



## **PRACTICUM IN COUNSELING COUNSELING 5065**

*Thank you for setting a great example for our students. Your commitment to following mask mandate and social distancing guidelines has played a significant role in the reduction of the spread of the COVID virus at ULM.*

*Due to present circumstances, ULM students, employees, and guests should continue to follow current CDC guidelines by requiring masking and social distancing in all classrooms and buildings throughout campus.*

*Everyone is encouraged to take advantage of frequent handwashing, available hand sanitizer, masks, and testing opportunities.*

*As this is an ever-changing situation, please continue to monitor university communication. For more information click [here](#).*

### **I. Contact Information**

**Instructor: Michelle Dobson, Ph.D., LPC, RPT**

**Phone Number: 239-770-4829 (texts between 8am-8pm CST will be answered ASAP)**

**Email Address: [dobson@ulm.edu](mailto:dobson@ulm.edu)**

**Office Location: Zoom online**

**Office Hours: By appointment only**

**Preferred mode of communication with professor: ULM email**

**Preferred mode of communication with other students: ULM email**

**Credit hours: 3**

**Please Note: All students are asked to use university provided e-mail accounts when emailing his or her professor. Students' personal e-mail accounts should not be used in this case as [University Policy](#) must be followed. Emails and voicemail messages will receive a response within 48 hours (during university operating hours).**

- II. COURSE DESCRIPTION:** In this online course, instruction and supervision are via teleconferencing through Zoom. Students provide screening, intake, assessment, and counseling for clients at approved sites. Students may need to cover vocational, educational, personal, school, and family issues as needed with each client to help overcome personal issues. Students will perform counseling under site supervision in their intended occupational setting, a university practicum supervisor, and an Internship student.

**Rationale:** The possession of counseling skills and the ability to apply them is of critical importance to a counselor. This is where students move their theory into practice. Counselors must possess special skills and insight to be effective and beyond that, application must be driven by and consistent with the counselor's personal theory of counseling. This course will allow students to

apply theory and technique learned in the classroom. This course, and the total program curriculum of which it is as a part, is accredited by the Council on the Accreditation for Counseling and Related Educational Programs (CACREP). As such, it is to be taken in its proper sequence to maximize learning through the ULM Interactive Learning Model. This course is an advanced level course. The pre-requisite courses and/or learning experiences are stated in the Practicum Application.

**III. EMERGENCY:** In the event of a crisis or to prevent a future crisis, contact your site supervisor and faculty supervisor at their given phone numbers.

Even if you have notified your site supervisor or the situation is no longer a crisis, it is important for your university supervisor to be informed.

**IV. COURSE PREREQUISITES/COREQUISITES:**

Prior to enrolling in Practicum, student must have successfully completed COUN 5005, COUN 5011, COUN 6067, and the Summer Workshop.

**V. INSTRUCTIONAL METHODS:** Lecture, individual supervision, group supervision, site supervision and/or supervision via videoconferencing, review of written documentation, and formal evaluation at the end of the semester.

**VI. COURSE OBJECTIVES**

Practicum Objectives/Student Learning Outcomes:

Practicum is designed to refine counseling and interviewing skills and to develop new skills, including individual, couple, family, and group counseling skills. Through effective use of individual/triadic and group supervision, the student is expected to expand his or her repertoire of counseling techniques and interpersonal relationship skills.

<b>Objectives</b>
<b>The student will be able to:</b>
A. Understand the basic principles of human growth, development, wellness, prevention, and learning and how these principles facilitate the learning and counseling process when working with clients;
B. Demonstrate a clear and concise understanding of a, evidenced-based counseling theory;
C. Demonstrate basic counseling skills and techniques appropriate when working with clients; including assessing for addiction, aggression, self-harm, harm to others, suicide risk, etc.
D. Demonstrate a knowledgeable understanding of one or two theories beyond working with clients;
E. Demonstrate an understanding of multicultural issues in counseling; effectively utilize counseling strategies with diverse populations in working with groups and individuals; in school settings know and implement collaboration models for crisis/disaster preparedness and response, and the use of assessments to promote the academic, career, and personal/social development of students

F. Establish and maintain counseling relationships consistent with the Ethical Standards of the American Counseling association, including supervision models, practices, and processes;
G. Skillfully conduct intake and assessment interviews and write concise reports including diagnosis and biopsychosocial case conceptualization from the DMS-5;ICD-1; in school counseling, applies relevant research findings
H. Develop the ability to write concise accurate sessions reports and do so in a timely manner;
I. Establish and maintain constructive, facilitative, and on-going relationship with clients, supervisors, colleagues, through the use of differentiated interpersonal skills;
J. Understand the dynamics of individual behavior in the counseling relationship and recognize, if necessary, the need for change in attitudes and behaviors;
K. Discern and implement the counseling mode most facilitative to the problem presented by the client. (This implies recognition of referral responsibility when the client can best be served in this manner);
L. Recognize personal and professional limitations and make proper referrals that will enhance the nature of the counseling relationship; has knowledge of a variety of community resources;
M. Develop a personal style of counseling; recognize personal and professional limitations and advocate for the client by making a proper referral from community resources;
N. Utilize direct supervision and feedback from the professor and from peers;
O. Demonstrate the ability to maintain systematic records of interactions with clients including session reports, summary reports, termination reports, etc.
P. Demonstrate knowledge of personal and professional self-evaluation strategies and their implications for practice; assessments for diagnostic and intervention planning, and assesment results to diagnose developmental/behavioral/mental disorders
Q. Understand how to use developmentally appropriate career counseling interventions and assessments; enviormental assessments, systematic behavioral observations, symptom checklists, personality and psychological testing
R. Demonstrate the ability to apply developmentally appropriate individual, couple, family, and group counseling interventions and treatment plans

## VII. COURSE TOPICS

*Theories*

*Treatment and Treatment Planning*

*Legal and Ethical Issues*

*Maladaptive Behavior (Psychopathology and Diagnosis)*

*Assessment*

*Human Growth and Development*

*Crisis Intervention*

*Multicultural Issues and Considerations*

*Addictions*  
*Group Work*  
*Career Counseling*  
*School Counseling*

### VIII. INSTRUCTIONAL METHODS AND ACTIVITIES

Lecture, individual supervision, group supervision, site supervision and/or supervision via videoconferencing (zoom), review of written documentation, and formal evaluation at the end of the semester.

#### Class Structure

Time	Activity
Time/day to be determined by Instructor	<ul style="list-style-type: none"> <li>• <b>Check-In</b></li> <li>• <b>Announcements</b></li> </ul>
	<ul style="list-style-type: none"> <li>• <b>Supervision</b></li> <li>• <b>Brief Client Conceptualizations</b> (Client Bio, Presenting Problems, Theoretic Approach and Interventions Applied, Client Progress and Prognosis)</li> <li>• <b>Questions/feedback</b></li> </ul>

**Attendance and Participation:** Class attendance and participation are required. (Two absences or two missed appointments, or combination, will result in lowering of grade by one letter or possible repeating of practicum.). **A minimum of one and one-half (1 ½) hours per week of group supervision with the university supervisor and other students and one hour per week of site supervision is required for participation.**

This course is a combination of online group supervision, individual supervision, online presentations, and written assignments. Students are expected to participate in class exercises and discussions, develop case conceptualizations, and obtain feedback on student evaluation of competencies. The instructional philosophy for the current course is based on a learning-centered, outcome-based approach, which is briefly summarized below:

**Learning Centered.** A cross-disciplinary, constructivist pedagogical model, learning- or learner-centered education refers to designing educational curricula that focus on promoting active student learning of specific skills and knowledge rather than mastery of content. In this approach, learning is the focus of curriculum design. Student learning is frequently measured to determine whether students are meaningfully engaging the material and applying the information to case studies. Students are active in this process, applying and using knowledge rather than trying to memorize or analyze it. Clearly defined learning objectives and criteria are used to facilitate student learning and democratized the student-teacher relationship. In this course, students will be learning information using experiential activities to enhance understanding and application.

**Outcome-Based:** Closely related to learning-centered, outcome-based learning refers to designing curriculum around the final learning outcomes or objectives. In the case of this course, the learning objectives focus on learning aspects of theory that are relevant to everyday practice. Thus, learning is

measured through experiential activities and outcome measures.

## **IX. EVALUATION AND GRADE ASSIGNMENT:**

Satisfactory completion of practicum depends on the **quality** of work done as well as **quantity**. This course offers students an opportunity to apply and practice the various skills and theories they have learned from all previous course work. The work expected should indicate clearly that the student possesses the skills appropriate for entering the counseling profession and be able to adequately counsel a general population of clients. Whereas some assignments will be graded (recordings and conceptualization), other assignments must be completed (hours and paperwork) and be given a satisfactory mark by the supervisors (evaluations) before passing the class.

### **Required Hours (Needed to pass)**

Conduct a minimum of 100 hours of supervised practicum experience in individual counseling. At least 40 of these 100 hours must be direct service with clients.

- a. At least four of these hours (sessions) must be with someone of a different cultural background than yourself.
- b. At least two of these sessions must be with someone who has a physical, and/or emotional, and/or mental disadvantage.
- c. At least two of these clients must be seen a minimum of four times.

### **Paperwork Submitted (Needed to pass)**

It will be your responsibility to have your Hours Logs, midterm/final faculty/site supervisors' evaluations, and your site evaluation completed and submitted by due date. If you believe you are not getting enough hours to complete the required 60 indirect and 40 direct, please contact me ASAP. It would be wise to save your logs to multiple sources just in case something happens to your main source.

### **Recordings**

Students will present a video or audio recorded for class review. The session should demonstrate your chosen theoretical orientation and effective counseling skills in helping your client. If your site does not allow video or audio recording, then your site supervisor will need to complete a Live Observation form.

### **Case Conceptualization (100 pts.)**

As you begin seeing clients, you will choose one client you have seen more than three times to conduct a case conceptualization on to be presented during group supervision. The case conceptualization will demonstrate your ability to understand your client through the lens of your chosen theory and how it views human nature, pathology, wellness, counselor/client relationship, techniques, interventions for change, etc. ***You will present your case conceptualization to the class as a Power Point presentation and submit it in written form.*** Please see below for the template, rubric, and example when writing your conceptualization. Written case conceptualization and PowerPoint need to be submitted in the course room at least one week before the last day of class.

### **Supervisors' Evaluation (Needed to pass)**

A formal evaluation will be conducted by your site and university supervisors during Midterm and Finals. The evaluation is to help you with specific challenges and areas of growth observed by the supervisor. To complete the Practicum course, your site and university supervisors must agree that based on your formal and informal evaluations you are ready to move on to Internship. If for some reason your supervisors do not see that you are prepared and ready to move on to Internship, you

will either be required to repeat Practicum or put on remediation.

**Assignment points can be interpreted as the following:**

A+ to A- = 100-90%  
B+ to B- = 89 – 80%  
C+ to C- = 79 –70%  
D+ to D- = 69 – 60%  
F = 59-0%

**X. CLASS POLICIES AND PROCEDURES**

A. Textbook(s) and Materials:

**Recommended (Optional):**

Hodges, S. (2011). *The Counseling and Practicum and Internship Manual*. New York, NY: Springer.

Kotler, J. (2017). *On Being a Therapist (5<sup>th</sup> Edition)*. New York, NY: Oxford.

- B. **Attendance Policy:** Class attendance and participation are required. (**Two absences or two missed appointments**, or combination resulting in two misses, will result in lowering of grade by one letter grade or possible repeating of practicum.). A minimum of one and one-half (1 ½) hours per week of group supervision with the university supervisor and other students and one hour per week of site supervision is required for participation.
- C. **Make-up Policy:** There are no make-up assignments and no late assignments accepted unless student can provide official emergency documentation supportive of delay in submission or missed submission. This documentation will need to be submitted to the professor within three weeks of the missed assignment and will be accepted at the discretion of the professor.
- D. **Course Evaluation Policy:** At a minimum, students are expected to complete the online course evaluation.
- E. **Student Services:** Information about ULM student services, such as Student Success Center ([www.ulm.edu/studentssuccess/](http://www.ulm.edu/studentssuccess/)), Counseling Center ([www.ulm.edu/counselingcenter/](http://www.ulm.edu/counselingcenter/)), Special Needs ([www.ulm.edu/counselingcenter/special.htm](http://www.ulm.edu/counselingcenter/special.htm)), and Student Health Services, is available at the following Student Services website [www.ulm.edu/studentaffairs/](http://www.ulm.edu/studentaffairs/).
- F. **Emergency Procedures:** In the event of a crisis or to prevent a future crisis, contact Dr. Matthews immediately by cell phone, (214) 566-0822 or by email [cymatthews@ulm.edu](mailto:cymatthews@ulm.edu). If for any reason you are unable to reach Dr. Matthews, contact Dr. Frusha at office (318) 342.3124 or Dr. Hale at (318) 342-1349.

Even if you have notified your site supervisor or the situation is no longer a crisis, it is important for your university supervisor to be informed.

- G. **Discipline/Course Specific Policies:** All assignments will be graded and returned to student within a week of submission unless otherwise notified by instructor. There are no make-up or late assignments (see policy above). All assignments must be submitted in APA format unless otherwise notified by instructor.

### **Student Services:**

The University of Louisiana at Monroe strives to serve students with special needs through compliance with Sections 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. These laws mandate that postsecondary institutions provide equal access to programs and services for students with disabilities without creating changes to the essential elements of the curriculum. While students with special needs are expected to meet our institution's academic standards, they are given the opportunity to fulfill learner outcomes in alternative ways. Examples of accommodations may include, but are not limited to, testing accommodations (oral testing, extended time for exams), interpreters, relocation of inaccessible classrooms, permission to audiotape lectures, note-taking assistance, and course substitutions.

Information about ULM student services can be found via these links:

- Student Success Center [www.ulm.edu/studentsuccess](http://www.ulm.edu/studentsuccess)
- Counseling Center [www.ulm.edu/counselingcenter/](http://www.ulm.edu/counselingcenter/)
- Special Needs at [www.ulm.edu/studentaffairs/](http://www.ulm.edu/studentaffairs/)
- Library [www.ulm.edu/library/reference.html](http://www.ulm.edu/library/reference.html)
- Computing Center Help Desk [www.ulm.edu/computingcenter/helpdesk](http://www.ulm.edu/computingcenter/helpdesk)
- Current college's policies on serving students with disabilities can be obtained on the ULM website: [www.ulm.edu/counselingcenter/](http://www.ulm.edu/counselingcenter/)

If you need accommodation because of a known or suspected disability, you should contact the Director for Disabled Student Services at:

Voice phone: 318-342-5220

Fax: 318-342-5228

Walk-In: ULM Counseling Center, 1140 University Avenue (this building and room are handicapped accessible).

Mental Wellness on the ULM Campus

If you are having any emotional, behavioral, or social problems and would like to talk with a caring, concerned professional, please call one of the following numbers:

- The ULM Counseling Center: 318-342-5220
- The Marriage and Family Therapy Clinic: 318- 342-9797
- The Community Counseling Center: 318-342-1263

Remember that all services are offered free to students, and all are strictly confidential.

If you have special needs that I need to be made aware of, you should contact me within the first two days of class.

### **Sexual Harassment or Gender-Based Discrimination**

*Title IX of the Education Amendments of 1972 prohibits sex discrimination against any participant in an educational program or activity that receives federal funds, including federal loans and grants. Furthermore, Title IX prohibits sex discrimination to include sexual*

*misconduct, sexual violence, sexual harassment and retaliation. If you encounter sexual harassment or gender-based discrimination, please contact the Title IX Coordinator at 318-342-1004; you may also file a complaint online, 24 hours a day, at: [www.ulm.edu/titleix](http://www.ulm.edu/titleix)*



# ULM Counseling Program Practicum Evaluation

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Practicum Site: \_\_\_\_\_ Site Supervisor: \_\_\_\_\_

Please indicate student's skill/performance levels in the following areas by circling the appropriate number. Please keep in mind that faculty members are looking, in part, for growth. A frank evaluation at the end of Practicum may allow for growth to be demonstrated during the Internship phase. Open-ended comments are requested the last page of the evaluation.

(1) Unsatisfactory (2) Adequate (3) Good (4) Very Good (5) Outstanding (N/A) Not Applicable/Not Observed

## PROCESS AND SKILLS:

- |  |               |
|--|---------------|
| 1. Individual counseling skills.   | 1 2 3 4 5 N/A |
| 2. Couple and family counseling skills.  | 1 2 3 4 5 N/A |
| 3. Group facilitation skills.  | 1 2 3 4 5 N/A |
| 4. Listening skills.   | 1 2 3 4 5 N/A |
| 5. Use of open-ended questions/responses.  | 1 2 3 4 5 N/A |
| 6. Ability to identify and explore problems.   | 1 2 3 4 5 N/A |
| 7. Ability to conceptualize accurate diagnoses.  | 1 2 3 4 5 N/A |
| 8. Assists clients through stages of problem-solving.  | 1 2 3 4 5 N/A |
| 9. Ability to develop a treatment plan.  | 1 2 3 4 5 N/A |
| 10. Ends counseling sessions effectively.  | 1 2 3 4 5 N/A |
| 11. Individualizes intervention strategies to each client, with attention to needs of diverse populations. | 1 2 3 4 5 N/A |
| 12. Selection and/or use of appropriate assessments, with attention to cultural bias.                      | 1 2 3 4 5 N/A |
| 13. Ability to assess for threat of harm to self/others.   | 1 2 3 4 5 N/A |

## PROFESSIONAL DISPOSITIONS:

- |   |               |
|---|---------------|
| 1. Displays commitment to profession.   | 1 2 3 4 5 N/A |
| 2. Practices ethical behavior.  | 1 2 3 4 5 N/A |
| 3. Maintains client confidentiality and confidentiality of case records.          | 1 2 3 4 5 N/A |
| 4. Engages in positive/professional working relationship with clients/colleagues. | 1 2 3 4 5 N/A |
| 5. Actively seeks consultation/supervision and accepts and uses feedback.         | 1 2 3 4 5 N/A |
| 6. Takes initiative in learning new skills.                                       | 1 2 3 4 5 N/A |
| 7. Demonstrates good judgment.  | 1 2 3 4 5 N/A |
| 8. Is punctual and professional.  | 1 2 3 4 5 N/A |
| 9. Recognizes own competencies.   | 1 2 3 4 5 N/A |
| 10. Communicates clearly.   | 1 2 3 4 5 N/A |
| 12. Recognizes own deficiencies and works to overcome them.                       | 1 2 3 4 5 N/A |
| 13. Treats others with courtesy and respect.                                      | 1 2 3 4 5 N/A |

*If intern is a school counseling student, please also complete the items below:*

**SCHOOL COUNSELING PROGRAM ONLY:**

- 1. Maintains appropriate documentation in student records, including computer-assisted record keeping. 1 2 3 4 5 N/A
- 2. Makes appropriate referrals to school and/or community resources. 1 2 3 4 5 N/A
- 3. Consults appropriately with teachers, parents, and administrators. 1 2 3 4 5 N/A
- 4. Understands and effectively maintains balance among responsibilities to students, staff, and parents. 1 2 3 4 5 N/A
- 5. Demonstrates understanding of legal issues related to working with minors. 1 2 3 4 5 N/A
- 6. Provides appropriate individual and group counseling as well as classroom guidance to promote student development. 1 2 3 4 5 N/A
- 7. Assesses and interprets student strengths and needs, recognizing uniqueness in culture, language, values, background, and abilities. 1 2 3 4 5 N/A
- 8. Assesses barriers impeding student development. 1 2 3 4 5 N/A
- 9. Analyzes student assessment information to produce valid inferences in order to understand individual student needs and assess program effectiveness. 1 2 3 4 5 N/A
- 10. Conducts programs designed to enhance academic development. 1 2 3 4 5 N/A
- 11. Utilizes differentiated instructional strategies to promote student achievement. 1 2 3 4 5 N/A
- 12. Utilizes counseling theories effectively in school settings. 1 2 3 4 5 N/A
- 13. Follows school policies and procedures. 1 2 3 4 5 N/A

**MAJOR STRENGTHS:**

**AREAS IN NEED OF IMPROVEMENT:**

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Student Signature

Date

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Site Supervisor Signature

Date

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University Instructor Signature

Date

**University of Louisiana-Monroe  
Counseling Program  
Evaluation of Site and Site Supervisor Form by Student**

<b>Student:</b>			
<b>CWID:</b>			
Circle one:	<b>Practicum</b>	<b>Internship I</b>	<b>Internship II</b>
<b>Semester:</b>	Fall _____	Spring _____	Summer _____
<b>Site:</b>			
<b>Site Supervisor Name &amp; Credentials:</b>			

**Evaluation of Site**

<b>Circle the number that best reflects the statement.</b>	Poor	Adequate			Excellent
	1	2	3	4	5
1. I received an orientation to my site at the beginning of my practicum/internship that included a tour of the site, introduction to staff, and overview of site policies and procedures.	1	2	3	4	5
2. I had access to resources at my site (use of copier, access to my client's records, and additional clinical tools) that were useful in my work with clients.	1	2	3	4	5
3. Ethical and legal issues pertaining to my site were discussed at the beginning of my practicum/internship.	1	2	3	4	5
4. The environment was professional and respectful.	1	2	3	4	5
5. Staff members interacted in a collegial manner.	1	2	3	4	5
6. I had the opportunity to work with a diverse caseload of clients.	1	2	3	4	5

**Evaluation of Site Supervisor**

<b>Circle the number that best reflects the statement.</b>	Poor	Adequate			Excellent
	1	2	3	4	5
1. My supervisor provided consistent, weekly supervision.	1	2	3	4	5
2. My supervisor was approachable and available to answer my questions.	1	2	3	4	5
3. The supervision I received was helpful and supportive.	1	2	3	4	5
4. I was given weekly feedback on my counseling skills.	1	2	3	4	5
5. My supervisor reviewed my counseling skills (during session and/or reviewing tapes).	1	2	3	4	5
6. Time was spent during supervision completing case review and reviewing case notes.	1	2	3	4	5
7. My supervisor instructed me on procedures for implementing a crisis plan.	1	2	3	4	5
8. My supervisor recognized my strengths as a counselor-in-training.	1	2	3	4	5
9. My supervisor modeled/role-played skills when needed.	1	2	3	4	5
10. My supervisor provided feedback on areas of improvement to enhance my counseling skills.	1	2	3	4	5
11. I felt comfortable discussing problems with clients and/or my site.	1	2	3	4	5
11. My supervisor listened to my ideas and suggestions.	1	2	3	4	5
12. Ethical and legal issues were consistently addressed throughout my supervision experience.	1	2	3	4	5
13. Confidentiality was addressed and maintained throughout my supervision experience.	1	2	3	4	5
14. Multicultural considerations were adequately addressed throughout my supervision experience.	1	2	3	4	5
15. My supervisor helped me develop my theoretical orientation and counseling style.	1	2	3	4	5
16. My supervisor advised me in alternative theoretical approaches and	1	2	3	4	5

techniques for various client situations.

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 17. My supervisor encouraged me to engage in professional behavior.  | 1 | 2 | 3 | 4 | 5 |
| 18. I was provided and/or directed to resources to assist in my work with clients and/or skill development.                          | 1 | 2 | 3 | 4 | 5 |
| 19. My supervisor helped me engage in self-evaluation.   | 1 | 2 | 3 | 4 | 5 |
| 20. My supervisor helped me gain autonomy in working with my clients.  | 1 | 2 | 3 | 4 | 5 |
| 21. My supervisor asked about my observations and clinical opinions of my clients.   | 1 | 2 | 3 | 4 | 5 |
| 22. My supervisor assisted me in reviewing my practicum/internship hours to ensure I was getting the experience I needed at my site. | 1 | 2 | 3 | 4 | 5 |

Counseling Program  
University of Louisiana Monroe  
**Professional Counseling Performance Evaluation (PCPE)\***  
**Practicum**

Student \_\_\_\_\_ Sem & Yr \_\_\_\_\_

Faculty Supervisor \_\_\_\_\_ This evaluator (√) \_\_\_\_\_

Practicum Instructor(s) \_\_\_\_\_ This evaluator (√) \_\_\_\_\_

- Rating Scale: N - Not required and/or No opportunity to observe  
 0 - Does not meet criteria expected for student's level of preparation and experience.  
 1 - Minimally or inconsistently meets criteria expected for student's level of preparation and experience.  
 2 - Consistently meets criteria expected for student's level of preparation and experience.  
 3 - Exceeds criteria expected for student's level of preparation and experience

The student...

<b>1. HELPING SKILLS AND ABILITIES</b>					
a. Establishes relationships characterized by working alliance.	N	0	1	2	3
b. Creates appropriate structure: Sets and maintains boundaries such as meeting place, time, and duration.	N	0	1	2	3
c. Shows understanding of content of client's story – primary elements.	N	0	1	2	3
d. Shows understanding of context of client's story – uniqueness and underlying meanings.	N	0	1	2	3
e. Responds to feelings; identifies client affect and addresses feelings therapeutically.	N	0	1	2	3
f. Demonstrates congruence/genuineness; outer behavior consistent with inner affect.	N	0	1	2	3
g. Shows empathy: Takes client's perspective without over-identifying and communicates this experience to client.	N	0	1	2	3
h. Demonstrates effective nonverbal communication: use of body, voice, attire, etc.	N	0	1	2	3
i. Creates a psychologically safe environment.	N	0	1	2	3
j. Shows awareness of, and effectively manages, power differences in relationships.	N	0	1	2	3
k. Collaborates with client to establish clear and measurable counseling goals. (CMHC J2; SC J2)	N	0	1	2	3
l. Facilitates client's movement toward counseling goals and apprises client of progress. (CMHC D1; SC D2, D3)	N	0	1	2	3
m. Promotes wellness through both intervention and prevention. (CMHC D1, D3; SC D2, D3)	N	0	1	2	3
n. Manages termination of counseling in a therapeutic manner. (CMHC D1, D2)	N	0	1	2	3
n. Identifies and consistently demonstrates one's guiding theory of counseling. (CMHC D1; SC D2, D3)	N	0	1	2	3
<b>2. PROFESSIONAL RESPONSIBILITY</b>					
a. Conducts self ethically and in compliance with legal requirements so as to promote confidence in the counseling profession. (CMHC B1; SC B1)	N	0	1	2	3
b. Relates to peers, professors, and others according to stated professional	N	0	1	2	3

standards. (CMHC B1; SC B1)					
c. Keeps accurate and timely records. (CMHC B1, D7; SC B1)	N	0	1	2	3
d. Demonstrates sensitivity to real and ascribed power differences between self and others; does not exploit or mislead others during or after professional relationships. (CMHC D2, D5; SC F1)	N	0	1	2	3

<b>3. COMPETENCE</b>					
a. Demonstrates basic cognitive, affective, sensory, and motor capacities to respond therapeutically to others. (CMHC D1; SC D2)	N	0	1	2	3
b. Recognizes and responds appropriately to cultural, individual, and role differences, including those due to age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status. (CMHC D2, D5, F3; SC D1, F1)	N	0	1	2	3
c. Applies relevant research findings to the practice of counseling. (CMHC J1; SC J1)	N	0	1	2	3
d. Appropriately applies assessment and diagnostic tools both initially and throughout counseling through intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment. (CMHC D1, H1, H2, H3, H4, L1, L2, L3; SC H1, H2, H3, H5)	N	0	1	2	3
e. Identifies and responds appropriately to clients with addiction and co-occurring disorders. (CMHC D8, H3, H4)	N	0	1	2	3
f. Assesses and manages suicide risk. (CMHC D6, H3; SC D4)	N	0	1	2	3
g. Recognizes and responds therapeutically to crises, disasters, and other trauma-causing events in clients' lives. (CMHC C6, L3; SC C6)	N	0	1	2	3
h. Involves others in client's life in the counseling process as clinically, ethically, and legally appropriate. (CMHC D4; SC F4, H4, N1, N3)	N	0	1	2	3
i. Recognizes the boundaries of one's particular competencies and the limitations of one's expertise. (CMHC D9; SC D5)	N	0	1	2	3
j. Provides only those services and applies only those techniques for which one is qualified by education, training, and experience. (CMHC B1, D9; SC B1, D5)	N	0	1	2	3
k. Takes responsibility for compensating for one's deficiencies. (CMHC D9; SC D5)	N	0	1	2	3
l. Takes responsibility for assuring others' welfare when encountering the boundaries of one's expertise, through such activities as consultation and referral. (CMHC D4, D9, F1; SC D5, H4, N2, N3, N5)	N	0	1	2	3

<b>4. MATURITY</b>					
a. Exercises appropriate self-control (such as anger control, impulse control) in interpersonal relationships with faculty, peers, and others.	N	0	1	2	3
b. Demonstrates honesty, fairness, and respect for others.	N	0	1	2	3
c. Demonstrates an awareness of one's own belief systems, values, needs and limitations and the effect of these factors on one's work. (CMHC D2; SC D1)	N	0	1	2	3
d. Seeks, welcomes, receives, integrates, and utilizes feedback from supervisors and others. (CMHC D9; SC D5)	N	0	1	2	3
e. Exhibits appropriate levels of self-assurance, confidence, and trust in own ability.	N	0	1	2	3
f. Follows professionally recognized conflict resolution processes, seeking to informally address the issue first with the individual(s) with whom the conflict	N	0	1	2	3

exists. (CMHC B1; SC B1)					
<b>5. INTEGRITY</b>					
a. Refrains from making statements that are false, misleading, or deceptive. (CMHC B1; SC B1)	N	0	1	2	3
b. Avoids improper and potentially harmful dual relationships. (CMHC B1; SC B1)	N	0	1	2	3
c. Respects the fundamental rights, dignity, and worth of all people. (CMHC B1, D2; SC B1, F1)	N	0	1	2	3
d. Respects the rights of individuals to privacy, confidentiality, and choices regarding self-determination and autonomy. (CMHC B1; SC B1)	N	0	1	2	3
e. Advocates for policies, programs, and services that meet clients' unique needs. (CMHC F2; SC F3)	N	0	1	2	3

COMMENTS:

\_\_\_\_\_  
Supervisor/Practicum Instructor

\_\_\_\_\_  
Practicum Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

## Case Conceptualization Documents

### Template

#### **Introduction**

Demographics, chief complaint, signs and symptoms, diagnostic impression

#### **Supporting Material**

Content from the intake to state your case: strengths and limits

Instrument results, psychotropic medication

Theoretical content given

#### **Conclusion**

Client's overall level of functioning, prognosis

General goals at this time and if obtainable

#### **Treatment Plan**

Long and short-term goals



## Conceptualization and Treatment Planning Rubric

**Introduction** \_\_\_\_\_ 10pts.

Demographics, chief complaint, signs and symptoms

**Supporting Material** \_\_\_\_\_ 25pts.

Content from the intake to state your case (e.g. strengths and limits, instrumentation, psychotropics, relevant psychosocial background)

Theoretical conceptualization, given the content

**Conclusion** \_\_\_\_\_ 25pts.

Client's overall level of functioning

General goals at this time and if realistic and obtainable

Does the conclusion bring everything together in a coherent way?

**Treatment Plan** \_\_\_\_\_ 25pts.

Long and short-term goals

Are these goals measureable, behavioral, and specific?

**Grammar and wording** \_\_\_\_\_ 15pts.

Are you using proper grammar and wording in your report?

## Case Conceptualization and Treatment Planning (SAMPLE)

### Introduction

Lauren is a 42-year-old Caucasian heterosexual female who reports to being a reformed Catholic. She earned a doctorate in veterinary medicine and has worked as a veterinarian for the last five years. Lauren entered therapy reporting her chief complaint was her recent separation with her husband Mark. Mark and Lauren have been married for only six months, and he left the house three weeks ago after telling her she is impossible to live with. For the last year, Lauren has been working through the settlement procedures with her ex-husband Cameron, whom she now owes \$75,000 in alimony. She reports the stresses of dealing with Cameron have affected her relationship with Mark, as she lashes out at him when stressed out. During the intake, Lauren presented with signs of psychomotor agitation and fatigue.

In the last six or more months, Lauren reports to struggling with many symptoms. Lauren reports experiencing many panic symptoms, such as heart racing, sweating, shortness of breath, and dizziness at any given time, and have had 20+ panic attacks in the last six months. All of the panic attacks occur when she has to deal with Cameron. Lauren also reports experiencing much anxiety during the last year; she reports not dealing with much anxiety in the past and that this is new. Lauren describes that her sleep and eating has been affected in the last three months; she has much interrupted sleep and has no appetite. Last, Lauren reports several trauma-based symptoms related to physical abuse she suffered from Cameron. She reports being easily triggered to anger when arguing with Mark and has a hard time controlling the anger; has dreams of the times Cameron abused her; tries to avoid talking about the abuse with friends/family. Lauren reports to drinking alcohol, specifically 2-3 times a week. She has had a physical in the last six months and reports no medical problems.

**Diagnostic impression.** Based on the signs observed and reported symptoms, Lauren qualifies for Other Specified Trauma (F43.8). The diagnosis may change as Lauren engages in therapy.

### Supporting Material

Lauren was married to Cameron for seven years; she reports that she financially supported him during the entire marriage, and he committed several acts of emotional abuse toward her. She reports it was not till the end of the marriage that he began physically abusing her, which is most troubling for her.

Lauren's two primary areas of concern is her anxiety and trauma. When given the STAI, Lauren scored at the 25 percentile for Trait anxiety, suggesting her overall tendency for anxiety is low. However, the State anxiety scored at the 93 percentile, suggesting currently Lauren suffers from high anxiety. When given the DAPS, the PTS-T score suggested a moderate score, with elevated scores on the Reexperiencing scale, Avoidance scale, and Hyperarousal scale. The Positive and Negative Bias scores were within normal limits, suggesting Lauren answered truthfully about her trauma symptoms.

Lauren has several strengths. She has succeeded greatly in her career and holds this as a major accomplishment. Lauren also sees herself in the metaphor as a bulldozer, that she can put her nose to the ground and push through anything. Lauren has many supportive friends and family members who she can go to for support, in addition to colleagues at work. Lauren is also very intelligent and insightful and is very motivated for therapy. Although Lauren is in a considerable amount of debt, she does have significant financial resources that she can use to live comfortably.

Lauren has two notable limits. First, she works the midnight shift at work which could present a problem for therapy, especially EMDR. Second, Lauren is a talker and gets off on many tangents. This could be due to her needing to tell her story or possibly used as a defense mechanism.

Lauren's current symptomology seems to stem from the abuse she suffered from her ex-husband Cameron, and are currently affecting her relationship with Mark. During the intake, Lauren reported 4-5 specific memories of the physical

abuse that continually upset her. When mapping these specific memories, feelings of hopelessness, fear, and panic emerged; negative self-beliefs emerged, such as “I am not worth anything”, “I do not deserve love”, and “I did not try hard enough”; many psychosomatic symptoms were connected to these memories, such as a racing heart, adrenaline rush, and tightening muscles in the neck. Lauren reported that these thoughts, feelings, and bodily sensations always emerged when these memories came up for her, and that several triggers exist that activate these memories.

Lauren’s life tasks and lifestyle suggest to be out of balance. While Lauren’s work self is strong and suggests to provide a sense meaning and purpose, her relationship with her husband is strained. It is unknown at this time if she is utilizing her friends for support during this time, as she works many hours. In addition, Lauren’s past and current relationship with her ex-husband – and the trauma that resulted - could have affected her lifestyle as to how she perceives herself, others, and the world in general.

## **Conclusion**

Lauren’s overall level of functioning is high. She manages to hold down two jobs and can care for the household responsibilities, and has a strong support system. The general goals at this time are to repair her relationship with Mark and process the unresolved traumas of the physical abuse. These goals are realistic and attainable.

## **Treatment Plan**

### **1. Long-Term Goal**

Lauren will repair her relationship with her husband Mark.

#### **1. Short-Term Goals**

Lauren will call Mark twice a week for eight weeks with a 50% success rate.

Lauren will go on a date with Mark once a week for eight weeks with a 75% success rate.

### **2. Long-Term Goal**

Lauren will resolve the traumas related to the physical abuse.

#### **2. Short-Term Goals**

Lauren will attend individual psychotherapy once a week for eight weeks with a 75% success rate.

Lauren will write in her journal once a week for eight weeks with a 75% success rate.

Lauren will write an ongoing letter to Cameron; she will work on the letter once a week for eight weeks

with a 75% success rate.