in counseling supervision. The site supervisor has the final authority for all decisions made and/or actions taken about roles and activities while the student is at the clinical site.

Students enrolled in practicum or internship are required to participate in weekly interaction that averages 1 hour per week or individual and/or triadic supervision by a faculty supervisor. In addition, the student is required to participate in an average of 1½ hours per week of group supervision that is provided on a regular schedule throughout the practicum by a faculty supervisor. Interns are required to be under supervision at all times – which means students may not miss supervision meetings with faculty group supervisor or site supervisors for any reason other than unavoidable emergencies, (e.g., hospitalization / death).

Recordings

For all field experiences and some courses, students are required to submit audio and video recordings of their work. To do this, access to a high-quality digital recorder which will produce clear and audible recordings is required. In addition, students must follow informed consent and gain written permission prior to any recording of counseling sessions. Students are required to present both audio and video of actual counseling sessions to their faculty supervisor during the academic term. The recordings must be good quality. Inaudible recordings or recordings of poor quality are not acceptable.

Prerequisites

Enrollment in MHC660: Practicum in Counseling and MHC661: Internship in Counseling is dependent on successful completion of prerequisite coursework and faculty evaluation of readiness for clinical experiences. Evaluations will be completed in Pre-Practicum by the Clinical Coordinator and Academic Advisor.

Counseling students are required to demonstrate a standard level of proficiency in counseling skills throughout their training. Students are evaluated by faculty each semester to ensure they have attained the counseling skill levels needed in order to advance to the next phase of training. Students may be asked to complete additional sections of courses in order to be able to achieve the level of counseling skills required for the field experience.

In addition to faculty evaluation of readiness, to enroll in MHC660: Practicum in Counseling, students must have met the following criteria:

1. Completed the core counseling courses (i.e., MHC501, MHC505, MHC510, MHC515, MHC520, MHC525, MHC530, MHC535, MHC540, MHC545, MHC550, and RSM610) with a minimum overall 3.0 grade point average.
2. Complete the clinical courses (e.g., MHC510, MHC515, MHC525, and MHC545) with a grade of B or higher.
3. Complete all modules in Pre-Practicum located in Blackboard.
4. Complete initial application for practicum site and obtained approval by the program's Clinical Coordinator.
5. Provided the clinical coordinator and faculty supervisor with name and contact information for the site supervisor along with the site supervisor's license/certification and resume.
6. Submitted a signed Memorandum of Understanding (MOU) and obtain approval by the program Clinical Coordinator. The MOU must be signed by an authorized agency and the Assistant Chancellor prior to collecting hours.

To enroll in MHC661: Internship in Counseling, students must have met the following criteria:

1. Completed MHC660: Practicum in Counseling with a grade of B or higher.
2. Obtained approval for their internship site by the program's clinical coordinator.

3. If the student will be at a new site submission of a signed Memorandum of Understanding and obtain approval by the program Clinical Coordinator.
4. Provided the clinical coordinator and faculty supervisor with name and contact information for the site supervisor along with the site supervisor's license/certification and resume.

Professional Liability Insurance

As professionals-in-training, all Clinical Mental Health Counseling students are required to obtain professional liability insurance prior to beginning practicum and internship experiences. Proof of liability insurance is required before the first class of clinical courses. Students who do not provide documentation of liability insurance will be blocked from the course and not eligible to begin the clinical experience.

Students can obtain professional liability insurance through professional organizations such as the American Counseling Association (ACA) or the American Mental Health Counselors Association (AMHCA).

Practicum/Internship in the Workplace

Students sometimes ask to have their job count as their practicum/internship. Because the purpose of practicum/internship is to offer students a learning experience, the requirements for practicum and internship are that the activities performed need to be separate and distinct from their regular employment. This means that their duties for practicum/internship would need to be different from the duties of their job and would need to be performed outside of their regularly scheduled work period. Further, in order to avoid a conflict of interest or dual relationship, the student's practicum/internship supervisor cannot be the same person that supervises their work performance.

All practicum/internship sites must be approved by the program Clinical Coordinator. Students must disclose their intent to complete the field experience at their place of employment and receive approval from the program. Additional documentation may be required of students in this situation to ensure the appropriateness of the experience and supervision.

PRACTICUM & INTERNSHIP CLINICAL TRAINING APPLICATION PROCESS

What Constitutes an Acceptable Clinical Training Site?

The work activities that are to be performed at a clinical training site are the focus of the site review. In order for a clinical training experience to be approved, the Graduate Student must be allowed to directly participate in client care. Graduate Students enrolled in MHC660: Practicum in Counseling or MHC661: Internship in Counseling will participate as primary therapists in services including individual therapy, group therapy, and/or family therapy. Additional activities that qualify for direct service hours, along with other requirements, are outlined in the application materials that Graduate Students submit to the Clinical Coordinator.

It should be noted that simply observing other professionals as they provide the direct services to clients will not count toward the direct service hours requirements in MHC660: Practicum in Counseling or MHC661: Internship in Counseling. Similarly, serving only as an administrative assistant in a mental health agency will not be approved.

At times, students have difficulty finding a training site. Some of the typical place's students seek out a clinical placement that includes the following: comprehensive care agencies, hospitals, residential treatment facilities, private agencies, and correction units. These are all places that routinely employ professional counselors. While these places are perfectly acceptable, students are encouraged to be creative and search out other possible sites/experiences. For example, students have successfully completed their clinical hours by working at nursing homes, churches, funeral homes, senior citizen centers, and other small social services agencies that are too small or lack the funds to hire a professional counselor. While these possibilities are often overlooked as a potential practicum/internship sites, they can be enriching and rewarding experiences.

For a clinical training site to be approved, there must be appropriate chart documentation to support the professional counseling services offered to all clients. Appropriate chart documentation includes informed consent forms, session notes, treatment plans, and termination summaries. Client charts must be securely stored to ensure protection of client records (i.e., HIPAA compliance). Electronic files may also be used if the agency has such a program that meets HIPAA requirements for privacy and protection. All chart documentation completed by a Graduate Student is to be co-signed by the On-Site Supervisor, which documents this supervisory oversight. The On-Site Supervisor signs off on the clients seen at an Affiliating Agency.

Additionally, as reflected in the Supervisor Memorandum of Agreement regarding the monitoring of all cases seen by the Graduate Student, On-Site/Individual Supervisors also conduct observations of the Graduate Student's contact with clients (i.e., live observation of sessions, or watching and/or listening to session recordings). Using recordings to observe sessions can be helpful when the On-Site Supervisor has limited availability at the site for live observations, and this approach mirrors how Group Supervisors evaluate clinical skills during group supervision. Since On-Site Supervisors are professionally responsible and liable for those services conducted under their license, and because they will have to complete an evaluation of the student at the end of each semester, they need to have the opportunity to observe or intervene with the treatment process, at the Supervisor's discretion and as appropriate.

Finally, Graduate Students must also meet with a qualified On-Site Supervisor for individual supervision, one hour per week. Qualifications for On-Site Supervisors are outlined in the application materials submitted to the Clinical Coordinator. The On-Site Supervisor does not necessarily need to be employed by the agency or organization where the Graduate Student will be working. However, the person who will be serving as an On-Site Supervisor needs to have clinical experience working with the proposed population that the Graduate Student will be serving. Please consult with the Clinical Coordinator if there are any questions.

Direct Client Hours

Because the KU Master's program is in Clinical Mental Health Counseling, and in the interest of ensuring competency to practice with a variety of client needs and settings, the majority of a student's direct client service hours during Practicum/Internship need to be conducted in a mental health setting.

Addictions and Rehabilitation Counseling: Definition and Limitations

Graduate Students are sometimes interested in providing rehabilitation counseling to various populations, including the mentally handicapped population. Unfortunately, rehabilitation counseling does not fall under the auspices of the Clinical Mental Health Counseling program. Therefore, Graduate Students will not be able to count such hours toward their direct client service hours requirements. Graduate Students working in addictions counseling may count hours towards direct clients service hours for client who are classified as having a comorbid diagnosis.

Career Counseling: Definition and Limitations

Graduate Students are sometimes interested in providing Career Counseling. Career Counseling is an area of practice most affiliated with the profession of counseling, so it is also important to appreciate this significance. Career Counseling is a very involved professional service that involves the careful administration of career assessment instruments and working with a client through the process of selecting their career path across multiple sessions. Career Counseling is also typically conducted through a career center. Additionally, standard client chart documentation is legally and ethically required to establish and document this practice as a professional counseling service and illustrate the therapeutic relationship (e.g., informed consent documentation, discussion of confidentiality rights, assessment/testing results, session notes, etc.).

Supervision from On-Site Supervisors

Providing professional counseling services requires a professional license. Therefore, in order for Graduate Students to provide counseling services, he or she must do so under the licensed supervision of an appropriate mental health professional. The licensed mental health professional who is providing this supervision is essentially allowing the student to practice under his or her license. This supervisor is accepting professional liability for the work of the Graduate Student. Any time a Graduate Student sees a client, whether it is at his or her Practicum or Internship site, it must be conducted under approved supervision – there must be supervision for every client at every location. Additionally, the appropriate supervisor must sign off on every client. There are no circumstances when a practicum or internship student counsels a client without the supervisor's knowledge.

Minimum Qualification Requirements for On-Site Supervisors

The Clinical Mental Health Counseling program has established that On-Site Supervisors must meet all four of the following qualifications, which align with CACREP standards. Additional qualifications for supervision of Graduate Students may vary by state, as dictated by state law. Please review the “State Requirements for Practicum/Internship and Licensure” section of this Clinical Training Handbook for more specific information respective to each state. Consultation with the Clinical Coordinator is recommended if there are any questions.

- 1) A minimum of a Master's Degree in Counseling or a related profession with equivalent qualifications:

- a) Counseling
 - b) Psychology
 - c) Marriage and Family
 - d) Social Work
 - e) Psychiatry
 - f) Nursing (with psychiatric certification)
- 2) Relevant certifications and/or licenses for professional practice in the state where the professional counseling services are to be conducted with clients:
- a) An appropriate autonomous/independent license (e.g., Florida LPC).
 - b) An appropriate non-autonomous/dependent license (e.g., Kentucky LPCA).
 - i) If holding a non-autonomous/dependent license, then the On-Site Supervisor will need to be practicing under the licensed supervision of someone holding an autonomous/independent license.
- 3) A minimum of two years of pertinent professional experience in mental health counseling (including practicum or internship training during graduate school).
- 4) Relevant training in counseling supervision.
- a) A supplemental training video to support this supervision training requirement can also be viewed at: [WY1MS00M2E2LTk2MzMtNTUwNTAyMjUzMGNj/edit?usp=sharing](https://www.youtube.com/watch?v=WY1MS00M2E2&list=PLTk2MzMtNTUwNTAyMjUzMGNj/edit?usp=sharing)

Below are a couple of commonly-questioned credentials and their approval statuses:

- Certified Alcohol and Drug Counselor (CADC)
 - There are some CADC's that do not have Master's degrees. However, a Master's degree in counseling or a related profession with equivalent qualifications would be required for them to serve as an On-Site Supervisor.
 - With a qualifying Master's degree, a CADC can serve as an On-Site Supervisor in those instances where the client being served is dealing with a substance abuse issue.
- Certificate for Guidance Counselor
 - While the Certificate for Guidance Counselor does require a Master's degree, the "Certificate for Guidance Counselor" is not an appropriate certification and/or license for professional practice, which CACREP requires.
 - The most appropriate license for a Certified Guidance Counselor to hold is a license in Professional Counseling (i.e., LPC or LPCC).

- If a Certified Guidance Counselor is also licensed as a LPC or LPCC, then they can serve as an On-Site Supervisor.

Resume Requirements for On-Site Supervisors

Ideally, the On-Site Supervisor will be able to provide a current resume. However, sometimes On-Site Supervisors work at agencies for many years and do not keep an updated resume. In cases like these, the On-Site Supervisor will need to provide an abbreviated resume with the following information:

- Name, address, telephone number, and other contact information
- An outline of his/her education including schools attended, degrees earned, and majors associated with the degrees
- Current licensure held
- A summary of his/her most recent clinical work experience
- A summary of his/her most recent supervision experience if relevant

Minimum GPA Requirement for Graduate Students

To participate in either Practicum or Internship, a Graduate Student must have a minimum GPA of 3.0.

Application Materials

Graduate Students applying for starting Practicum, applying for a new/additional site, or applying for a change in On-Site Supervisors must submit all of the application documentation outlined in Appendix of this Clinical Training Handbook to the Clinical Coordinator.

Graduate Students that are applying to continue working at the same site for a subsequent Internship enrollment must submit all of the application documentation outlined in Appendix of this Clinical Training Handbook.

Process for Approving Applications

The Clinical Coordinator will review the student's applications and decide if the proposed clinical training site meets the defined criteria. If approved, that Graduate Student will be prepared to begin his or her Practicum/Internship as soon as the class begins.

Course registrations in Blackboard should reflect "approved applications" for Practicum/Internship. Following the first week of classes and/or throughout the semester, the Clinical Coordinator and/or Academic Program Coordinator will review Blackboard, which will

provide an accurate list of students with approved applications and sites and also help to identify any problems.

DEADLINES FOR APPLICATION SUBMISSIONS AND COMPLETING HOURS

Initial Application Deadlines

Applications for a clinical experience will be given to the Clinical Coordinator at each site for approval by the given deadline. Deadlines for applications are as follows:

Winter semester	1 st Friday in November
Summer semester	1 st Friday in March
Fall semester	1 st Friday in June

If there is a question as to whether or not a proposed clinical training site can be approved, the Clinical Coordinator will work in conjunction with the Academic Program Coordinator to determine the viability of the proposed experience. If further consultation is needed to determine the appropriateness of a proposed site or experience, the Clinical Coordinator will consult with the Academic Program Coordinator.

We understand life happens and plans change. If that is the case, we the Clinical Coordinator has the option to extend the deadline for Acquiring an Approved Practicum/Internship Site. This extension may not exceed the end of the first week of classes each semester. If a Graduate Student does not have an approved Practicum/Internship site by the end of the first week of classes, then they will need to immediately withdraw from the course. This deadline is also the deadline for withdrawing to avoid tuition charges. Exceptions may be approved by the Academic Program Coordinator for those students who encounter extreme circumstances (e.g., hospitalization or death of an immediate family member). Under these circumstances, supporting documentation may be required.

Course registrations in Blackboard will reflect “approved applications” for Practicum/Internship. Following the first week of classes, the Clinical Coordinator and/or Academic Program Coordinator will review Blackboard, which will provide an accurate list of students with approved applications and sites and also help to identify any problems.

Final Deadline for Completing Each Semester's Practicum/Internship Hours

In order to continue enrollment in the next semester's Internship course, all Practicum/Internship hours for any semester must be completed, approved and submitted by the last day of final exams for that semester and delivery format (evening, community campus/extended, online).

In the event of an extenuating circumstance, e.g., hospitalization or death of an immediate family member, the Graduate Student may request an incomplete grade. The course instructor has the discretion to issue an incomplete grade subject to approval. If a Graduate Student receives an incomplete grade and an extension is granted, it would be for a maximum of one week. If all course requirements, including submission of approved hours, are not completed by the end of that one-week extension, then the Graduate Student's final course grade will be calculated based on the completed work submitted by that date and according to the course syllabus.

Any Graduate Student who has failed to submit complete and approved Practicum/Internship hours by the deadline to do so may not continue enrollment in, and must immediately withdraw from, the following semester's Internship course.

Beginning to Count Hours: First-Time Practicum and Internship Enrollment

In most cases, Graduate Students with an approved Application (see Appendix) will be allowed to begin counting their hours toward their course requirements on the **first day of the semester**. Graduate Students are not allowed to "bank hours" from a previous semester toward the next semester's hours requirements, even if the previous semester's hours are completed early. Each course's hours requirements are the minimum required for each course. Some Graduate Students may desire to do so depending on varying state requirements or personal aspirations. However, Graduate Students may not accumulate more than the minimum required hours without prior approval from the Clinical Coordinator and the Academic Program Coordinator. It is always recommended that Graduate Students document all of their hours worked each semester, including those beyond the minimum course requirements.

REQUIREMENTS FOR PRACTICUM and INTERNSHIP TRAINING

Direct Client Service versus Administrative or Supervision hours

Descriptions for Direct Client Service activities versus other activities are outlined in the application materials found in Appendix of this Clinical Training Handbook. Please consult with the Clinical Coordinator if there are any questions. Additionally, each Graduate Student enrolled

in a Practicum or Internship course is required to maintain a Practicum and Internship Hours Log. If a Graduate Student has multiple sites, then a separate Hours Log (i.e., separate Excel document) needs to be completed for each site. These Hours Logs must document the minimum totals for numbers of hours earned in each course, which are also indicated in the student's syllabus for each course:

- MHC 660 Practicum: 100 Total hours with 40 Direct Client Service hours.
- MHC 661 Internship I and II: 300 Total hours with 120 Direct Client Service hours per experience.

Administrative or Supervision hours, for the purpose of fulfilling the course requirements, are defined by an activity, not a location. This means that Administrative or Supervision hours can be accumulated at a place separate from the Affiliating Agency if it is approved by the Clinical Coordinator. On the other hand, if an agreement is entered into with an Affiliating Agency that specifies a certain amount of time the Graduate Student will spend at that agency, e.g., 10 hours per week, then the Graduate Student is obligated to spend that time even if doing so will result in the accumulation of more Administrative or Supervision hours than is needed. Fulfilling the expectations between the Affiliating Agency and the Graduate Student, at the time each party entered the Memorandum of Agreement, will guide the Graduate Student's obligations. Graduate Students are not free to unilaterally change their duties or obligations just because the Graduate Student may have accumulated all the hours needed to fulfill their course requirements.

Regarding Supervision hours, Graduate Students will:

1. Participate in individual, one-on-one supervision, or triadic supervision* (two supervisees with one supervisor), one hour per week with the On-Site Supervisor; and
2. Engage in group supervision for an average of one and one half hours per week throughout the semester with the Group Supervisor.

*Please note that triadic supervision during Practicum/Internship may not be permitted by some state laws, including Indiana.

Minimum Individual and Group Hours for Clinical Experiences

The Clinical Mental Health Counseling program requires that each student, during either Practicum or Internship, lead or co-lead a counseling or psychoeducational group. (CACREP, 2016 Standard 3.E.).

Practicum and Internship Hours Log

To log your clinical training hours, you will use a digital account. There are six (6) hour categories to log clinical training hours:

- 1) Administrative Hours;
- 2) Direct Family Client Hours;
- 3) Direct Group Client Hours;
- 4) Direct Individual Client Hours;
- 5) Group Supervision Hours; and,
- 6) Individual Supervision Hours.

Recording Client Sessions

Graduate Students enrolled in a practicum or internship course are required to record **real client** sessions to present to the course instructor and other course members. These recordings are to be viewed in class and are to be critiqued by both the course instructor and the other members of the course. Doing so meets the CACREP Standard that says, “The development of program-appropriate audio/video recordings for use in supervision or live supervision of the student’s interactions with clients” (CACREP 2016 Standard 3.B.).

If the practicum or internship student is not able to tape a client session for use in supervision, the student has three options:

1. Find another site that does allow recording
2. Have the On-Site supervisor provide live supervision and complete the Live Supervision Evaluation form
3. Have the Group Supervisor attend a live session at the clinical site

CLINICAL POLICIES AND PROCEDURES

Prohibited Clients

Graduate Students are not allowed to use fellow Graduate Students, friends, family members, neighbors, etc. for their Practicum/Internship session recordings. Similarly, Graduate Students are not allowed to conduct Practicum/Internship sessions with a faculty member, or other staff members. These would be unethical due to the “dual relationships” that would exist. The recordings for Practicum and Internship are to be of **real** sessions with **real** clients.

Prohibited Session Locations

If a Graduate Student works at an agency that does not allow recording sessions, then those clients are not to be taken outside of the agency to record a session elsewhere (e.g., client's home, student's home, another agency). Clients are to receive services only at their respective agencies.

Professionalism

While it is difficult (and hopefully unnecessary) to define and elucidate all aspects of professional conduct here, a few specific guidelines are offered.

1. Please don't talk about clients in the halls, waiting area, or other public area. Client information is to remain confidential and is to be discussed in supervision and consultation only.
2. Please dress professionally, that is, no sport, casual, or provocative clothing. If you're unsure about what constitutes appropriate dress or how it affects the delivery of effective service, please discuss this with your On-Site Supervisor or Group Supervisor.
3. Please keep doors to outside halls closed and locked in order to maintain security of client materials.
4. Please familiarize yourself with the procedures in this Handbook and of your site and follow them at all times.

Apart from reviewing the ACA Code of Ethics and Standards of Practice, be sure to schedule a time for your On-Site Supervisor to orient you to the expectations of your site.

Clinical Misconduct

Dishonesty in the clinical setting includes but is not limited to misrepresenting completion of clinical hours or assignments; falsification of client records; fabrication of client experiences; failure to report omission of, or error in, assessments, treatments or medications; and appropriation/stealing of facility, client, staff, visitor, and/or student property.

Disclosure of Confidential Information

A high, responsible standard of conduct and professionalism is expected from each student. Students are personally accountable for the way in which client information and other confidential information in clinical facilities is utilized. Confidential information is never to be

discussed with anyone other than those directly involved in the care of the client or in the legitimate use of other confidential agency information. Those having access to client, salary, or associate information should never browse such information out of “curiosity.” It is to be used and accessed only for legitimate, clinical/learning purposes.

A breach in confidentiality which involves discussing and/or releasing confidential client or facility information, or obtaining unauthorized system access, will lead to disciplinary action from Keiser University.

Each student must seriously evaluate his/her daily use of confidential client or facility information to assure its proper use. When in doubt, students should seek clarification or direction from their immediate supervisor.

Confidentiality of Recorded Client Sessions

During practicum and both semesters of internship, you will be required to present real client cases to your group supervision section. It is imperative that Graduate Students guard the confidentiality of the recordings of these client sessions. These recordings are the same as client session notes and should be handled with extreme caution and sensitivity. It is imperative that client session recordings be kept in a safe locked location until the time of the presentation to the group supervision class. Once the session is reviewed, the recording should be destroyed.

Students must maintain HIPPA requirements with the confidentiality of all client records and information they come in contact with at a clinical education site or at the University as part of their educational process.

1. The student must follow all state and federal statutes and regulations regarding client information.
2. The student must follow the clinical education site’s policies and procedures regarding client records and information.
3. When a student must use a client’s medical and or past mental health information, the student must use it properly and in the correct setting.
4. The student must not disclose any of a client’s information to a non-provider. The provider must be involved with the client for the student to provide the client’s information.

5. Failure of the student to follow state and federal statutes and regulations and improperly using confidential client medical record information may cause the student to be withdrawn from the CMHC Program.

Falsifying Records and Official Documents

Forging signatures or falsifying information on official academic documents such as drop/add forms, incomplete forms, petitions, letters of permission, or any other official University document.

Documentation Due at the End of Each Semester

A variety of documentation is due at the end of each semester. See Appendix for more information.

Simultaneous/Multiple Practicum and/or Internship Enrollments

Graduate Students should plan to enroll in only one clinical training course of Practicum or Internship, per semester. Graduate Students who do not follow the planned sequence for Practicum and Internship courses for any reason risk delaying their graduation. Exceptions may be approved by Clinical Coordinator and Academic Program Coordinator for those students who encounter extreme circumstances (e.g., hospitalization or death of an immediate family member). Under these circumstances, supporting documentation may be required.

Additionally, it should be considered that some states (e.g., Indiana) will not recognize simultaneous/concurrent Practicum and/or Internship enrollments when applying for licensure, which is another reason to avoid this.

Exposure Incident Policy

Occupational Exposure is defined as a skin, eye, mucous membrane, or parenteral contact (i.e., needle stick) with blood or other potentially infectious materials that may result from the performance of an employee's/student duties.

Reporting

Incident reporting: Should an exposure incident occur during a student's clinical experience; the student should immediately inform the on-site-supervisor and the KU Clinical Faculty. Appropriate action and follow up will be initiated by the Department Chair for Master of Science in Clinical Mental Health Counseling (CMHC) Program upon receipt of a written incident report.

Medical Care

1. The student will wash the exposed area immediately with soap and water.
2. The student will be advised to seek medical attention within 24 hours of the incident.
3. The student should see a primary care provider and have the necessary testing, evaluation, and follow-up performed. If the student does not have a primary care provider available, the student should seek care in an Urgent Care or Emergency Care facility where testing, evaluation, and follow-up can be done.
4. During the student's visit with the healthcare provider, a baseline blood sample may be collected immediately following the incident with subsequent periodic samples taken at a later date. The results of the student's blood test are confidential and will be known only to the contacting healthcare provider and the exposed student.
5. Counseling and other features of post exposure evaluation may be offered whether or not the student elects to have baseline HIV/HBV/HCV serological testing.
6. All costs are assumed by the student

Directions for Completion of Incident/Accident Report

1. The student will report any student accident or incident to the on-site-supervisor and to the KU Clinical Faculty. The Clinical Faculty will notify the Academic Program Coordinator and Department Chair. The Department Chair will notify the Dean of the Graduate School and complete the written report within twenty-four (24) hours.
2. The Dean will review the report for completeness and any needed follow-up before the Department Chair forwards the original and copies to the Campus Vice President.
3. NOTE: "On duty" means from the time you started at the clinical site or class and the time you left, and/or any other time you might be somewhere on Keiser University business.
4. ALL INCIDENT REPORTS MUST BE COMPLETED WITHIN 24-HOURS OF INCIDENT.

Professional Liability Insurance

Graduate Students must obtain professional liability insurance before they can begin any Practicum or Internship training experience. It is important that you understand that you must maintain a liability insurance policy throughout your Practicum and Internship enrollments. Failure to maintain a liability insurance policy will result in you not being covered if something should happen and a lawsuit is brought against you. It is also your responsibility to make sure that a current copy of your **actual professional liability insurance policy statement** has been submitted to your Group Supervisor each semester and uploaded into the digital documentation

program. A simple verification of purchase for policies (payment receipt) does not count as proof of liability insurance coverage.

Additionally, since American Counseling Association membership is a requirement of Graduate Students, an attractive feature of this membership for students is that they automatically receive professional liability insurance (see below).

The following information is taken from the American Counseling Association Website:

“The ACA Student membership now includes liability insurance to ACA student members enrolled and engaged in a master's degree counseling curriculum at a post-secondary institution. Coverage is solely while performing counseling services (e.g. practicum and internship) related to such curriculum.”

However, you may obtain your professional liability insurance from any company you choose. Professional liability insurance policies can be purchased from the American Counseling Association website at www.counseling.org or the Healthcare Providers Service Organization at www.hpsso.com.

Professional liability insurance should be obtained at least two months before beginning your Practicum enrollment. Frequently, it takes several weeks for companies to process applications, so it is important to act early.

Ethical Standards

Practicum and Internship functions as a professional setting with a professional staff and real clients. Therefore, professional and ethical conduct on your part is required for your participation in Practicum and Internship. Toward that end, Graduate Students adhere to the professional ethics of the counseling professions as advocated by the American Counseling Association. Please familiarize yourself with those standards and consider them binding to your involvement in Practicum/Internship. A copy of the 2014 ACA Code of Ethics can be found at the following link: <http://www.counseling.org/knowledge-center/ethics>

In addition to the ACA Code of Ethics, other ethical rules for Practicum and Internship are listed below. Each Practicum/Internship site will have its own set of policies and procedures. It is your responsibility to obtain and understand these policies.

1. Video and material from client files are never to be discussed or shown to anyone other than your supervisor, instructor, or in class as directed by your instructor. Seek permission from your On-Site Supervisor before discussing a case in class.

2. Information about clients is never requested or released without the client's specific written consent, a copy of which must be kept in the client's file. In the case of child clients, a parent or guardian must authorize such action. An exception to this rule is made when it is suspected that the client may be a danger to self or others. The decision to breach the client's confidentiality is never to be made by the Graduate Student alone. If the need arises, discuss it in detail with your On-Site Supervisor. Clients need to be advised of these limits to confidentiality during the intake interview. Clients who are at risk of harm to self or others may not be appropriate for Graduate Students and may need to be referred to more advanced practitioners.
3. All counseling documents must be reviewed by the On-Site Supervisor or an appropriate designee.

RECOMMENDATIONS FOR ONLINE STUDENTS USING WIRELESS TECHNOLOGY

The Clinical Mental Health Counseling Online program would like to identify some best practices for students when connecting to an online Practicum or Internship course using wireless technology.

1. Best practice would have a student connect to the course through Adobe Connect using a secured Wi-Fi connection. Adobe Connect is SSL encrypted which should protect against any kind of intrusion regardless of the Wi-Fi.
2. Students should avoid using an unprotected Wi-Fi network. A Wi-Fi network is protected if it requires a password to log on.
3. If a protected Wi-Fi network is not available, students should consider using their cell phone as a personal hotspot. The student's personal hotspot should be password protected.
4. When participating in supervision discussions online, student should use language that de-identifies clients as much as possible.
5. Students should find a private location when participating in online practicum or internship online course discussions.
6. Students should use headphones or a headset with a microphone to avoid anyone, even family, from overhearing the conversation.
7. Recording any part of an online discussion is expressly prohibited.

TELEMENTAL HEALTH FOR PRACTICUM AND INTERNSHIP

Keiser University is committed to the continued education and field experience of our students enrolled in the Clinical Mental Health Counseling program. In the event students are unable to work at the approved site and they have the opportunity to continue their clinical experience students may apply to continue practicum or internship utilizing telehealth. Students and on-site-supervisor will need to adhere to the following:

- a. The student has an established site.
- b. The student has a qualified supervisor and maintains the same qualified supervisor for the duration of the application (site).
- c. The student site has a written telehealth protocol and safety plan in place.
- d. The supervisor be properly trained by the sites or other outside sources in telehealth.
- e. The current site and qualified supervisor have a provision in place that the qualified supervisor will be readily available during the electronic therapy session: and
- f. The student and the client have an existing therapeutic relationship established prior to the utilization of telehealth.

Students and community partners are aware that Telehealth is defined as the use of synchronous (real-time information sharing) or asynchronous (relay of information with lag time) telecommunications technology by a telehealth provider to provide health care services, including, but not limited to, the assessment, diagnosis, consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services; and health administration. Telehealth does not include audio-only telephone calls, e-mail messages, or fax transmissions.

Telehealth Training

It is recommended that supervisors and students only provide telehealth services after engaging in appropriate education, study, training, consultation or supervision for professionals who are competent in the use of technology- based treatment. Students and supervisors understand that any professional counseling services conducted must be under a License Professional and adhere to The ACA Code of Ethics and HIPPA guidelines.

PROFESSIONAL PRACTICE MATERIALS

Professional Disclosure Statement – Example

The following is an example of a professional disclosure statement and counseling contract. Optionally, some Graduate Students have found it to be beneficial to use this template to create their own professional disclosure statement for distribution to clients at their training site, particularly at sites where chart documentation is less developed.

Italicized type like this indicates material for you to substitute with your own data.

Your Name

Clinical Mental Health Program
Keiser University
1900 Commercial
Fort Lauderdale, FL 33309

PROFESSIONAL DISCLOSURE STATEMENT

Qualifications: I am a counseling Graduate Student in training working toward completion of a Master's degree. I am qualified to provide professional counseling services under the supervision of _____. My formal education has prepared me to counsel individuals, groups, *couples, parents, families, and children.*

Experience: In my Master's program and under supervision I have counseled *at least one individual and one group. Specify any other relevant experience here.*

Nature of Counseling: *Describe your theory of counseling in terms the general public can understand. Be sure to include the goals and techniques of counseling.*

INFORMED CONSENT

Counseling Relationship: *During the time we work together, we will meet weekly for approximately 50-minute sessions (put in agency or client requirements).* Although our sessions may be very intimate psychologically, ours is a professional relationship rather than a social one. Our contact will be limited to counseling sessions you arrange with me except in case of emergency. Please do not invite me to social gatherings, offer me gifts, ask me to write references for you, or ask me to relate to you in any way other than the professional context of our counseling sessions. You will be best served if our sessions concentrate exclusively on your concerns.

Effects of Counseling: At any time, you may initiate a discussion of possible positive or negative effects of entering, not entering, continuing, or discontinuing counseling. While benefits are expected from counseling, specific results are not guaranteed. Counseling is a

personal exploration and may lead to major changes in your life perspectives and decisions. These changes may affect significant relationships, your job, and/or your understanding of yourself. Some of these changes could be temporarily distressing. The exact nature of these changes cannot be predicted. Together we will work to achieve the best possible result for you.

Client Rights: Some clients need only a few counseling sessions to achieve their goals; others may require months or even years of counseling. As a client, you are in complete control and may end our counseling relationship at any time, though I do ask that you participate in a termination session. You also have the right to refuse or discuss modification of any of my counseling techniques or suggestions that you believe might be harmful.

I assure you that my services will be rendered in a professional manner consistent with accepted legal and ethical standards. If at any time for any reason you are dissatisfied with my services, please let me know. If I am not able to resolve your concerns, you may report your complaints to my supervisor, *insert your On-Site Supervisor's name and number here*.

Referrals: Should you and/or I believe that a referral is needed, I will provide some alternatives including programs and/or people who may be able to assist you. A verbal exploration of alternatives to counseling will also be made available upon request. You will be responsible for contacting and evaluating those referrals and/or alternatives. I will most likely be unavailable to be your counselor until *mid-May, mid-August, mid-December due to breaks in my education/training*. If you wish to continue counseling beyond that time, I will provide some continuation or referral options.

Cancellation: In the event that you will not be able to keep an appointment, please notify the agency at least 24 hours in advance, if possible. My opportunities to gain experience depend upon your attendance. Therefore, if you are absent two weeks in a row, I may ask to be assigned a new client, which may make it more difficult for us to schedule appointments together. Likewise, if you intend to discontinue counseling, please inform me as soon as possible so that I may be assigned another client.

Records and Confidentiality: All of our communication becomes part of the clinical record. Records are the property of [*insert agency's name here*]. Adult and minor records will be disposed of in accordance with the agency's policies. Most of our communication is confidential, but the following limitations and exceptions may exist: (1) when I need to use your case records for purposes of supervision, professional development, and research; (2) if I determine that you are a danger to yourself or someone else; (3) if you disclose abuse, neglect, or exploitation of a child, elderly, or disabled person; (4) if you disclose sexual contact with another mental health professional; (5) if I am ordered by a court to disclose information; (6) if you direct me to release your records; (7) if I am otherwise required by law to disclose information. If I see you in public, I will attempt to protect your confidentiality by acknowledging you only if you approach me first. In the case of marriage and family counseling, I will keep confidential (within the limits cited above) anything you disclose to me without your family member's

knowledge. However, I encourage open communication between family members, and I reserve the right to terminate our counseling relationship if I judge the secret to be detrimental to the therapeutic process.

Access to records of minor children: As clients, minor children and adolescents also deserve the right to privacy and confidentiality. However, it is understood that as a parent you are responsible for and concerned about your child. Therefore, a verbal summary of your child's session will be provided to you upon request. This summary may include and is not limited to play themes in the case of play therapy, general concerns or issues of the child and of the counselor, and progress toward counseling goals.

By your signature below, you are indicating that you read and understood this statement, any questions you had about this statement were answered to your satisfaction, and that you were furnished a copy of this statement. By my signature, I verify the accuracy of this statement and acknowledge my commitment to conform to its specifications.

Printed Name of Client (if the client is a minor, print the minor's name)

Is the client currently a minor (under age 18)? ☐ Yes ☐ No

If yes, please print the name of the minor client's custodial parent or legal guardian here today giving consent for their treatment: _____

Signature of Client/Custodial Parent/Legal Guardian

Date

Printed Name of Graduate Student in Training

Printed Name of Supervisor

CASE CONCEPTUALIZATION AND PRESENTATION FORMAT

Adapted from: Stoltenberg, C.D., McNeill, B., & Delworth, U. (1998). IDM supervision: An Integrated developmental model for supervising counselors and therapists. (pp. 187-1819). San Francisco: Jossey-Bass.

This format is designed to help therapists collect and integrate relevant information for case conceptualization, diagnosis, and treatment, to organize client information, and facilitate discussion leading to an understanding and ultimately decision making regarding client care.

Please document most of this data in past tense, as you have already met with the client.

1. Clinic Data

- a. Therapist name
- b. Status (first practicum site, intern, staff)
- c. Agency/Clinic site
- d. Number of sessions with client
- e. Type of sessions (individual, group, marital, family)

2. Client Demographic Data

This section could include the client's name (initials or altered name for confidentiality), age, sex, marital status, children (in and out of home, ages, sex), and living situation (house or apartment, people living in the home and relationship with client).

3. SES Data

This section could include the client's occupation status, family members, average family income, transportation status (drives own car, public transportation), other economic resources (own house, savings, family support), and economic stressors (debts, child support, etc.).

4. Presenting Problem(s)

This section could include a description of the problem areas, listed separately, from the client's perspective, particularly noting client's view of their order of importance.

Suggested items of focus could be precipitating factors, duration of problems, history of

problem occurrences, circumstances for previous problem occurrences, possible connections between problems.

5. Relevant History

This section covers the client's psychosocial, medical, and psychiatric history and will vary in comprehension and focus according to the depth of treatment, length of treatment, theoretical orientation utilized, and the specific nature of the problems. Suggested topics for discussion:

1. Family and relationship history (family of origin/developmental issues, past marriages/significant relationships -duration, sexual functioning, dissolution factors, sexual orientation, etc., children -from current or prior relationships and current status, current family status and structure)
2. Cultural history and identity (issues of ethnicity and race, identification/acclimation)
3. Educational history (childhood/developmental, adulthood/current status)
4. Vocational history (types, stability, satisfaction)
5. Medical history (acute/chronic illness, hospitalizations, surgeries, major patterns of illness in family, accidents, injuries, with whom/where/how often receive medical care, etc.)
6. Health practices (sleeping, eating patterns, use of tobacco, consumption of caffeine etc.)
7. Mental health history (prior problems, symptoms, diagnoses, evaluations, therapy experiences, past prescribed medications, current and family of origin mental health histories)
8. Current medications (dosages, purposes, physician, compliance, effects, side effects, etc.)
9. Legal history (arrests, DUI, jail/prison, lawsuits, any pending legal actions)
10. Use/abuse of alcohol or drugs (prescription or illegal)
11. Family (current and origin) alcohol/drug history

6. Interpersonal Factors

This section contains a description of client's orientation toward others in environment, such as manner of dress, physical appearance, general self-presentation, nature of typical

relationship (e.g., dependent, submissive, aggressive, dominant, withdrawing, etc.), and behavior toward therapist (e.g., therapeutic alliance).

7. Environmental Factors

This section could include a description of elements in the environment, not already mentioned, that function as stressors and/or supports (e.g., friends, family, recreational activities, etc.) to the client – those centrally related to the presenting problems and more peripheral.

8. Personality Dynamics

Cognitive factors (data related to thinking and mental processes), such as intelligence, mental alertness, persistence of negative cognitions, positive cognitions, nature and content of fantasy life, level of insight (awareness of changes in feelings, behavior, reactions of others, understanding of the interplay, etc.), or capacity for judgment (ability to make decisions and carry out practical affairs of daily living).

Emotional factors, such as typical or most common emotional stress, predominant mood during interviews, appropriateness of affect, range of emotions client can display, or cyclical aspects of client's emotional life.

Behavior factors, such as psychosomatic symptoms, existence of problematic habits, or mannerisms.

9. Psychological Testing

Discussion of the methods or instruments utilized (both past and present), the evaluator(s), location, dates, reasons for testing, and results.

10. Life Transition/Adaptation Skills

Discussion of the client's coping skills (concrete efforts to deal with distressing situations; anticipation, preparation, response), social resources (supportive social networks), and psychological resources (adaptive personality characteristics; self-efficacy, hardiness, optimism).

11. Formal Diagnosis and Diagnostic Rational

DSM-5 Diagnosis, ICD-10 Code, Specifiers and include at least 1 (one) differential diagnosis.

Diagnostic Rationale

Discussion of symptoms/criteria showing how client meets the diagnostic criteria for the diagnoses given above. Include the differential diagnoses, demonstrating you ruled out other diagnoses.

12. Theoretical Conceptualization of the Case

First, identify the specific theory or theories used and provide a brief overview of the general theory's main points. Next, describe how the conceptualization was then applied to understand the existence of this particular client's problems. Finally, describe how the conceptualization affected the therapist's approach to treatment, which may also include discussion related to multicultural variables.

13. Recommendations

Each of the following are required to be included in your recommendations:

1. Prognosis.
2. Should services continue to be offered, or would a referral for counseling services elsewhere be more appropriate?
3. Potential referral(s) to other professions (e.g., medical, psychiatric, etc.).
4. Recommendation for a specific therapeutic orientation to be used with this client.
5. Nature of treatment (e.g., specific therapist, priority of treatment issues, interaction with client characteristics such as defensiveness, motivation for treatment, problem complexity, etc.).
6. Format recommendations concerning working with the client (e.g., individual, group therapy, etc.).

14. Treatment Plan

Based on the above information, describe the treatment plan you will follow to address the presenting and emerging problems. Make it consistent with your theoretical orientation and available empirical evidence. Estimate the number and types of sessions needed to address the issues.

15. Session Critique:

Treatment Goals for the Session:

In preparation for the session, what were the goals that were hoped to have been accomplished?

1. These may or may not have been discussed with the client.
 - a. Examples of session goals could have been generated in supervision just prior to the session.
2. These may or may not be listed on the formal treatment plan.
 - a. Examples of session goals that wouldn't necessarily be listed on the treatment plan would be: "Review the coping skills that were discussed during the previous session," or "Strengthen rapport after the mandated breach of confidentiality due to risk of self-harm."

Strengths:

After looking back on the session, what areas do you feel were handled well? Are there any components that the client happened to comment on as being helpful?

Weaknesses:

If you had the session to do over again, would you add or remove any of the session goals, say anything differently, use a different intervention technique, or use a different theoretical approach?

16. Questions/Issues

Note questions you have regarding the case and any issues you would like to address during group supervision.

Case Conceptualization and Presentation Format – Example

Clinic Data

Jan Therapist, Counseling Intern at College Counseling Clinic.

Number of sessions with client: 12

Type of sessions: Individual

Client Demographic Data

Jane Doe is a 45 year-old Caucasian and Asian American female. JD is single, never married with no children. JS currently resides with her parents in the family home.

SES Data

Client reported they are a full-time student who is currently unemployed. Her father currently works full-time, and mom is a stay at home mom. The average family income is unknown at this time. Client stated she relies on public transportation because she does not have a driver's license or a car. Client reported her parents will give her money when necessary. The client stated she is unemployed, and she does not like to take money from her parents unless it is necessary. Client reported she will collect aluminum cans and hold yard sales in order to have spending money.

Presenting Problem(s)

Client presented for counseling because a friendship she had with a classmate had just ended. The client reported feeling very sad and alone. Client reported that she has a difficult time making friends and trusting others. The client reported that the friendship ended because the friend chose her boyfriend over the client. The client reported a lifetime of difficulties making and maintaining friendships. The client stated that all throughout elementary school, middle school, and high school people made fun of her and she had very few friends. The client also reported having difficulties getting along with her siblings, cousins, and other relatives. The client appears to have pervasive problems with close intimate relationships as well as casual relationships with friends and family members by evidence of...

Relevant History

Family and relationship history: The client reported she is the youngest of three children; two older brothers, both of whom are considered to be very successful. The client reported that when she was born, she experienced a lack of oxygen for a significant amount of time, resulting in her being born "blue." The client reported struggling both socially and academically all of her life. The client reported that her mother has always loved and supported her, but her father has not been supportive, and they have a very strained relationship. The client also stated that she has difficulties interacting with her brothers. However, the client reported being close to her niece and nephew and enjoys spending time with them.

Cultural history and identity: The client reported being Mexican-American. The client reported that both her mother and father's families have been in the United States for many generations.

Educational history: The client stated being labeled as learning disabled as a child but was able to attend classes and graduate from high school with her peers. The client reported graduating from junior college and is now pursuing a bachelor's degree in art.

Vocational history: The client stated having several part-time jobs which have included bussing tables in restaurants and taking souvenir photographs for a riverboat touring company. She reported having difficulties getting along with her managers and co-workers in all job situations.

Medical history: As mentioned previously, the client suffered from a lack of oxygen during birth, that lead to the development of some cognitive deficits pertaining to her intellectual and social abilities. The client denied any further medical difficulties.

Health practices: The client reported having normal sleeping patterns. The client denied the use of alcohol or tobacco. The client reported consuming approximately two 20 oz bottles of Pepsi per day.

Mental health history: The client reported being in counseling previously to help her deal with depression. The client stated that she saw a counselor for a while and that helped her learn how to better deal with depressive symptoms. Client reported that she has not taken any psychotropic medication in the past and would not consider taking any such medications in the future.

Current medications: None reported.

Legal history: None reported.

Use/abuse of alcohol or drugs: None reported.

Family (current and origin) alcohol/drug history: None reported.

Interpersonal Factors

Manner of dress: Client appeared to be dressed appropriately for her age, the setting, and the season.

Physical appearance: Client's hygiene was good by evidence of being well groomed. Client appeared short and significantly overweight for her height. Client reported she had gained approximately 15 pounds over the past year.

General self-presentation: Client appeared shy and withdrawn by evidence of not maintaining eye contact and speaking in a very slow manner.

Nature of typical relationship: Client appeared to be very dependent in relationships by evidence of looking for self-validation from others.

Behavior toward therapist: The client was very slow to establish a relationship with the counselor, stating “I don’t trust psychologist types.” However, over time the client has built a strong therapeutic alliance with the counselor.

Environmental Factors

The client reported being unhappy living at home with her parents and would like to have a place of her own. However, at this time, it may not be economically possible. The client reported struggling academically in some of her classes.

The client stated enjoying volunteering at the animal shelter. The client stated that she gets along much better with animals than with people and being with the animals makes her feel better about herself.

Personality Dynamics

Cognitive factors: The client has been shown to have several learning disabilities that include math, reading comprehension, and expressive language. The client tends to have more negative than positive cognitions as expressed through her distrust of people and the world in general. The client has a moderate level of insight by evidence of identifying how she is feeling, how other people are responding to her, and how her affect has an impact on how people treat her. The client has a moderate level of judgment by evidence of her ability to perform daily living tasks such as cooking, cleaning, navigating public transportation, attending classes, and doing homework. However, the client seems to lack the judgment of knowing how much it would cost her per month to live on her own.

Emotional factors: It appears the client’s most common emotional stress is her lack of relationships and her feeling of being unloved and alone. During sessions the predominant mood of the client is depression. The client is currently beginning to demonstrate a broader range of affect by evidence of smiling more, laughing, and making jokes.

Behavior factors such as psychosomatic symptoms and existence of problematic habits or mannerisms: None to report.

Psychological Testing

Methods or instruments: WAIS-III

Evaluator, location, dates, and reasons for testing: Client was evaluated by Dr. Johnson at the counseling clinic June 2 – 14, 2010. The client was being tested to have her learning disabled status updated.

Results: The client's previous status of being learning disabled was substantiated. The client's I.Q. was found to be 84.

Life Transition/Adaptation Skills

Coping skills: The client reported she will use deep breathing and relaxation techniques when she finds herself experiencing stress. If possible, the client reported she will also go for a walk or will remove herself from the stressful situation.

Social resources: The client reported her mother and current therapist as being her only sources of support.

Psychological resources: The client appears to have a lot of tenacity by evidence of developing goals and working to accomplish the goals she identifies. The client reported working towards her goals, no matter the length of time needed to accomplish the goal.

Formal Diagnosis and Diagnostic Rationale

296.21 (F33.0) Major Depressive Disorder, recurrent, mild

Client meets the criteria for major depressive disorder, recurrent, mild, because she reports having a depressed mood for most of the day, nearly every day for more than two weeks, significant weight gain over the past few months, a diminished interest in past pleasurable activities, feelings of worthlessness nearly every day, and a diminished ability to think or concentrate nearly every day. The client had previously been diagnosed with major depressive disorder, and this episode has not caused her significant impairment in her daily functioning.

V62.89 (R41.83) Borderline Intellectual Functioning

Client meets criteria for borderline intellectual functioning because the client has had a history of learning and social deficits. Recent testing revealed the client's I.Q. to be 84.

Theoretical Conceptualization of the Case

The main theory utilized with this client is the client centered approach. Because this client has had such a difficult time forming relationships with others, the therapist believed this was the best approach to use. Client centered therapy focuses on building a strong therapeutic alliance with the client through listening, reflecting feelings, and demonstrating unconditional positive regard.

It appears the client's problems stem from her inability to form and maintain relationships by evidence of the client being socially awkward and often speaks at a very slow pace. The client reported people often respond to her with impatience and judgment. The therapist believes this client needs to feel safe to express herself and needs to be treated with unconditional positive regard.

In demonstrating unconditional positive regard for the client, the therapist took her time in getting to know the client. The therapist allowed the client to tell her story numerous times until the client felt heard and validated. While this initial stage of therapy took some time, once the client felt safe and secure in her relationship with the therapist, the client was then able to begin setting goals for herself and was able to begin moving toward those goals.

The client did not believe that being a Mexican-American female had an impact on her or her problems. However, over time the client has begun to realize that her relationship with her father has been largely impacted by cultural values held by her father. This realization has given her a new way of thinking about her father and a new way of attempting to interact with him.

Recommendations

Each of the following are required to be included in your recommendations:

1. The client's prognosis is fair. With time it is expected that the client will be able to develop a friendship with at least one other person.
2. Services should continue to be offered through the college counseling center since the client is making some progress.
3. Client has been referred for neurofeedback to assist her with her depression and her issues with concentration. Client has previously refused to have an evaluation for anti-depressant medication.
4. It is recommended that the therapist continue to use a client centered approach with this client, as well as a gradual introduction of reality and choice theory.

5. It is recommended that this client continue to see the current therapist for counseling services.
6. It is recommended that the client continue in individual therapy at this time. A possible referral to group therapy could be explored in the future.

Treatment Plan

All goals on the treatment plan have been created by the client, which is consistent with the client centered therapeutic approach.

Treatment Goal 1: Reduce symptoms of depression.

Objectives:

1. Client will walk for 30 minutes three times a week.
2. Client will add more fruits and vegetables to her diet on a daily basis.
3. Client will engage in one pleasurable activity of her choice at least once a week.
4. Client will attend neurofeedback sessions once a week.

This goal will be addressed during every session and adjustments made when necessary. The client and therapist will re-evaluate this goal after the fourth session.

Treatment Goal 2: Begin making connections with other people.

Objectives:

1. Client will say “hi” to another student in her classes every class period.
2. Client will walk with her head up and will look people in the eye at least three times over a one week period.
3. Client will smile at a classmate or stranger at least three times over a one week period.

This goal will be addressed during every session and adjustments made when necessary. The client and therapist will re-evaluate this goal after the fourth session.

Treatment Goal 3: Improve concentration and school performance

Objectives:

1. Student will attend neurofeedback sessions once a week.
2. Student will attend tutoring sessions three times a week.
3. Student will request that the school provide her with her books on tape when possible.
4. Student will request and utilize the use of a note taker in her classes.

This goal will be addressed during every session and adjustments made when necessary. The client and therapist will re-evaluate this goal after the fourth session.

Session Critique:

Treatment Goals for the Session:

1. Review the goals outlined on the treatment plan.
2. Review the client's coping skills and how she has been doing at implementing them during times of stress.

Strengths:

1. I believe I handled the review of the treatment plan goals well. I also believe I listened well to the client and was able to help the client look at an incident that occurred with her father in a different and more helpful manner.
2. The client stated that it had been helpful for her to talk about what had happened between her and her father and that she felt better regarding that situation.

Weaknesses:

1. Instead of asking a particular question, I might have reflected what she had said to see if I would have gotten a different response from her.
2. I think if I had the session to do over again, I would incorporate more choice theory into our discussion about her father.

Questions/Issues

Now that we have established a strong therapeutic alliance, how do I begin to challenge her to look at herself and her actions in situations without coming across as judgmental and pushing her away?

PROFESSIONAL COUNSELING ORGANIZATIONS

As an important part of being professional counselors, students are encouraged to join professional counseling associations. Active participation in professional associations is an integral part of professional identity and responsibility. Student members are available at a significantly reduced cost and typically provide the following advantages:

1. Receiving professional publications, such as journals and newsletters which provide current trends, research, issues, and other types of information in counseling.
2. Access and discounts to national and state conferences, which provides professional development and networking opportunities.
3. Resources, programs and seminars.
4. Access to professional liability insurance.
5. Direct involvement with activities and issues (e.g., legislation and professional credentialing, including certification, licensure, and program accreditation)

The following professional counseling organizations offer opportunities valuable at any stage in professional development. Many national associations also have state-level counterparts. Membership is available to both students and professionals. Membership applications can be obtained directly from the organization.

National Counseling Associations

American Counseling Association
American Mental Health Counselors Association
American School Counselor Association
National Career Development Association
American Association for Marriage and Family Therapists
American Rehabilitation Counseling Association

Counseling Associations in Specific Areas

Association for Assessment in Counseling and Education
Association for Creativity in Counseling
Association for Adult Development and Aging
American College Counseling Association
Association for Counselors and Educators in Government

Association for Counselor Education and Supervision
Association for Lesbian, Gay, Bisexual, & Transgender Issues in Counseling
Association for Humanistic Education and Development
Counselors for Social Justice
Association for Multicultural Counseling and Development
The Association for Humanistic Counseling
Association for Spiritual, Ethical, and Religious Values in Counseling
Association for Specialists in Group Work
National Career Development Association
National Employment Counseling Association

Counseling Education Resources

Council for Accreditation of Counseling and Related Educational Programs
National Board for Certified Counselors

UNDERSTANDING AND ACKNOWLEDGEMENT

I _____ have received and read the Clinical Mental Health Counseling Program Student Handbook. I understand the policies and procedures as stated in the handbook. I agree to fulfill the requirements as stated and to abide by the policies set forth therein.

I understand that it is my responsibility to meet the requirements stated in the handbook. I also understand that it is my responsibility to regularly check my Keiser email account and attend my Blackboard courses to keep abreast of any announcements and news about courses, the program, and the counseling profession.

I understand that the faculty will meet regularly to review student progress through the program. I further understand that the faculty has the right and responsibility to monitor my academic progress, professional ethical behavior, and personal and interpersonal qualities necessary to succeed as a professional counselor and based on that monitoring, to render a judgment about my standing in the program - whether I will continue without restriction, continue with restriction and/or remediation, or withdraw from the program. I understand that remediation may include the requirement of personal counseling which I will undertake at my own expense.

I understand that success in the sequence of clinical courses, including but not limited to MHC510, MHC515, MHC525, MHC545, MHC660, and MHC661, requires some skills that may be different from those required for success in didactic courses; thus, I understand that success in didactic courses does not guarantee success in clinical courses. I also understand that the sequence of clinical courses involves the demonstration of increasingly complex counseling skills and competencies and, consequently, success in earlier course(s) in the clinical sequence does not guarantee success in later course(s) in the sequence.

I understand that it is solely my responsibility to keep all my course syllabi and keep all practicum and internship supervision documents and time logs, maintaining all of these documents for when I apply for licensure.

I understand that the program meets general educational requirements for licensure and thus prepares me for but does not guarantee licensure as a professional counselor in any state. I understand that it is my responsibility to verify the specific requirements for licensure in the state I intend to practice.

Signature: _____

Date: _____

Appendices



Keiser University
M.S. in Clinical Mental Health Counseling
Program Plan and Checklist

Students are responsible for ensuring completion of all degree requirements. Any questions regarding program requirements should be discussed with your academic advisor.

Core Counseling Courses (36 credits)				
Course Number	Course Name	Pre-Requisite(s)	Residency	Minimum Grade
MHC501	Foundations of Counseling			
MHC505	Counseling Across the Lifespan			
MHC510	Counseling Skills and Techniques		Yes	B
MHC515	Counseling Theories and Practice			B
MHC520	Ethical and Legal Issues in Counseling			
MHC525	Group Theories and Practice		Yes	B
MHC530	Career Counseling			
MHC535	Counseling and Advocacy with Diverse Populations			
MHC540	Crisis Counseling			
MHC545	Counseling Intervention and Treatment Planning			B
MHC550	Assessment in Counseling			
RSM610	Research and Program Evaluation			
Specialization Courses (15 credits)				
Course Number	Course Name	Pre-Requisite(s)	Residency	Grade
MHC555	Psychopathology and Diagnosis			B
MHC560	Counseling in Community Settings			
MHC565	Couple and Family Counseling			
MHC570	Foundations of Addiction and Addictive Behavior			
MHC575	Counseling and Sexuality			
Clinical Experiences (9 credits)				
Course Number	Course Name	Pre-Requisite(s)	Residency	Grade
MHC660	Practicum in Counseling Minimum: 100 clinical hours Recommended: 200 clinical hours		Yes	B
	Comprehensive Exam (CPCE) Taken during MHC660 Residency		Yes	Pass
MHC661	Internship in Counseling (taken twice) Minimum: 600 clinical hours Recommended: 800 clinical hours			B



Keiser University

Department of Psychology – Clinical Mental Health Counseling

Checklist: Application for a New Clinical Training Site and/or On-Site Supervisor

Graduate Student: _____

Semester: _____ Year: _____

All documentation should be submitted to the Clinical Supervisor for approval as noted below:

Complete and submit in Pre-Practicum

- ☐ Complete Pre-Practicum modules
- ☐ Cover Letter: address to potential clinical sites
- ☐ Resume
- ☐ Clinical Training Handbook and Ethics Agreement
- ☐ Purchase Supervision Assist from KU bookstore

Submit to Dr. Smith, Clinical Coordinator

- ☐ Application for a New Clinical Training Site and/or On-Site Supervisor
- ☐ Email address for on-site Supervisor
- ☐ Copy of onsite supervisor (s) resume
- ☐ Memorandum of Understanding between CMHC & Affiliating Agency (Agency MOU)
- ☐ Copy of active Liability Insurance Policy
- ☐ Documentation of active membership in the American Counseling Association (ACA)

To be completed in Supervision Assist

- ☐ Session Recording Verification
- ☐ Clinical Training Handbook and Ethics Agreement
- ☐ HIPPA Training Agreement
- ☐ Ethic Agreement
- ☐ Copy of active Liability Insurance Policy
- ☐ Documentation of active membership in the American Counseling Association (ACA)

Revised 05/19/20

TMG



Keiser University

Graduate School
PRECEPTOR, SUPERVISOR OR MENTOR
Information Form
Clinical Mental Health Counseling

Instruction:

Type or clearly print the required information in the provided space. All completed forms must be scanned and emailed to the Clinical Coordinator for approval. Forms will be returned to the student if not completed completely & correctly.

Term: _____ Course Name/ Number: _____

Student Name: _____ Student #: _____

Email: _____@keiseruniversity.edu Phone: _____

Contact Information: Approved Site ☐ New Site ☐ Date: _____

Name of Clinic or Site (no commas, colons or semicolons)

Site Address: _____

City _____ County: _____ State _____ Zip _____

Phone: _____ FAX : _____

Clinical Contact Person Name (First and last name with title):

On-Site Supervisor (if different from above): _____

On-Site Supervisor's Degree & Major: _____

A minimum of a master's degree in counseling or a related profession.

License/Certification Title: _____

License/Certification #: _____

Must be licensed in the state where the counseling services will be conducted.

Total Years of On-Site Supervisor's Professional Experience: _____

A minimum of two years of pertinent professional experience in mental health counseling (including practicum or internship experience during graduate school).

Copy On-Site Supervisor's Resume in included: ☐ Yes ☐ No

Supervisor's Phone: (*important*): _____ Email (*important*): _____

Primary Practice Population: (please check)

☐ Adolescent ☐ Young Adults ☐ Adult ☐ All Ages

Primary Area of Specialization: (please check all that apply)

☐ Community Mental Health (Clinical) ☐ Addiciton service ☐ Outpaitent ☐ Residential/Inpatient

☐ Community Based Services ☐ Other: _____

Graduate Student's Signature

Date

On-Site Supervisor's Signature

Date

Revised 05/19/20



Keiser University

Department of Psychology – Clinical Mental Health Counseling

Agreement between Clinical Mental Health Counseling Program and the Affiliating Agency (Agency MOU)

THIS AGREEMENT, entered into this day of , 20 by and between The Clinical Mental Health Counseling Program(CMHC) at Keiser University- Graduate School_(herein after referred to as "SCHOOL" and the affiliating agency an agency providing behavioral health care (herein after referred to as " AFFILIATING AGENCY(S)).

WITNESSETH

WHEREAS, The School provides courses of study in CMHC Program and **WHEREAS**, as part of its course study the **SCHOOL** desires the students to be provided field experience where the Graduate Student can provide bona fide mental health counseling under supervision at the Community Agency; and

WHEREAS, the COMMUNITY AGENCY is willing to provide the necessary facilities for said Clinical Practice;

NOW, THEREFORE, for and in consideration of the premises and the mutual covenants and agreements herein contained, the parties hereto agree to the following terms and conditions:

1. The SCHOOL agrees to assume final responsibility for the educational experience, and grades of the students.
2. The SCHOOL will plan with the appropriate COMMUNITY AGENCY staff personnel for the use of COMMUNITY AGENCY facilities.
3. A SCHOOL member will be designated as being responsible for the coordination and implementation of the program of learning.
4. The SCHOOL for its part agrees to maintain for its faculty and students a policy of professional liability insurance, with a single limit of no less than \$1,000,000. A Certificate of Insurance confirming this professional liability coverage will be supplied to the COMMUNITY AGENCY upon execution of this Agreement and thereafter periodically upon the COMMUNITY AGENCY request.
5. Students will provide proof of their own medical insurance upon being assigned to the COMMUNITY AGENCY.
6. The SCHOOL reserves the right to refuse or discontinue the placement of students if the COMMUNITY AGENCY does not meet the professional educational requirements and standards of the SCHOOL.
7. The SCHOOL will recommend for placement at the COMMUNITY AGENCY only those students who have earned a satisfactory record and have met the minimum requirements established by the SCHOOL.
8. The SCHOOL will provide the COMMUNITY AGENCY with copies of current course outlines, course objectives, and curriculum philosophy, and a list of faculty and their qualifications when requested.
9. The COMMUNITY AGENCY shall not be responsible for any compensation for services or expenses for medical, meals, travel or other incidental expenses incurred by SCHOOL students or faculty participating in the Program, nor shall the SCHOOL become obligated to the COMMUNITY AGENCY or any member of its staff for any expenses or payment.

10. The SCHOOL'S students and faculty shall, at all times, be subject to and comply with all rules, regulations, procedures and policies of the Community Agency. All students shall respect the confidential nature of all information available to them with respect to COMMUNITY AGENCY clients and records.
11. The SCHOOL'S students and faculty participating in the Program at the COMMUNITY AGENCY shall, in no event, become nor be deemed to be employees, servants, or agents of the COMMUNITY AGENCY, nor shall any person on the staff or administration of the COMMUNITY AGENCY become nor be deemed to be an employee, servant or agent of the SCHOOL. The COMMUNITY AGENCY is responsible for all health care rendered in its facility.
12. The SCHOOL and its students shall cooperate fully with the COMMUNITY AGENCY with respect to physical examinations, vaccinations, and availability of health records of the SCHOOL'S students participating in the Program
13. Orientation to the COMMUNITY AGENCY will be provided for the faculty prior to the commencement of the student's experience. Both parties to this Agreement shall agree upon orientation.
14. The COMMUNITY AGENCY reserves the right to refuse or discontinue the availability of its facilities and services to any student who does not continuously meet professional or other requirements, qualifications and standards of the COMMUNITY AGENCY as determined by COMMUNITY AGENCY .
15. The COMMUNITY AGENCY staff will participate in the supervision and teaching of student enrolled in the CMHC Program.
16. The COMMUNITY AGENCY will provide emergency treatment to the students or faculty in the same manner and to the same extent as the COMMUNITY AGENCY provides for its employees. Students and faculty members assume personal and financial responsibility for medical care and hospitalization.
17. The SCHOOL and COMMUNITY AGENCY agree that the determination of the number students to be assigned to the COMMUNITY AGENCY will be a mutual decision based on variety of factors, including, but not limited to, staff, space availability and number's student enrolled in the curriculum.
18. The SCHOOL and COMMUNITY AGENCY agree that this Agreement does not limit COMMUNITY AGENCY to accept only students from the SCHOOL nor does the SCHOOL have to place its students only at the COMMUNITY AGENCY.
19. There shall be planning meetings of the SCHOOL faculty and COMMUNITY AGENCY prior to placement of students in the COMMUNITY AGENCY.
20. The COMMUNITY AGENCY / MEDICAL CENTER(S) and SCHOOL shall acquaint the students and faculty with policies, standards, rules and regulations of the MEDICAL CENTER(S). The COMMUNITY AGENCY / MEDICAL CENTER will also acquaint the students with appropriate preventative measures to reduce the spread of any airborne viruses, as per facility safety protocols. The SCHOOL will not be held liable for the risks that students may become exposed to or infected by an airborne virus during their clinical experience. In the event of inappropriate actions by the students, the MEDICAL CENTER(S) staff will notify the faculty in order that appropriate action may be taken by the SCHOOL.
21. The COMMUNITY AGENCY shall grant the Graduate Students, if given written permission by the client, permission to audio or video record a session to be reviewed by the CMHC program (CMHC) faculty. It is understood by all parties that written consent to record will be obtained from clients prior to recording and that session recordings may be reviewed in confidence with the On-Site Supervisor CMHC supervisors, and possibly with other Graduate Students in the context of group supervision. Recordings will be erased or destroyed no later than the end of the semester.
22. The SCHOOL will be actively involved in overseeing the Graduate Student's experiences and will

also participate in the supervision of the Graduate Student. The CMHC program will maintain contact with the Graduate Student and the COMMUNITY AGENCY to ensure that duties and responsibilities are followed.

23. The term of this Agreement shall remain in effect for one year from the date of the signature and therefore will automatically renew for one-year terms until otherwise terminated by either party. The SCHOOL and the COMMUNITY AGENCY acknowledge that a three (3) month or ninety (90) days written notice of termination be provided to either party, and/or assurance provided that students currently enrolled in the program are provided the opportunity to complete their clinical education. Notice under this paragraph shall be in writing and sent to the other party by registered mail.
24. This Agreement may not be modified or amended except in writing.
25. This Agreement shall be governed by the laws of the State of Florida.
26. Whenever any notice, demand or consent is required or permitted under this Agreement, such notice, demand or consent shall be given in writing and be delivered in person or mailed to the following address:

COMMUNITY AGENCY:

Agency:
Representative:
Address:
City, State, Zip:
Telephone:

SCHOOL:

Dr. Margert Sullivan- Associate Vice Chancellor
Keiser University Graduate
1900 West Commercial Blvd
Ft. Lauderdale, FL 33309

Signature: _____

Signature: _____

Date: _____

Date: _____



Keiser University

Department of Psychology – Clinical Mental Health Counseling

Memorandum of Agreement between CMHC, Supervisors, & Graduate Student (Supervisor MOA)

Student: _____

On Site Supervisor (first, last name) _____

Supervisor degree and credential: _____

Supervisor Address _____

Email: _____ Mobile) and zip code.)

Florida County or State Abbreviation (FL county name or, if not FL, 2-character state abbreviation.)

Primary Phone Number for Clinic or Site (format: xxx-xxx-xxxx No parenthesis)

_____-_____-_____

Contact / Preceptor / Mentor (First and last name of the person to whom you discuss placement with)

Phone: _____

Name of Clinic or Site (no commas, colons or semicolons)

Address of Clinic or Site (Complete to include Street, City, State (FL

I. On-Site Supervisor Qualifications:

The On-Site Supervisor acknowledges that they possess all of the following criteria for providing supervision:

1. A minimum of a master's degree in counseling or a related profession with equivalent qualifications, including appropriate certifications and/or licenses in the state where the professional counseling services are to be conducted with clients.
2. A minimum of two years of pertinent professional experience in mental health counseling.
3. Knowledge of the program's expectations, requirements, and evaluation procedures for students.
4. Relevant training in counseling supervision.

II. The On-Site Supervisor agrees to:

1. The On-Site Supervisor agrees to weekly interaction that averages to one hour per week of individual and/or triadic supervision throughout the practicum/internship.
2. The On-Site Supervisor agrees to the completion of a brief form on alternating weeks (Bi-Weekly Supervision Consultation Form) concerning the Graduate Student's progress. The Graduate Student is responsible for having these forms returned to their Group Supervisor.
3. The On-Site Supervisor agrees to the completion of an evaluation of the Graduate Student (Evaluation of the Student by the On-Site Supervisor Form) at the end of the semester. The due date will be told to the On-Site Supervisor by the Graduate Student.
4. On-Site Supervisor agrees to complete the evaluation of the Graduate Student based on some form of observation of the Graduate Student's competency, i.e., observing a session, watching a recording of a session, or listening to a recording of a session, that is provided by the Graduate Student.
5. The On-Site Supervisor agrees to meet with CMHC Clinical Coordinator at least once during the semester at the On-Site Supervisor's convenience. Additionally, the On-Site Supervisor agrees to communicate with the CMHC Clinical Coordinator when he/she has any concerns about the Graduate Student as soon as the problems/concerns arise.
6. The On-Site Supervisor agrees to monitor all cases seen by the Graduate Student.
 - a. Co-sign all clinical chart documentation completed by the Graduate Student.
 - b. Conduct observations of the Graduate Student's contact with clients (i.e., live observation of sessions, or watching and/or listening to session recordings).
7. The On-Site Supervisor agrees to refrain from charging Graduate Students for On-Site Supervision.

III. The Graduate Student agrees to:

1. The Graduate Student agrees to perform the duties and responsibilities specified in a reliable, professional, and conscientious manner observing all the ethical and legal codes of the profession.
2. The Graduate Student agrees to maintain regular contact with the On-Site Supervisor and the CMHC Group Supervisor.
3. The Graduate Student is expected to comply with all the policies and procedures of the agency and

agrees to secure and maintain professional liability insurance for the duration of the internship placement.

4. The Graduate Student is expected to obtain malpractice insurance before beginning any clinical training course (i.e., Practicum or Internship) and maintain his/her insurance throughout the clinical experience.
1. The Graduate Student is expected to perform all duties in accordance with state laws and the Ethical Standards of the American Counseling Association.
2. The Graduate Student is expected to orient himself or herself to all of the agency policies and procedures.
3. The Graduate Student is expected to complete a minimum of 60 Direct Client Service hours when enrolled in MHC660 (Practicum). Further, students cannot accumulate internship hours while they are enrolled in practicum and they cannot accumulate practicum or internship hours prior to the beginning of the semester in which they are enrolled in the practicum or internship class.
4. The Graduate Student is expected to complete a minimum of 80 Direct Client Service hours when enrolled in MHC661 (Internship – I) and a minimum of 120 Direct Client Service hours when enrolled in MHC661 (Internship – II).
5. The Graduate Student is expected to provide program-appropriate audio/video recordings for use in supervision or participate in live supervision.
6. The Graduate Student is expected to notify the On-Site Supervisor and the Group Supervisor immediately if any problems arise.
7. The Graduate Student is expected to inform clients of the status of “counselor in training” as a Graduate Student enrolled in a clinical training course, and a treatment consent form will be signed by all clients of the Graduate Student.

I. LIABILITY INSURANCE

All of the Graduate Students enrolled in any of the clinical training courses (i.e., Practicum or Internship) with the CMHC program (CMHC) are required to have malpractice insurance coverage of \$1,000,000 per each incident and \$3,000,000 in aggregate

IV. DUTIES AND RESPONSIBILITIES

In preparation for the clinical training experience, the Graduate Student and the Affiliating Agency should cooperate in determining the most appropriate experiences for the Graduate Student, including but not limited to assignment of duties and arrangement of supervision. The majority of duties for the Graduate Student should be similar to those that they will perform upon professional licensure.

Select the expected Direct Client Service duties for the Graduate Student:

☐ Intake Interviews

☐ Family Therapy

☐ Individual Therapy

☐ Group Therapy

☐ Couple/Marital Therapy

☐ Child/Adolescent Therapy

- ☐ Play Therapy
- ☐ Crisis Intervention
- ☐ Grief Counseling
- ☐ Career Counseling

- ☐ Addictions Counseling
- ☐ Assessment instrument administration
- ☐ Wellness, prevention or educational services
- ☐ Other:

Select the expected Administrative or Supervision activities for the Graduate Students:

- ☐ Individual Supervision
- ☐ Triadic Supervision
- ☐ Team or staff meetings
- ☐ Writing case notes
- ☐ Client-related paperwork
- ☐ Continuing Education attendance
- ☐ Observing other therapists' sessions

- ☐ Preparation for clients
- ☐ Reviewing sessions
- ☐ Reviewing & interpreting assessments
- ☐ Diagnosing
- ☐ Outreach
- ☐ Educational role-plays with other students
- ☐ Other:

V. The Group Supervisor (CMHC Supervisor) agrees to:

1. Provide an average of 1 ½ hours per week of group supervision on a regular schedule throughout the Practicum or Internship enrollment.
2. During Practicum, the Clinical Coordinator will meet with the On-Site Supervisor (web cam or in-person) at least once during the semester to discuss the Graduate Student's counseling performance. Additional meetings may be scheduled as needed.
3. Complete an evaluation of the Graduate Student's performance at the end of the semester.

Graduate Student Signature

Date

On-Site Supervisor Printed Name

On-Site Supervisor Signature

Date

CMHC Supervisor Signature

Date



Keiser University

Clinical Mental Health Program

Mid-Term Evaluation of the Student by the On-Site Supervisor

Select one: ☐ Practicum ☐ Internship I ☐ Internship II

Semester: _____

Year: _____

Graduate Student: _____

Student ID# _____

Site: _____

On-Site Supervisor: _____

Student Strengths:

Student Growth Area:

Supervision Concerns:

What was the theory the student utilized? Specifically, what theory techniques did you observe?

How can the student improve upon his or her use of this theory?

If you were rating the student on his/ her for the session you observed for 0-5 with 0 being shows no growth and 5 being exceptional how would you rate the student and why?

0 1 2 3 4 5

Other Feedback:

Graduate Student's Signature

Date

Onsite Supervisor's Signature

Date



Master of Science, Clinical Mental Health Counseling Program

Live Supervision Microcounseling Skills Assessment Scale

Name of Student: _____

Supervisor: _____

Date: _____

Counseling Skills Assessment Rubric

Given the context of the session (setting, population, stage in the counseling process, and presenting problem), rate the student's use of each counseling skill, trait, or attitude. Criteria are quality and quantity of skill, trait, or attitude including appropriateness, effectiveness, timeliness, and accuracy. Generally, it would be expected that students in MHC 661 I and II would have mostly 2's and 3's.

Rating Scale

3 – Masters criteria

2 – Consistently meets criteria

1 – Minimally or inconsistently meets criteria

0 – Absence or inappropriate use of skill, attitude, or trait

N – Not required, not applicable, or no opportunity to observe

	3	2	1	0	N
The Counseling Session					
Demonstrates attending behavior (verbal and nonverbal, eye contact, vocal qualities, verbal tracking, body language) <i>Ch. 3</i>					
Uses questions appropriately to enhance the session and draw out the client's story (e.g., minimal, open, timing) <i>Ch. 5</i>					
Uses paraphrasing and summarizing to show understanding of client's story (reflection of content) <i>Ch. 6</i>					
Accurately reflects client feeling as evidenced by client affirmation (reflection of feeling) <i>Ch. 7</i>					
Demonstrates confrontation of client discrepancies, inconsistencies, and conflicts <i>Ch. 10</i>					
Demonstrates reflection of meaning/interpretation/reframing <i>Ch. 11</i>					

Counseling Skills Assessment Rubric

Given the context of the session (setting, population, stage in the counseling process, and presenting problem), rate the student's use of each counseling skill, trait, or attitude. Criteria are quality and quantity of skill, trait, or attitude including appropriateness, effectiveness, timeliness, and accuracy. Generally, it would be expected that students in MHC 661 I and II would have mostly 2's and 3's.

Rating Scale

3 – Masters criteria

2 – Consistently meets criteria

1 – Minimally or inconsistently meets criteria

0 – Absence or inappropriate use of skill, attitude, or trait

N – Not required, not applicable, or no opportunity to observe

	3	2	1	0	N
Uses appropriate self-disclosure/feedback/immediacy (here-and-now) <i>Ch. 12</i>					
Collaborates with the client to establish clear therapeutic goals <i>Ch. 8, 14</i>					
Facilitates client movement toward goals (action) <i>Ch. 13</i>					
Structures the beginning and ending of the session					
Demonstrates the use of theory specific techniques					
Counselor Traits & Attitudes					
Demonstrates caring/warmth/positive regard toward client					
Demonstrate acceptance and an unconditional attitude toward client					
Cultivates hope and creates with the client the expectation of positive change (a common factor)					
Demonstrates ethical behavior <i>Ch. 2</i>					
Attends to multicultural issues <i>Ch. 2</i>					



Practicum/Internship TeleMental Health Approval Clinical Mental Health Counseling Program

Date:

Student Name :

ID#

Keiser University is committed to the continued education and field experience of our students enrolled in the Clinical Mental Health Counseling program. Graduate Students who have the opportunity to participate telemental health counseling in conjunction with face to face counseling at their approved practicum or internship sites will need to adhere to the following:

- g. The student has an established site.
- h. The student has a qualified supervisor and maintains the same qualified supervisor for the duration of the application (site).
- i. The student site has a written telehealth protocol and safety plan in place.
- j. The supervisor be properly trained by the sites or other outside sources in telehealth.
- k. The current site and qualified supervisor have a provision in place that the qualified supervisor will be readily available during the electronic therapy session: and
- l. The student and the client have an existing therapeutic relationship established prior to telemental health.
- m. The student is not to conduct telemental health as a standalone therapy. Face to face contact is required unless otherwise noted.

Students and community partners are aware that Telehealth is defined as the use of synchronous (real-time information sharing) or asynchronous (relay of information with lag time) telecommunications technology by a telehealth provider to provide health care services, including, but not limited to, the assessment, diagnosis, consultation, treatment, and monitoring of a client; transfer of medical data; client and professional health-related education; public health services; and health administration. Telehealth does not include audio-only telephone calls, e-mail messages, or fax transmissions.

Telehealth Training

It is recommended that supervisors and students only provide telehealth services after engaging in appropriate education, study, training, consultation or supervision for professionals who are competent in the use of technology- based treatment.

Students and supervisors understand that any professional counseling services conducted must be under a License Professional and adhere to The ACA Code of Ethics and HIPPA guidelines.

Student

Date

On-Site Supervisor

Date

Clinical Coordinator

Date



Clinical Mental Health Counseling Program Graduate Student Review and Recommendation Rubric

Student Name: _____ Semester/Year: _____
 Student ID: _____ Date: _____

The Graduate Student Review and Recommendation Rubric is designed to provide counselors-in-training constructive feedback in the domains of academic performance and personal dispositions. This review will be conducted at the end of the graduate student's first, third, and fifth semester. Reviews will also be done as needed throughout the course of program.

Academic Performance	PASS	NO PASS
GPA	GPA of at least a 3.0 <input type="checkbox"/>	GPA below 3.0 <input type="checkbox"/>
Class Attendance/Participation	Student always arrives to class, appointments, and meetings at the time designated/agreed upon. Absences are reported prior to scheduled obligations. <input type="checkbox"/>	Student frequently fails to arrive to class, appointments, and meetings at the time designated/agreed upon. Changes in schedule are not reported in a timely manner. <input type="checkbox"/>
Completes Work in a Timely Manner	Completes assignments in a timely manner. <input type="checkbox"/>	Consistently turns in assignments late or fails to turn them in at all. <input type="checkbox"/>
Effort/Maximization of Potential	Demonstrates curiosity and interest in counseling. Demonstrates initiative. Seeks resources beyond those provided in class. <input type="checkbox"/>	Appears to be unengaged in class. Demonstrates little or no initiative. Neglects available resources. <input type="checkbox"/>
Personal/Professional Dispositions	PASS	NO PASS
Mature/Responsible	Student demonstrates preparedness for all professional responsibilities. Student behaves in a controlled, positive, appropriate manner. <input type="checkbox"/>	Student does not demonstrate preparedness for all professional responsibilities. Student does not behave in a controlled, positive, appropriate manner. <input type="checkbox"/>

Openness to diversity	Student demonstrates commitment to diversity (self-awareness, knowledge, skill) and developing multicultural social justice counseling competencies (MSJCC); openness to feedback re: strategies to eliminate prejudices of intentional / unintentional oppression and discrimination.	Student demonstrates indifference, or lack of awareness / commitment to diversity (self-awareness, knowledge, skill). Does not work to develop multicultural social justice counseling competencies (MSJCC); or is closed to feedback re: strategies to eliminate prejudices of intentional / unintentional oppression and discrimination.
Stable/Dependable	Demonstrates an emotional maturity, an adequate sophistication of thought, and behavior appropriate for a graduate student aspiring to be a professional counselor.	Demonstrates an emotional immaturity, an inadequate sophistication of thought, or behavior inappropriate for a graduate student aspiring to be a professional counselor.
Response to Criticism	<p>Listens carefully to feedback. Responds by making appropriate changes. Clearly sees feedback as an opportunity for growth. Is not defensive. Does not make excuses.</p> <p><input type="checkbox"/></p>	<p>Ignores constructive feedback. Does not incorporate feedback into practice therefore not using feedback as an opportunity for growth. Becomes defensive. Makes excuses.</p> <p><input type="checkbox"/></p>
Ethical/Professional Behavior	<p>Demonstrates ethical behavior. Is honest and trustworthy in communications and interactions with others. Presents him-herself professionally.</p> <p><input type="checkbox"/></p>	<p>Does not demonstrate ethical behavior. Engages in gossip and complains about problems/difficulties in an unproductive manner. Has violated copyright restrictions or plagiarized.</p> <p><input type="checkbox"/></p>
Attitude/Motivation	<p>Student clearly demonstrates enthusiasm for the work of a counselor on a consistent basis. Student appears to be genuinely interested in acquiring the skills and knowledge expected of a professional counselor.</p> <p><input type="checkbox"/></p>	<p>Student's lack of enthusiasm has a negative impact on the class environment. Student does not appear to be interested in acquiring the skills and knowledge expected of a professional counselor.</p> <p><input type="checkbox"/></p>
Respectful and Collegial Interaction with Faculty & Peers	<p>Relates well to peers, faculty, staff and other professionals. Is sensitive to role in setting and responds appropriately (social cues).</p> <p><input type="checkbox"/></p>	<p>Has difficulty relating well to peers, faculty and other professionals. Shows a lack of awareness of role in setting or simply disregards those roles (social cues).</p> <p><input type="checkbox"/></p>
Communication / Conflict Resolution	<p>Assertive communication</p> <p><input type="checkbox"/></p>	<p>Aggressive or passive communication</p> <p><input type="checkbox"/></p>

Summary Recommendation*	
<input type="checkbox"/> 0 “No Passes”	No Action
<input type="checkbox"/> 1-2 “No Passes”	Meet with Advisor to Develop Remediation Plan
<input type="checkbox"/> 3 or more “No Passes”	Meet with Academic Program Coordinator and Advisor to Development Action Plan
<input type="checkbox"/>	The advisor or faculty completing the form has reviewed the contents with the student. The student is aware that that their current clinical skills were evaluated on the <i>Counseling Skills Assessment Scale</i> prior to beginning MHC660 Practicum and MHC661 Internship.
<input type="checkbox"/>	Student advised he/she may respond to the comments/concerns and/or remediation plan in writing.
Comments / Clarifications / Notations (Required for any “No Pass” Items):	

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Group Supervisor
Signature: _____ Date: _____

APC Signature: _____ Date: _____

NATIONAL CREDENTIALS

National Board for Certified Counselors (NBCC). The National Board for Certified Counselors was initiated as a result of the American Association for Counseling and Development's professional concerns and efforts in the area of credentialing. After several years of investigation and survey of need, it was determined that the time had come for a national certification process for counselors. In 1982, the NBCC was incorporated as an independent, voluntary, non-profit

organization whose primary purposes are to establish and monitor a national certification system, to identify to professionals and the public those counselors who have voluntarily sought and obtained certification, and to maintain a register of those who have met predetermined NBCC standards in their training, experience, and performance on the NBCC Certification Examination.

By granting certification, it is not the intent of the NBCC to certify counselors for employment nor to impose personnel requirements on agencies and organizations. Rather, it is their intent to provide a national standard that can be used as a measure of professionalism by interested agencies, groups, and individuals. The responsibility for professional integrity and excellence remains with the counselor. It is further intended that national certification will encourage the continuing professional growth and development of National Certified Counselors and advance cooperation among groups and agencies actively involved in the credentialing of counselors and counselor educators.

The NBCC exam is administered three (3) times each year at locations throughout the nation. Information and registration materials are available from The National Board for Certified Counselors, 3-D Terrace Way, Greensboro, North Carolina 27403, or you may visit their web site at www.nbcc.org.

Certified Clinical Mental Health Counselor (CCMHC). The National Certified Counselor (NCC) certification is a prerequisite of specialty certification. Applicants for the Certified Clinical Mental Health Counselor (CCMHC) must complete the required coursework, supervision, and examination.

Students in a Clinical Mental Health Counseling program, approved by CACREP, who have met all the requirements except experience and submittal of the clinical work sample may sit for the NCE and the NCMHCE during their last semester before graduation. Upon passing the examinations, the applicant is given the designation NCC and Board Eligible CCMHC. Certification as a CCMHC has become the standard in the field of Mental Health Counseling for regulatory boards establishing state standards and insurance companies and other third-party payors evaluating service providers (KCA News, Vol. 5 No. 4).

PROFESSIONAL ASSOCIATIONS

American Counseling Association (ACA). The American Counseling Association (ACA) is an organization of counselors, students, faculty, and related members interested in, or working in, the counseling profession. Its origins go back almost 60 years and the name of ACA has undergone numerous changes. ACA contains the following divisions:

Association for Assessment in Counseling (AAC). This association is for persons who use assessment in counseling, who train and supervise such persons, or who develop and validate assessment products and procedures (e.g., tests, inventories, behavioral rating scales). (Organizational Affiliate) of American Counseling Association www.aarc-counseling.org

Association for Adult Development and Aging (AADA). This association is for those interested in counseling adults and focusing on matters related to the development and needs of adults across the life span. (Organizational Affiliate) of American Counseling Association www.counseling.org

American College Counseling Association (ACCA). This professional association is for those in higher education who have a professional identity in counseling and whose purpose is student development. You may visit their web site at www.collegecounseling.org and www.counseling.org .

Association for Counselor Education and Supervision (ACES). This association is for those interested in counselor education who recognize the need for quality education and supervision of counselors in all work settings. You may visit their web site at www.acesonline.net .

Association for Humanistic Education and Development (AHEAD). This association is for those committed to the implementation of humanistic principles and have a primary responsibility or interest in the area of human development. You may visit their web site at <https://afhc.wildapricot.org/>

Association for Multicultural Counseling and Development (AMCD). This association is for those who want to improve ethnic and cultural empathy and understanding through education and exchange experiences. You may visit their web site at www.multiculturalcounselingdevelopment.org .

American Rehabilitation Counseling Association (ARCA). This association is for professional rehabilitation counselors and others concerned with improving the lives and rehabilitation of persons with disabilities. You may visit their web site at www.arcaweb.org .

Association for Spiritual, Ethical & Religious Values in Counseling (ASERVIC). This professional association is for those interested in religious, spiritual, and value issues and how they relate to the counseling profession and its practitioners. (Organizational Affiliate) of American Counseling Association www.counseling.org

American School Counselors Association (ASCA). This association is for those interested in school counseling or related areas and activities having an impact on a student's success and wellbeing. You may visit their web site at www.schoolcounselor.org.

Association for Specialists in Group Work (ASGW). This professional association is for those interested in group counseling and group process with all age groups and in all settings. You may visit their web site at www.asgw.org.

International Association of Addiction / Offender Counselors (IAAOC). This association is for those interested in the field of addictions and/or offender counseling, particularly in the rehabilitation of the incarcerated addict and codependents. You may visit their web site at www.iaaoc.org .

International Association of Marriage & Family Counselors (IAMFC). This association is for those whose primary work-related responsibilities or interest is in the area of marriage and family counseling. www.iamfconline.org.

Military Educators and Counselors Association (MECA). This association is for those interested in counseling military personnel and their families and in the development of professional counseling services for the Armed Forces and federal agencies. (Organizational Affiliate) of American Counseling Association www.counseling.org

National Career Development Association (NCDA). This professional association is for those interested in career development and counseling practices, and whose primary responsibility or interest involves enhancing work experience across the life span. You may visit their web site at www.ncda.org.

National Employment Counseling Association (NECA). This association is for those who counsel in employment and placement settings. You may visit their web site at www.employmentcounseling.org/

American Mental Health Counselors Association (AMHCA). The American Mental Health Counselors Association (AMHCA) is the professional membership in AMCHA requiring a master's degree in counseling or a closely related mental health field and adherence to AMHCA's National Standards for Clinical Practice. Student membership is encouraged while completing the graduate program. This association is to enhance that of mental health counseling through licensing, advocacy, education and professional development. The American Mental Health Counselors Association is the national organization representing licensed mental health counselors and state chapters with consistent standards of education, training, licensing, practice, advocacy and ethics. Mental health counseling is a distinct profession with national standards for education, training and clinical practice. You may visit their web site at www.amcha.org.

American Association for Marriage and Family Therapy (AAMFT). The American Association for Marriage & Family Therapy is an organization for professionals and professionals-in-training who work with individuals, couples, families and their involvement with larger social systems from systemic or relational perspectives. AAMFT holds a yearly national conference. Levels of membership in AAMFT are determined according to clinical experience. Members are entitled to a subscription of the *Journal of Marital and Family Therapy*. This national organization provides a forum for the advancement of theory, research, and clinical issues, practices and ethics. You may visit their web site at www.aamgt.org.

Association for Play Therapy (APT). The mission of APT is to advance the psychosocial development and mental health of all people through play and play therapy by promoting;

- a) the understanding and valuing of play and play therapy, b) the effective practice of play therapy through training, research, and support, c) the recognition, incorporation, and preservation of diversity in play and play therapy, and d) the development and maintenance of a strong professional organization to accomplish these objectives.

Kentucky has an active branch called Kentucky Association for Play Therapy (KAPT). For more information about APT and KAPT contact Dr. Jodi Crane in the Human Services and Counseling Office or visit www.a4pt.org.

COUNSELING RELATED WEBSITES BY STATE

Please note that not all states and originations are represented on this list.

ALABAMA

Alabama Counseling Association - www.alabamacounseling.org

CALIFORNIA

California Counseling Association - <https://cacounseling.wildapricot.org/>

FLORIDA

Florida Counseling Association – www.flacounseling.org

GEORGIA

American Counseling Association of Georgia - www.counseling.org/my-aca/

ILLINOIS

Illinois Counseling Association – www.ilcounseling.org

INDIANA

Indiana Counseling Association – www.indianacounseling.org

KENTUCKY

Kentucky Counseling Association – www.kyca.org

LOUISIANA

Louisiana Counseling Association – www.lacounseling.org

Louisiana Mental Health Counseling Association - www.lacounseling.org/lca/LMHCA.asp

MISSOURI

American Counseling Association of Missouri –

www.counselingmissouri.org/counselingmissouri/

Missouri Mental Health Counselors Association – www.mmhca.net

NEW YORK

New York Counseling Association - www.counseling.org/new-york/

New York Mental Health Counselors Association – www.nymhca.org

OHIO

Ohio Counselors Association – www.ohiocounseling.org

Ohio Mental Health Counseling Association – www.ohmhca.org

TENNESSEE

Tennessee Counseling Association – www.tncounselors.org

TEXAS

Texas Counseling Association – www.txca.org

VIRGINIA

Virginia Counseling Association – www.vcacounselors.org

WASHINGTON

Washington Counseling Association – www.wa-counseling.org

Washington Mental Health Counseling Association – www.wmhca.org/

WEST VIRGINIA

West Virginia Counseling Association – <http://wvcounseling.org>