



Course Syllabus

Practicum

COUN F634

Day 4:10-7:10 PM – Room Location

Instructor:

E-mail address:

Telephone:

Office:

Office hours:

Audio Call In:

Video Conferencing:

Course Description: Practicum completion is a two-part process that includes Individual Practicum and Field Practicum, which must be taken over the span of two semesters. Individual Practicum is a prerequisite for Field Practicum. This course is intended to provide individual one-on-one practice in basic counseling skills and techniques under the supervision of a UAF clinical faculty supervisor. Students will meet weekly with two adult clients to complete a total of 20 of the 40 required direct contact hours for practicum. Furthermore, students complete an additional 30 of the 60 hours required for indirect practicum hours. The counselor-in-training will advance to Field Practicum.

Direct hours are defined as: Face-to-face time with clients (individual, family, & group) in: counseling, psychoeducation, testing, case management, consultation, or other direct services to clients.

Indirect hours are defined as: Counseling-related tasks, research on client issues, documentation, tape review, supervision (individual & group), and other agency duties.

Course Prerequisites: You must have prior admittance to the Counseling program or School Counseling Certification program, permission from the instructor, and completed COUN 623 and COUN 647.

Course Objectives: Upon completion of this course, students will be able to identify, utilize, and explain the following areas of the counseling profession based on an understanding of the following 2016 CACREP Standards:

1. Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management (CHMC.3.a)
2. Techniques and interventions for prevention and treatment of a broad range of mental health issues (CHMC.3.b)
3. Ethical standards of professional counseling organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling (f.1.i)

4. Strategies for personal and professional self-evaluation and implications for practice (*f.1.k*)
5. Self-care strategies appropriate to the counselor role (*f.1.l*)
6. The role of the counseling supervision in the profession (*f.1.m*)
7. Multicultural counseling competencies (*f.2.c*)
8. The effects of power and privilege for counselors and clients (*f.2.e*)
9. Theories and models of counseling (*f.5.a*)
10. A systems approach to conceptualizing clients (*f.5.b*)
11. Theories, models, and strategies for understanding and practicing consultation (*f.5.c*)
12. Counselor characteristics and behavior that influence the counseling process (*f.5.f*)
13. Essential interviewing, counseling, and case conceptualization skills (*f.5.g*)
14. Development of measurable outcomes for clients (*f.5.i*)
15. Suicide prevention models and strategies (*f.5.l*)
16. Processes for aiding students in developing a personal model of counseling (*f.5.n*)
17. Methods of effectively preparing for and conducting initial assessment meetings (*f.7.b*)
18. Procedures for identifying trauma and abuse and for reporting abuse (*f.7.d*)
19. Identification of evidence-based counseling practices (*f.8.b*)
20. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning (CMHC *c.1.c*)
21. Record keeping, third part reimbursement, and other practice and management issues in clinical mental health counseling (CMHC *c.2.m*)
22. Community resources and referral sources (SC *g.2.k*)

Course Objectives: By the end of the semester, you will be able to:

- Develop a strong therapeutic alliance by providing a safe and comfortable environment for clients that conveys empathy and understanding, communicates positive regard and acceptance, and encourages open communication.
- Respond authentically and collaboratively with the client by checking your perceptions, impressions, and various interpersonal dynamics within the counseling relationship.
- Maintain emotional presence with the client, respond appropriately to client's presenting concerns and foster the client's self-efficacy (e.g. support client's process in their own personal development, decision making process, and problem-solving skills free from advice giving).
- Synthesize appropriately the client's cultural point of view without imposing your own.
- Demonstrate confidence in purposeful and intentional use of basic counseling skills.
- Foster a holding environment that demonstrates the initial stages of identifying and working with transference and countertransference.
- Seek out learning opportunities, resources, literature, and consultation to support client's goals and objectives.
- Approach feedback from the clinical supervisor and other students with curiosity and openness.
- Utilize feedback from the practicum supervisor and consultants.
- Demonstrate professionalism (e.g. on-time completion of paperwork, punctuality, appropriate behavior, maintaining client confidentiality, and adhering to clinic policies and procedures).

Please note: All topics in this course are taught from a multicultural perspective, which emphasizes the differing experiences, cultures, histories, and perspectives of peoples from a variety of ethnic, gender, racial, and social class backgrounds.

Course Delivery Format: This course will utilize practical application, seminar, lecture, and small group discussion formats. It will be delivered as a face-to-face course. Weekly individual supervision meetings with clinical supervisor will be required.

Required Texts:

Egan, G. (2014). *The skilled helper: A problem-management and opportunity development approach to helping* (10th ed.). Pacific Grove, CA: Brooks/Cole. ISBN-10: 1-285-06571-9

Erford, B. (2015) *40 techniques every counselor should know* (2nd ed.). Hoboken, NJ: Pearson. ISBN 0-13-357174-2

Yalom, I. (2002). *The gift of therapy: An open letter to a new generation of therapists and their patients*. New York: HarperCollins.

Recommended Text:

American Psychiatric Association (2013). *Diagnostic statistical manual for mental health disorders* (5th edition).

American Psychological Association (2010). *Publication Manual of the American Psychological Association* (6th Ed.). Washington, DC: American Psychological Association. ISBN-13: 978-1-4338-0561-5

Jongsma, A., Peterson, L., & Bruce, T. (2014). *The Complete Adult Psychotherapy Treatment Planner* (5th ed.). Hoboken, NJ: Wiley. ISBN-13: 978-1118067864, ISBN-10: 111806786X.

Required Readings:

American Counseling Association (2014). ACA code of ethics. Alexandria, VA: Author.

Bass, A. (2016). Regression, self state work, and the developmental perspective: The application of diverse theoretical perspectives to working with trauma. *Psychoanalytic Dialogues*, 26(3), 259-266.

Beck, R. J. (1994). Encouragement as a vehicle to empowerment in counseling: An existential perspective. *Journal of Rehabilitation*, 60(3), 6.

Borders, L. D. (2012). Dyadic, triadic, and group models of peer supervision/consultation: What are their components, and is there evidence of their effectiveness?. *Clinical Psychologist*, 16(2), 59-71.

Callahan, A., Gifford, V., Renes, S., & Simpson, J. (2015). *Succeeding in supervision*. [In Press].

Cameron, S., & Turtle-Song, I. (2002). Learning to write case notes using the SOAP format. *Journal of Counseling & Development*, 80(3), 286.

Daniel, M., & Carothers, T. (2007). Mental status examination. In M. Hersen, J. C. Thomas, M. Hersen, J. C. Thomas (Eds.), *Handbook of clinical interviewing with adults* (pp. 49-63). Thousand Oaks, CA: Sage Publications Ltd.

Despenser, S. (2004). Case notes in private practice. *CPJ: Counseling & Psychotherapy Journal*, 15(6), 40-44.

- Hays, P. A. (2016a). Conducting a culturally responsive assessment. In *Addressing cultural complexities in practice: Assessment, diagnosis, and therapy* (3rd ed.) (pp. 127-160). Washington, DC, US: American Psychological Association. doi:10.1037/14801-007
- Hays, P. A. (2016b). Understanding clients' identities and contexts. In *Addressing cultural complexities in practice: Assessment, diagnosis, and therapy* (3rd ed.) (pp. 79-99). Washington, DC, US: American Psychological Association. doi:10.1037/14801-005
- Joseph, S. (2015). A person-centered perspective on working with people who have experienced psychological trauma and helping them move forward to posttraumatic growth. *Person-Centered And Experiential Psychotherapies*, *14*(3), 178-190. doi:10.1080/14779757.2015.1043392
- Johnson, L. R., & Sandhu, D. S. (2010). Treatment planning in a multicultural context: Some suggestions for counselors and psychotherapists. In M. M. Leach, J. D. Aten, M. M. Leach, J. D. Aten (Eds.), *Culture and the therapeutic process: A guide for mental health professionals* (pp. 117-156). New York, NY, US: Routledge/Taylor & Francis Group.
- Larsen, D. J., & Stege, R. (2012). Client accounts of hope in early counseling sessions: A qualitative study. *Journal of Counseling & Development*, *90*(1), 45-54.
- Lawson, G., Heirt, S. F., & Getz, H. (2009). A model for using triadic supervision in counselor preparation programs. *Counselor Education & Supervision*, *48*(4), 257-270.
- Mears, G. (2016a). Conducting an intake interview. In I. Marini, M. A. Stebnicki, I. Marini, M. A. Stebnicki (Eds.), *The professional counselor's desk reference* (2nd ed.) (pp. 83-86). New York, NY, US: Springer Publishing Co.
- Mears, G. (2016b). How to develop treatment plans. In I. Marini, M. A. Stebnicki, I. Marini, M. A. Stebnicki (Eds.), *The professional counselor's desk reference* (2nd ed.) (pp. 93-97). New York, NY, US: Springer Publishing Co.
- Merlone, L. (2005). Record keeping and the school counselor. *Professional School Counseling*, *8*(4), 372.
- Meyer, L., & Melchert, T. P. (2011). Examining the content of mental health intake assessments from a biopsychosocial perspective. *Journal of Psychotherapy Integration*, *21*(1), 70-89. doi:10.1037/a0022907
- Pearson, Q. M. (2004). Getting the most out of clinical supervision: Strategies for mental health. *Journal Of Mental Health Counseling*, *26*(4), 361-373.
- Peterson, A. L., Goodie, J. L., & Andrasik, F. (2015). Introduction to biopsychosocial assessment in clinical health psychology. In F. Andrasik, J. L. Goodie, A. L. Peterson, F. Andrasik, J. L. Goodie, A. L. Peterson (Eds.), *Biopsychosocial assessment in clinical health psychology* (pp. 3-7). New York, NY, US: Guilford Press.
- Petrocelli, J. V. (2002). Processes and stages of change: Counseling with the transtheoretical model

of change. *Journal of Counseling & Development*, 80(1), 22.

- Polanski, P. J., & Hinkle, J. S. (2000). The Mental Status Examination: Its Use by Professional Counselors. *Journal Of Counseling & Development*, 78(3), 357.
- Roe, D., Dekel, R., Harel, G., Fennig, S., & Fennig, S. (2006). Clients' feelings during termination of psychodynamically oriented psychotherapy. *Bulletin of The Menninger Clinic*, 70(1), 68-81. doi:10.1521/bumc.2006.70.1.68
- Swift, J. K., & Greenberg, R. P. (2015). Assist in planning for appropriate termination. In *Premature termination in psychotherapy: Strategies for engaging clients and improving outcomes* (pp. 93-104). Washington, DC, US: American Psychological Association. doi:10.1037/14469-005
- Swift, J. K., Greenberg, R. P., Whipple, J. L., & Kominiak, N. (2012). Practice recommendations for reducing premature termination in therapy. *Professional Psychology: Research And Practice*, 43(4), 379-387. doi:10.1037/a0028291
- U.S. Department of Veterans Affairs [VA]. (2012). Suicide risk assessment guide. Veterans Health Administration. <http://www.mentalhealth.va.gov/docs/VA029AssessmentGuide.pdf>
- Walsh, R., & Dasenbrook, N. (2005). Implementing informed consent. American Counseling Association. Alexandria, VA. [http://www.wvbec.org/images/Implementing Informed Consent.pdf](http://www.wvbec.org/images/Implementing%20Informed%20Consent.pdf)
- Watts, R. E., & Pietrzak, D. (2000). Adlerian 'encouragement' and the therapeutic process of solution-focused brief therapy. *Journal of Counseling & Development*, 78(4), 442-447. doi:10.1002/j.1556-6676.2000.tb01927.x
- Whipple, J. L., & Lambert, M. J. (2011). Outcome measures for practice. *Annual Review Of Clinical Psychology*, 787-111. doi:10.1146/annurev-clinpsy-040510-143938

(All required readings are in the dated file folders under the Session Resources section of Blackboard or available from the Rasmuson Library.)

Course Evaluation: Grades (Pass/Fail) are determined by:

- Having demonstrated and met the course objectives/requirements as outlined above.
- Practicum supervisor's evaluation of your understanding, integration, and application of course materials, assignments, and learning opportunities. Your strengths and growing edges will be assessed through counseling sessions with clients, practicum seminars, peer consultation, and clinical supervision.
- Developing self-awareness in your work through journal writing and course assignments that inform client care and supervision.
- Professionalism including on-time arrival to counseling session with clients, practicum seminar, and individual supervision sessions. Counselors-in-training are expected to be punctual, reliable and professional in order to pass this course.
- On-time, thoughtful, and thorough completion of all client paperwork and course assignments.
- Active participation in practicum seminar.

Course Requirements:

- Purchase student **liability insurance**.
- Be familiar with and adhere to all **HIPAA requirements and ON-SITE TRAINING CLINIC policies and procedures**.
- Study and comply with the 2014 **American Counseling Association's (ACA) Code of Ethics** and Standards of Practice: <http://www.counseling.org/Resources/aca-code-of-ethics.pdf>
 - Note: Failure to adhere to HIPAA regulations, ON-SITE TRAINING CLINIC's policies and procedures, and the ACA's 2014 Code of Ethics and Standards of Practice will result in disciplinary actions. Depending upon the severity and duration of the ethical breach, disciplinary actions may include: educative advisories or warnings, being placed on probationary status, suspension of training, or expulsion from training.

- Practicum seminar.
 - **Practicum seminars** will be held on **DAY OF WEEK**. These seminars may include role plays for practical application of counseling skills, discussion of basic concepts from the texts and readings, peer consultation, and group supervision. The content of the seminar will be based upon the group's needs in terms of processing clinical issues and developing necessary counseling skills.
 - **Group supervision** will take place during the practicum seminar. Video recording review of counseling sessions will occur on a rotating and as needed basis.
 - **Discussion board forums** will be posted throughout the semester to facilitate peer consultation. These forums **may not** contain any identifying information regarding clients. They should be used to discuss stuck points, share resources, brainstorm ideas, explore interventions, and provide support to one another. In addition, discussion forums will be used for you to discuss course readings.
 - At the end of the semester, you will provide a comprehensive and professional **case conceptualization and presentation** of your work with 1 of your clients.
 - Attendance and participation in practicum are required.
 - Please participate in discussions and come to class prepared by completing scheduled readings and assignments.
 - You are responsible for the information in the readings regardless of whether or not it is discussed in class.
 - Absence does not relieve you from your responsibility for completing all assignments by their due date or for material presented in a missed class session.
 - You are responsible for providing quality feedback to classmates during group supervision, peer consultation, case presentations and discussion board postings.
 - Your grade is affected by the quality and quantity of in class participation and attendance. Active engagement in class is expected and evidenced by the following:
 - Keeping up to date in all the assigned readings
 - Ability to integrate information
 - Adequately discuss viewpoints
 - Appropriately respond to feedback.

- Counseling Sessions with clients.
 - Every effort will be made to assign you two clients.
 - All services will be held in one of the counseling rooms located in the ON-SITE TRAINING CLINIC. Sessions will be scheduled by the ON-SITE TRAINING CLINIC's administrative assistant who can be reached at (907)474-1999.

- Arrive at least 10 minutes prior to the start of your sessions each week. Come prepared for your client. Be reliable, consistent, and punctual in the delivery of these services. Canceling and rescheduling appointments interferes with client's progress on counseling goals. ***It is expected that you will make every effort to minimize interruptions and changes in service delivery.***
- You will complete a 60 minute comprehensive intake interview with each client.
- Following the interview, a professional **intake report** that is concise, thorough, and comprehensive will be authored by you. It needs to be completed within **7 days** of the intake appointment.
- In collaboration with each client, you will develop a **treatment plan** to guide the counseling process and work toward achieving client goals and objectives. This plan needs to be completed within **7 days** of session 2.
- After the intake and treatment planning sessions, you will provide 8 sessions (50 minutes each) of counseling services to each of your clients. **Progress notes** must be completed following each session. The final session will also include time for feedback from clients to their counselor-in-training. All notes must be entered within **3 days** of services being delivered.
- **Discharge/termination summaries** for both clients must be completed upon termination of services. For 1 client, a **case conceptualization/summary** will be written and utilized as the discharge/termination summary.
- All documentation must be completed in a timely manner according to ON-SITE TRAINING CLINIC policies and procedures. Records will be completed electronically in the ON-SITE TRAINING CLINIC's electronic record keeping system.
- All counseling sessions must be digitally recorded using the ON-SITE TRAINING CLINIC's **authorized equipment only**.
- For sessions 3 and 6 with Client A, you will need to provide a transcribed analysis of the full session by briefly summarizing the content of your client's statement, transcribing verbatim what you said to your client, identifying the skills that you used, and analyzing your statements.
- For a peer's sessions 4 and 7, you will complete a skills analysis of his/her session.
- For session 5 and 8 with Client B, you will need to complete a skills analysis of your session.
- For each session, you will need to complete a supervision preparation form.
- You will have an opportunity to develop a **case conceptualization** of each client that demonstrates your understanding of predisposing, precipitating, perpetuating and protective factors contributing to the client's presenting problem(s). In addition, you will solidify a working theoretic orientation to guide your counseling skills, interventions, and techniques for each client. Your approach to delivering care needs to be supported by literature; therefore, you will be asked to report on the literature you are reading to inform client care. Finally, you will be asked to summarize at least 1 homework assignment for each client. Evidence of completion of these items will be due after session 4.
- At mid-term and end of the semester, you will complete a **key assignment**, which consists of a **self-evaluation** of your counseling skills, abilities, and competencies. Your clinical supervisor will meet with you to review your self-evaluation. At the end of the semester, your clinical supervisor will provide you with a **Formal Practicum Evaluation**.
- **ALL client information** (notes, video recordings, transcripts of session, etc.) must be **maintained in the ON-Site Training CLINIC**. Do **NOT** remove materials pertaining to

any client from the ON-SITE TRAINING CLINIC. Doing so will be investigated as a serious breach in professional conduct.

➤ Client Care

- It is required that you communicate ethical concerns and potential risks to health and safety of clients and/or others directly to your supervisor, practicum instructor, and/or clinic director.
- Client care and counseling interventions must be based on sound clinical judgment informed by the literature and evidence based practices.
- You will be asked to articulate the theoretical orientation from which you are working with each client. This orientation needs to support the client's cultural background and presenting concerns. Treatment goals and interventions must be informed by theory.
- You will be expected to research your client's presenting concerns and provide potential homework assignments supporting the treatment goals articulated in your clients' treatment plans.

➤ Self-awareness journal.

- Following your counseling sessions each week, please complete a 1 page free-write entry into a self-awareness journal. The goal of this assignment is to help you process your own reactions to the counseling session. Please explore ways that you may have both helped and hindered the client's process. Examine transferences and counter-transferences that are emerging. Explore your strengths and growing edges as a counselor-in-training. In addition, please attend to various clinical considerations for your client as you reflect on the counseling relationship and therapeutic alliance. Topics may include gender, ethnicity, religiosity/spirituality, interpersonal relationship dynamics, communication styles, ability/disability status, language, physical health, sexual orientation, sexuality, roles, successes, failures, developmental stages and concerns, emotionality, insightfulness, intelligence, personality structure, family of origin concerns, trauma, abuse, neglect, etc.
- Each week for clinical supervision, please prepare 1 topic from your self-awareness journal pertaining to your counseling sessions to process during supervision.
- Your self-awareness journal will be a private processing tool for your use. The practicum supervisor will not read your journal. Rather, the journal will be checked in your presence during supervision at mid-term and the end of semester to ensure completion; however, the entries will not be read.

➤ Clinical Supervision.

- 50-60 minutes of individual clinical supervision will be offered to you weekly by a practicum supervisor.
- Until both of your clients have fully terminated services with you, you will be required to schedule weekly supervision with your practicum supervisor.
- Please come to your supervision sessions with your reports, progress notes, transcripts, video recording reviews, supervisory preparation forms, and self-awareness journal completed. Supervision will be held in the clinic.
- During supervision, client paperwork will be reviewed.
- Be prepared to show segments of your video recording during session.
- To benefit the most from supervision, be organized, prepare questions in advance, and prioritize concerns.
- You will be asked to complete a self-evaluation at mid-term and the end of semester. Your practicum supervisor will provide you with a mid-term and final evaluation.

- Analysis of Counseling Skills and Peer Feedback
 - Please fully review the video recordings of your counseling sessions with clients prior to supervision.
 - As noted on the course calendar, you will complete a skills analysis of a peer 2 times this semester (sessions 4 and 7). In addition, you will complete a mid-term and final skills analysis of your own work (session 5 and 8).

Passing this course will be based on satisfactory performance and completion of the following:		
1. Practicum Seminar	2. Client Sessions	3. Clinical Supervision
<ul style="list-style-type: none"> ▪ Attendance ▪ Active Engagement and Participation ▪ Punctuality ▪ Preparedness ▪ Provide Quality feedback during group supervision and peer consultation ▪ Maintain openness to feedback during group supervision ▪ Discussion board forums ▪ Case presentation 	<ul style="list-style-type: none"> ▪ Professionalism ▪ Punctuality ▪ Reliability ▪ Adequate development of counseling skills ▪ Conceptualization skills ▪ Strong therapeutic alliance ▪ Intentional and purposeful use of interventions/skills ▪ Clinical paperwork (2 intakes, 2 treatment plans, 16 progress notes, 1 case conceptualization with termination report, and 1 termination summary) 	<ul style="list-style-type: none"> ▪ Signed Supervision Contract ▪ Preparedness ▪ Punctuality ▪ Openness to feedback ▪ Mid-semester eval ▪ End of semester eval ▪ Self-awareness journal ▪ Self-reflection and skill development: video recording reviews with completed supervision preparation forms, transcriptions, and skills analyses
4. Other Important Course Requirements		
<ul style="list-style-type: none"> ▪ Completion of on-site training clinic orientation ▪ Adherence to HIPAA Regulations ▪ Familiarization and observance of on-site training clinic's policies and procedures ▪ Adherence to ACA's Code of Ethics ▪ Acquisition of Student Liability Insurance 		

An incomplete grade (I) will be assigned only if two conditions have been met. First, the student must have completed the majority of course work, written assignments, presentation, and examinations, and earned a grade of "C" or better. Normally, a grade of "I" will be given only when there has been participation until at least the last three weeks of the semester. Second, documented evidence must be submitted to substantiate the fact that course completion was prevented because of personal problems, such as a medical or family emergency. Failing to complete the course, whether due to negligence or indifference, will result in a grade of "F" unless there has been an official course withdrawal. If an "I" grade is assigned, completion of all course work is the responsibility of the student. All course work must be completed within one year following the semester that the "I" grade was given.

Note: In many academic disciplines students are evaluated solely on their academic performance. However, students in the Counseling Program are evaluated on both their academic performance as

well as their professional characteristics. Although a student may be in good academic standing, they must receive satisfactory evaluations from faculty members regarding their professional characteristics in order to continue on in the program. The faculty will evaluate the student's professional characteristics in relation to their ability to become a viable member of the counseling community. Students will meet with the faculty following each evaluation and the results of the evaluation will be discussed. *Insubordinate and argumentative behavior in response to feedback in one or more environments may be a basis for dismissal from the Counseling Program.*

Course Policies: All clinical documentation, Blackboard postings, and course papers are expected to be concise, well-written, thoughtful, and be grammatically correct. All student work needs to be submitted in the means directed in the assignment.

Unless stated otherwise, writing should conform to APA style utilizing the 6th edition of the APA Manual, including citations and references. Students will not be able to resubmit papers due to low scores unless there are special circumstances to consider. Poorly written papers will receive lower grades.

Although it is expected students will attend all class sessions, if a session is missed students are expected to complete a 3-page review of the readings assigned for that session along with their personal reaction. Your personal reaction should address information that stands out the most, provide questions and/or concerns regarding the topics discussed, summarize the information that was most beneficial, and provide your perspective regarding information that should have been included. In addition, you will be expected to review the sessions viewed and discussed during group supervision. After doing so, it is expected that you will provide the instructor with written feedback about the sessions. This feedback will be shared with your classmates. The paper and session reviews are **due prior to the beginning of the next session following the missed class.**

Late assignments will not be accepted. Case presentations will not be rescheduled.

Students are required to obtain a university-issued username for both email and Blackboard. If the university server is not your primary email address, you are expected to set it up so that all emails are forwarded from the university server account. Additionally, students are required to access Blackboard regularly for announcements, documents, and other postings.

Students are expected to be fully present during class, just as you would be fully present for your clients in the future. Therefore, please reserve the sending and receiving of information through texting, instant messaging, or emailing for break time or before and after class. If you need to have your phone on during class, please put it on the vibrate setting. **Please do not multi-task during class.** It is expected that your attention be focused on course material and activities for the duration of our class time.

Students should practice thoughtful, considerate, and respectful communication in all interactions with your fellow students and faculty members. **All personal information shared in class, or within the course Blackboard site, should be kept confidential.** Instructors do keep information confidential, but there may be times that other teaching professionals may be consulted if deemed necessary.

Students must abide by academic integrity standards as outlined in the Student Code of Conduct found in the UAF Catalog: Academic and Regulations Chapter. The principles of the student code are designed to encourage communication, foster academic integrity and defend freedoms of inquiry,

discussion, and expression across the university community. The UAF Code of Conduct can be found online at http://www.uaf.edu/catalog/current/academics/regs3.html#Student_Conduct
In this course, if it is found that a student has knowingly plagiarized they may receive a failing grade for the course. Remember to use proper citation to avoid plagiarism.

All papers need to be word-processed, double-spaced, and include a list of references where applicable. Papers are expected to be well-written, well thought out, and be grammatically correct. Unless stated otherwise, writing should conform to APA style utilizing the 6th edition of the APA Manual, including citations and references. Poorly written papers will receive lower grades.

Disability Services: Students with a physical or learning disability, who may need academic accommodations, should contact the Disability Services office. UAF Disability Services is located within the Center for Health and Counseling in the Whitaker Building on the corner of Yukon Drive and North Chandalar (Room 208). The accessible entrance is located on North Chandalar Drive. UAF Disability Services can be contacted by telephone (474-5655) or e-mail (uaf-disabilityservices@alaska.edu). Once documentation of your disability is received, Disability Services will contact me regarding the necessary accommodations.

Support Services: Writing support services are available on the UAF Campus in the Writing Center, located in 801 Gruening, UAF, 907-474-5314, and on the UAA Campus at the Reading/Writing Center, located in 118 Sally Monserud Hall, UAA, 907-786-6918. Note: to access this Center at UAA, students must register in the English Department (907-786-4355) at a rate of \$12 per semester. Students who are not on the UAA or UAF campus should contact the Center for Distance Education for details regarding support services that are available by distance.

Plagiarism: Plagiarism is representing someone else's ideas and work as your own. Plagiarism includes not only copying verbatim, but also rephrasing the ideas of another without properly acknowledging the source. As you prepare and submit work to meet course requirements, whether a draft or a final version of a paper or project, you must take great care to distinguish your own ideas and language from information derived from sources. Sources include published primary and secondary materials, electronic media, and information and opinions gained directly from other people.

The University of Alaska Board of Regents has clearly stated in BOR Policy that discrimination, harassment and violence will not be tolerated on any campus of the University of Alaska. If you believe you are experiencing discrimination or any form of harassment including sexual harassment/misconduct/assault, you are encouraged to report that behavior. If you report to a faculty member or any university employee, they must notify the UAF Title IX Coordinator about the basic facts of the incident. Your choices for reporting include: 1) You may access confidential counseling by contacting the UAF Health & Counseling Center at 474-7043; 2) You may access support and file a Title IX report by contacting the UAF Title IX Coordinator at 474-6600; 3) You may file a criminal complaint by contacting the University Police Department at 474-7721.

Tentative Course Schedule

*Subject to change as necessary. Additional readings will be posted on Blackboard over the semester.
Additional work may be assigned to meet course requirements.*

Topics To Be Addressed	Due Dates and Items Due	CACREP Standard
<p>Discussion Board Postings and Responses For each seminar, please post and respond to the discussion board forums. Forums will include peer consultation, discussion questions/topics from practicum supervisor, and questions or concerns from students for practicum supervisor to answer or respond.</p>	Discussion Board Posting Required for each seminar. Due prior to the beginning of class for each scheduled seminar.	
<p>Orientation Topics: On-site Training Clinic orientation, HIPAA Compliance, ACA Code of Ethics and Quiz, Electronic Health Records System, and OQ (Outcome Measure) Training Reading: Whipple & Lambert, 2011; ACA Code of Ethics</p>	Complete the Orientation Training and Assignments on Blackboard prior to the first class. Submit proof of insurance and annual disclosure statement to Graduate Advisor.	<i>f.8.b; f.1.i; CMHC.2.m;</i>
<p>Seminar 1 Topics: Introductions, Course Overview, Syllabus Review, Intakes, Informed Consent, and Basic Counseling Skills Readings: Syllabus; Hays, 2016a; Hays, 2016b; Mears, 2016a; Meyer & Melchert, 2011; Peterson et al., 2015; Walsh & Dasenbrook, 2005. Role Play Basic Microskills</p>	MM/DD Record a Role Play Intake Session	<i>f.2.c; f.5.g; f.5.b; f.7.b; CMHC.3.a</i>
<p>Seminar 2 Topics: The Helping Relationship, Treatment Planning, and Basic Counseling Skills Readings: Egan pp. 1-68; Johnson & Sandhu, 2010; Mears, 2016b Role Play Basic Microskills</p>	MM/DD Record a Role Play Treatment Planning session. Prepare for supervision of this session prior to seeing clients. Due: Resource cards for clients at Intake Appts	<i>CMHC c.1.c; CMHC.3.a; CHMC.3.b; f.1.m; f.2.c; f.5.g; f.5.i; f.8.b; SCg.2.k</i>
<p>Seminar 3 Topics: Relationship Building Skills: Empathic Presence, Tuning In, Listening Skills; Basic Counseling Skills; Mini Mental Status Exam; Progress Notes Readings: Egan pp. 71-103; Callahan et al., 2015; Cameron & Turtle-Song, 2002; Daniel & Carothers, 2007; Polanski & Hinkle, 2000. Role Play Basic Microskills Group supervision</p>	MM/DD Begin seeing clients. Begin weekly Individual Supervision.	<i>CMHC.1.c; CHMC.3.a; f.1.m; f.5.a; f.5.g; f.5.f</i>
Seminar 4 Topics: Empathic Responding; Probing &	MM/DD	<i>CMHC.1.c;</i>

<p>Summarizing; SFBT Techniques; Progress Notes</p> <p>Readings: Egan pp. 104-157; Erford Section 1; Despenser, 2004; Merlone, 2005</p> <p>Group supervision and session review</p>	<p>Notes; sup prep form; session reviews; journal</p> <p>Due: Intakes Finalized</p>	<p>CMHC.3.b; f.5.a; f.5.g; f.5.f</p>
<p>Seminar 5 Topics: Client Self-Challenge, Client New Perspectives & Behaviors, Cognitive Behavioral Techniques, Stages of Change</p> <p>Readings: Egan pp. 158-213; Erford Section 6; Petrocelli, 2002</p> <p>Group supervision and session review</p>	<p>MM/DD</p> <p>Notes, Sup prep form; session reviews; journal</p> <p>Due: Transcript (session 3); Treatment Plan Finalized</p>	<p>CMHC.1.c; CMHC.3.b; f.1.k; f.5.a; f.5.g; f.5.f</p>
<p>Seminar 6 Topics: Clinical Supervision, Gestalt & Psychodrama Techniques, Mindfulness Techniques, Premature Termination, Suicide Risk Assessment</p> <p>Readings: Erford Sections 3 & 4; Borders, 2012; Pearson, 2004; Swift et al., 2012; VA, 2012</p> <p>Group supervision and session review</p>	<p>MM/DD</p> <p>Notes; sup prep form; session reviews; journal</p> <p>Columbia Suicide Severity Rating Scale (CSSRS) Training</p> <p>Due: Peer's Skills Analysis (session 4); CSSRS Certificate of Completion</p>	<p>CMHC.1.c; CMHC.1.c; CMHC.3.b; f.1.m; f.1.k; f.5.a; f.5.f; f.5.g; f.5.l</p>
<p>Seminar 7 Topics: Problem Management & Opportunity-Development Approach, Client Telling Their Stories, Humanistic-Phenomenological Techniques, Working with Trauma</p> <p>Readings: Egan pp. 215-281; Erford Section 5; Bass, 2016; Joseph, 2015;</p> <p>Role play advanced counseling skills</p> <p>Group supervision and session review</p>	<p>MM/DD</p> <p>Notes; sup prep form; session reviews; journal</p> <p>Due: Journal Check; Mid-term evaluation</p>	<p>CMHC.1.c; CMHC.3.b; f.1.k; f.5.a; f.5.f; f.5.g;</p>
<p>Seminar 8 Reading: Designing Problem Managing Goals— Possibility for a Better Future; Goals, Outcomes, Impact—Commitment; Adlerian or Psychodynamics Techniques; Hope, Self-Efficacy, Encouragement</p> <p>Readings: Egan pp. 282-341; Erford Section 2; Beck, 1994; Larsen & Stege, 2012; Watts & Pietrzak, 2000</p> <p>Role play advanced counseling skills</p> <p>Group supervision and session review</p>	<p>MM/DD</p> <p>Notes, sup prep form; session reviews; journal</p> <p>Due: Theoretical orientation, homework, lit review form; Mid-term Skills Analysis (session 5)</p>	<p>CMHC.1.c; CMHC.3.b; f.1.k; f.5.a; f.5.f; f.5.g;</p>
<p>Seminar 9 Reading: Planning the Way Forward, Moving from Planning to Action or Inaction, Resilience, Social Learning Techniques</p> <p>Readings: Egan pp. 342-404; Erford Section 7</p> <p>Role play advanced counseling skills</p> <p>Group supervision and session review</p>	<p>MM/DD</p> <p>Notes, sup prep form, session reviews; journal</p> <p>Due: Transcript (session 6)</p>	<p>CMHC.1.c; CMHC.3.b; f.1.k; f.5.a; f.5.g;</p>
<p>Seminar 10 Reading: Termination</p> <p>Readings: Roe, 2006; Swift & Greenberg, 2015</p> <p>Role play basic counseling skills</p> <p>Discuss Feedback session</p> <p>Group supervision and session review</p>	<p>MM/DD</p> <p>Notes; sup prep form; session reviews; journal</p> <p>Due: Peer's Skills Analysis (session 7)</p>	<p>CMHC.1.c; CMHC.3.b; f.1.k; f.5.g;</p>
<p>Seminar 11 Reading: Yalom pp. Introduction – 101</p>	<p>MM/DD</p> <p>Notes, sup prep form, session</p>	<p>CMHC.1.c; CMHC.3.b;</p>

Role play termination session Group supervision and session review	reviews; journal Due: Feedback questions & Resource lists	<i>f.1.k; f.5.f; SC g.2.k</i>
Seminar 12 Reading: Yalom pp. 102-196	MM/DD Notes; sup prep form; session reviews; journal	<i>CMHC.1.c; CMHC.3.b; f.1.k; f.5.f;</i>
Case Presentations	Due: Final Skills Analysis (session 8)	
Seminar 13 Reading: Yalom pp. 197-259	MM/DD Notes; sup prep form; session reviews; journal	<i>CMHC.1.c; CMHC.3.b; f.1.k; f.5.f;</i>
Case Presentations	Due: Case and Termination Summaries, All finalized notes, reports & summaries	
Seminar 14	MM/DD Due: Final Evaluation; Journal Check; All Paperwork Finalized	<i>CMHC.1.c; CMHC.3.b; f.1.k; f.5.f;</i>
Case Presentations		

Evaluation Component	CACREP 2016 Standard Assessed
Proof of Student Liability Insurance/Disclosure Statement	<i>f.1.i</i>
ACA Ethics Quiz	<i>f.1.i; f.7.d</i>
HIPAA Compliance Training	<i>f.1.i</i>
On-Site Training Clinic Orientation	<i>f.1.i</i>
Weekly Blackboard Discussion Boards	<i>f.1.k; f.5.a; f.5.f; f.5.n</i>
Emergency Resource List	<i>SCg.2.k</i>
2 Intakes	<i>CMHC.2.m; CMHC.3.a; f.5.b; f.5.g; f.7.d</i>
2 Treatment Plans	<i>CMHC.2.m; CMHC.3.a; CMHC.3.b; f.5.a; f.5.b; f.7.b; f.7.d; f.8.b</i>
16 Progress Notes	<i>CMHC.2.m; f</i>
1 Case Conceptualization/Treatment Summary	<i>CMHC.2.m; CMHC.3.a; f.5.b; f.7.d</i>
1 Discharge Summary	<i>CMHC.2.m; f.7.d</i>
Termination Resource and Referral List	<i>SCg.2.k</i>
Weekly Supervision Prep Forms	<i>f.1.k; f.1.m</i>
2 Session Transcripts and Associated Analyses	<i>f.1.k; f.5.n</i>
2 Peer Skills Analyses	<i>f.1.k; f.5.n</i>
2 Self Analyses of Skills	<i>f.1.k; f.5.n</i>
Mid and End of Semester Self-Evaluations	<i>f.1.k; f.5.n</i>
2 Mini-Theoretical Orientation, Case Conceptualization, Literature Review, and Homework Assignment	<i>CMHC.3.a; f.5.a; f.5.b</i>
Case Presentation	<i>f.5.a; f.5.b</i>
Self Awareness Journal	<i>f.1.k; f.1.l; ; f.5.n; f.5.f</i>
CSSRS Training and Certificate	<i>f.5.l</i>
Weekly Group Supervision	<i>CMHC.3.b; ; f.1.k; f.5.f; f.8.b</i>
Weekly Individual Supervision	<i>f.1.k; f.1.m; f.5.n; f.5.f; f.8.b</i>