LSU Health
NEW ORLEANS
School of Allied Health Professions
Department of Counseling

Student Handbook

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INTRODUCTION

The Master of Health Sciences in Clinical Mental Health Counseling (MHS) program is fully accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) and is a 60-credit hour graduate program, on campus instruction classroom environment, with some courses offered with remote learning, as approved by CACREP. The program prepares counselors to assume the full range of professional responsibilities required in community counseling organizations, private as well as publicly funded and non-profit, and to contribute to scholarship and service locally and nationally. Courses are offered in person, on campus, during the day (generally 9:00am to 4:30pm) and in the evening (generally5:00 pm to 8:00 pm).

Students are eligible to sit for the National Counseling Examination (NCE) as early as their final semester of study in the program. (Graduates can then apply to become a Provisionally Licensed Professional Counselor (PLPC).

Students apply and practice what has been taught in the classroom in real-life clinical settings through the Practicum and Internship components of the program. Students will receive a separate Practicum and Internship Handbook. Because of this hands-on experience, our graduates are sought after by many prospective employers. In fact, some students are offered jobs before graduation.

The purpose of this *Student Handbook* is to provide information about the policies, procedures, and objectives of the Department of Counseling (COUN). We have done our best to make this handbook reflect current policies; however, policies are always subject to change. This student handbook does not constitute a contract, and the department reserves the right to amend it at any time. Future policies and changes will be added as necessary to update this handbook. In addition to this handbook, the Louisiana State University Health Sciences Center (LSUHSC) publishes a Catalog/Bulletin. All students are required to be familiar with and abide by the requirements in the Catalog/Bulletin. This handbook contains information about the MHS-COUN program, including the fieldwork program requirements. Students are expected to know and comply with the information contained in this handbook. You will find the SAHP Student Handbook and the LSUHSC-NO General Catalog/Bulletin to be the official source of student related policies and procedures. You can access this information at the following sites:

https://alliedhealth.lsuhsc.edu/admin/admincurrentstudents.aspx

http://catalog.lsuhsc.edu/

I. GENERAL PROGRAM DESCRIPTION

The Master of Health Sciences in Counseling (MHS-COUN) program is fully accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) and is a 60-credit hour graduate program with a strong clinical mental health counseling focus. The program prepares counselors to assume the full range of professional responsibilities required in mental health agencies, counseling organizations, private, as well as publicly funded, non-profit, and to contribute to scholarship and service locally and nationally.

Counselors assist diverse populations in a professional and effective manner - assisting children, families, and adults to attain physical, mental, and psychological well-being. A career in counseling is extremely flexible, allowing graduates to select employment that best suits their personality, skills, and interests. Counselor work in a wide-range of settings including community, private practice, vocational, hospital, and school settings. Counselors engage in individual counseling, group counseling and family counseling, evaluation/assessment, advocacy, and case management.

Program Outcome Measures

Each year, the Department of Counseling publishes a report for its program, faculty, students, graduates/alumni, supervisors, advisory board members, affiliates, community partners and prospective students. The report is available on the department's website:

https://alliedhealth.lsuhsc.edu/crc/performancemeasures.aspx

II. MISSION STATEMENT AND PROGRAM OBJECTIVES

Mission

The mission of the program for the Master of Health Sciences in Counseling is to provide professional education and clinical experience to master's level students who are committed to serving persons of all ages, including backgrounds that have challenges related to mental, physical, developmental, cognitive, and emotional disabilities. Professional preparation of master's level students will focus on equipping students with knowledge and skills to provide clinical services. Master's level students will be prepared to assume the full range of professional responsibilities required in a variety of counseling settings and are motivated to contribute to scholarship and service locally and nationally. This mission is achieved through various academic, clinical, research, and scholarly activities."

Program Objectives

The Master of Health Sciences degree in Clinical Mental Health Counseling wishes to produce students that can demonstrate competency related to:

Professional counseling orientation and ethical practice.
Varied social and cultural perspectives.
Human growth and development.
Vocational counseling.
Counseling and helping relationships.

Group counseling and group work.
Assessment and testing.
Research and program evaluation.
Clinical mental health counseling.
Professional dispositions.

Faculty

Deborah Allsbrook, PhD, LPC-S, NCC
Dr. Deborah Allsbrook is a Licensed Professional Counselor Supervisor and National Certified Counselor who earned a MHS in Rehabilitation Counseling at LSU Health Sciences Center New Orleans in May of 2007 and a Ph.D. in Counselor Education from the University of New Orleans in May of 2024. For her dissertation, she conducted a qualitative research study focused on moral injury and combat Veterans of the Gulf War and OIF/OEF eras. Dr. Allsbrook maintained a private practice in Harahan from 2011 until 2025 where she provided individual counseling to adults 18 and older facing a variety of concerns, including depression, anxiety, grief, trauma, and alcohol misuse. From 2007 to 2013 she was the lead therapist responsible for facilitating group counseling sessions for the Adult Psychiatric Partial Hospitalization and Intensive Outpatient Programs at River Oaks Hospital. It was at River Oaks where she first obtained experience working with Veterans and active-duty Military. She has additional clinical experience providing treatment services on the inpatient Adult Psychiatric Unit at River Oaks to patients experiencing acute symptoms, working as a mobile crisis counselor conducting assessments in the emergency rooms of several hospitals on the Northshore, and providing substance abuse counseling in an agency contracted with the Federal Bureau of Prisons.

Dr. Allsbrook has been a workshop presenter in the mental health community on topics that include mental health treatment, suicide prevention, grief, the use of technology in counseling / supervision, combat-related trauma and moral injury. Prior to joining the faculty at LSU Health Sciences Center New Orleans, she held adjunct faculty positions with NYU Steinhardt, the Chicago School of Professional Psychology, and the University of New Orleans. Dr. Allsbrook also has experience lecturing internationally at the University of Malta, Valletta Campus. She is a member of the American Counseling Association, Louisiana Counseling Association, Louisiana Association for Counselor Education and Supervision, and has held leadership positions in the Louisiana Military and Government Counseling Association (treasurer 2023-2025, president 2026-2028) and Chi Sigma Iota (Alpha Eta chapter President 2017-2018).

Rose Angelocci, Ph.D., CRC, LRC, LMFT, CVRT, NCC, BC-TMH, LPC-S, CWIC
Dr. Rose Angelocci holds several roles in the School of Allied Health Professions at the Louisiana State University Health Sciences Center in New Orleans. She serves on the faculty in the Department of Counseling and as core faculty with The Louisiana Leadership Education in Neurodevelopmental and Related Disabilities (LA LEND) at the Human Development Center (HDC). At HDC, Dr. Angelocci is a Community Work Incentives Coordinator (CWIC) with the West South Central Work Incentives Planning and Assistance (WIPA) Project where she provides benefits planning services to individuals receiving disability benefits through Social Security. In addition to her work with the WIPA Project, Dr. Angelocci serves as the DeafBlind Registry and Data Coordinator for the Louisiana DeafBlind Project for Children and Youth where she maintains the federal DeafBlind registry for the state of Louisiana and mentors individuals preparing to become Certified DeafBlind Interveners.

Dr. Angelocci has a doctorate in counselor education with a minor in qualitative research methods from the University of New Orleans. She has a Masters in Health Sciences in Rehabilitation Counseling from Louisiana State University Health Sciences Center. Dr. Angelocci is a Certified Rehabilitation Counselor, a Licensed Rehabilitation Counselor/Supervisor, a Licensed Marriage and Family Therapist, a Licensed Professional Counselor/Supervisor, a National Certified Counselor, a Board-Certified Tele Mental Health provider, a Certified Vision Rehabilitation Therapist, a Certified Deafblind Intervener, and a certified Community Work Incentives Coordinator.

Prior to joining the staff at LSUHSC in 2017, Dr. Angelocci worked at the Training, Resource and Assistive-technology Center at the University of New Orleans. Dr. Angelocci has over 35 years of experience in working with individuals with disabilities—especially those who are blind or Deaf Blind; their families; and service providers who serve them. Her experience includes assessing and training persons in the use of assistive technology and Braille; directing residential programs for students who are blind transitioning from high school to college and/or employment; conducting vocational evaluations and career counseling; and providing pre-employment transition services for high school students with disabilities.

Erin M. Dugan, Ph.D., LPC-S, Registered Play Therapist Supervisor currently serves as the Dean in the School of Allied Health Professions; holds the rank of Professor in Department of Counseling; and also serves as the Director of the LSUHSC Child & Family Counseling Clinic. Dr. Dugan earned her doctorate degree from the University of Mississippi in Counselor Education. She serves on various committees, associations, and boards in the counseling profession. Dr. Dugan's scholarly activities include book chapters, publications, national presentations, and workshops. Her current research interests include intergenerational attachment patterns, play therapy and filial therapy research, and the development and enhancement of child-parent relationships.

Adrianne Frischhertz, Ph.D. is a Licensed Professional Counselor-Supervisor and Registered Play Therapist Supervisor. Currently, she is a part-time Assistant Professor in the Department of Counseling in the School of Allied Health Professions at LSU Health New Orleans. Dr. Frischhertz has published and presented on both local and national levels to educate others about counseling and play therapy. She is a graduate of both the Louisiana Counseling Association and Association for Play Therapy Leadership Academies and serves on the Louisiana Association for Play Therapy and Association for Child and Adolescent Counseling (Louisiana chapter) boards. She serves on the editorial board of the Louisiana Counseling Association Journal. Clinically, she focuses on providing services to children ages 3-12 and their caregivers, as well as supervision to those seeking licensure as a professional counselor (LPC) and certification as a Registered Play Therapist.

George W. Hebert, Ph.D.
Dr. Hebert currently serves as the Interim Department Head; is a Licensed Psychologist; and an Associate Professor-Clinical faculty member in both the Department of Counseling and in the Master of Physician Assistant Studies Program. He continues to be a faculty clinician in the LSUHSC Child and Family Counseling Clinic where has supervised graduate students from other sending universities for their completion of various types of practicum and internships. Prior to these faculty appointments, Dr. Hebert served as the training director for the Louisiana School Psychology Internship Consortium (LAS*PIC) here at the LSU Health Sciences Center in the Human Development Center (HDC). He earned his doctoral degree in School Psychology from the Louisiana State University in Baton Rouge. Previously,

Dr. Hebert served eight years providing psychological services and/or directing an outpatient mental health clinic for children and adolescents in Louisiana. Additionally, he served a total of six years as a school psychologist in both rural and urban settings in Louisiana. Previously, Dr. Hebert also taught as a part-time faculty member in the psychology department at the University of New Orleans for many years. Dr. Hebert is a former president of the Louisiana School Psychological Association (LSPA) and stays active in various state and national professional organizations. His current research interests include early identification of educational disabilities in children.

Holly Walters Ph.D., LPC-S, CRC holds a Ph.D. in Counselor Education from Oregon State University. She is a Licensed Professional Counselor Supervisor (LPC-S) and a Certified Rehabilitation Counselor (CRC). Currently, she is an Assistant Professor at LSUHSC New Orleans. She is an alum of the program graduating with a Master of Health Sciences in Rehabilitation Counseling. She earned her Bachelor of Science in Psychology from the University of New Orleans. Dr. Walters has worked in outpatient mental health settings with the state for over 10 years as a clinician and a mental health program director. Her research interests include suicide prevention, risk reduction, and the use of popular culture in therapy.

III. GENERAL DEPARTMENT POLICIES

All department faculty must adhere to the LSUHSC policies and procedures on such matters as promotion, tenure, and renewal of contract as described in the LSUHSC Faculty Handbook. In addition, the School of Allied Health professions has policies relating to peer review, faculty goal setting and mid and year-end reviews, as described in the School of Allied Health Professions Faculty Handbook. Certain other policies are departmental and are listed below:

Class Meeting Policy - All scheduled classes during the semester should be held. If a class cannot be held due to extenuating circumstances a substitute activity should be arranged. Classes should meet through the end of the semester, unless otherwise noted in the course syllabi. Assignments, examinations, and other course requirements will be outlined in each course syllabus, respectively.

Designated Study Spaces in the Human Development Center - These spaces provide quiet and collaborative environments to support your academic needs. Below is the list of study rooms available on each floor:

1. **1st Floor**: Room 128 (Conference Room)
2. **2nd Floor**: Room 232 (Interact Room)
3. **3rd Floor**: Room 334 (Interact Room)
4. **4th Floor**: Room 401 (Student Study Space) and Room 436 (Interact Room)

Additionally, the departmental conference room (HDC 301) is available for use during business hours, 8-5, Monday – Friday. Students can request to use the conference room, if available, through counseling@lsuhsc.edu.

Employment - Fulfillment of the requirement for the MHS degree requires a serious commitment of

time and effort. Students are encouraged to carefully weigh their options of home, school, work, and pleasure while in the program. Students who are employed in a mental health related agency must fully disclose to the program their employment to prevent any conflicts of interests.

Text Messaging Alert System - In the event of an emergency, LSUHSC can alert students via text messaging. Go to http://www.lsuhsc.edu/alerts for further information, as well as instructions as to how to sign up for this service. https://911.lsuhsc.edu/report/lsushield.aspx

IV. MHS-COUN ADMISSION REQUIREMENTS

The Department of Counseling accepts applications year-round.

Online application
https://ahcas.liaisoncas.com/applicant-ux/#/login

A hard copy application may also be secured by contacting the department directly or the Office of Student Affairs at 504-568-4253 or email sahpsa@lsuhsc.edu.

Timeline for application

Department of Counseling Rolling Application Cycle	Application Due
Spring Semester Start (January	October 15
Fall Semester Start (August)	June 15

MHS-COUN Admission Requirements

- Bachelor's degree from an accredited college or university.
  - (A background in behavioral science and/or social services is preferred.)
- Minimum Undergraduate grade point average of 2.5 (in a 4.0 system).
- Two letters of recommendation (one preferably from an academic source)
- Typed Essay

Letters of Recommendation

All applicants must seek two letters of recommendation. (At least one from an academic source is preferred.) The academic letter should address the applicant's (1) relevance of career goals, (2) aptitude for graduate-level study, (3) potential success in forming effective counseling relationships, and (4) respect for cultural differences. If the second letter of recommendation is not from an academic source, the letter should address the applicant's (1) relevance of career goals, (2) potential success in forming effective counseling relationships, and (3) respect for different backgrounds.

Typed Essay Instructions

All applicants seeking admission to the LSU Health New Orleans, MHS-COUN program must submit a typed, personal essay. Applicants must respond to the following:

1. Relevance of career goals;
2. Aptitude for graduate-level study;
3. Potential success in forming effective counseling relationships; and
4. Respect for cultural differences.

The department is interested in admitting a committed and qualified students for each class. For example, a favorable recommendation letter may be used to offset a lower GPA.

Admissions Procedures - School of Allied Health Professions Policy

Any student meeting all requirements of admissions, upon acceptance by the admissions committee, is granted unconditional acceptance. Applicants who fail to meet all qualifications, but who show promise for successful graduate work, may be considered for conditional admission on the merits of individual cases.

Conditional –admission status is reviewed each semester and must be removed by the end of their first semester. Applications who want to take courses without being admitted to the formal degree program may enroll as special students.

**All students are required to attend the School of Allied Health Professions and Counseling Department orientations; which are held prior to the beginning of their first semester.*

V. STUDENT ADVISEMENT POLICIES

Each student will be assigned to a faculty member that will serve as their academic advisor during their time in the program. The advisor will assist the student with tasks such as developing a plan of study, pre-registration, and consultation regarding other academic training and professional issues. The student will routinely meet with his/her advisor during the pre-registration period of each semester and may also contact the advisor at any other time, as necessary.

The assignment of a faculty advisor is permanent; however, a change can be initiated either by the student or the advisor. Any change must be approved by the department head. Prior to each semester, the student initiates a meeting with their faculty advisor to review and discuss their plan of study for the upcoming semester. Program requirements are described in this manual, and the Individualized Curriculum Planning (ICP) form will serve as the student's copy of the plan of study that has been arranged with the advisor.

Students are required to take all required coursework offered by the department. Online and other coursework offered by another institution may not be substituted for LSUHSC courses. Students who wish to augment their program of study by taking a course that is not offered by the department may petition the department head for permission to do so. Students who choose to do so are responsible for all expenses associated with such courses.

Transfer Credit

Please be aware that only twelve (12) graduate credit hours may be accepted as transfer credits toward graduation from students who transfer from an accredited institution (excluding Practicum, Internship I, and Internship II. Only courses in which a grade of A or B was assigned will be accepted for credit toward graduation.

Please provide the following after you have accepted your admission into the program:

1. List the LSUHSC Course Name(s) & numbers(s) that you would like to be transferred.
2. An official final transcript with your final grade from each course; and
3. The syllabus from each successfully passed course from your former institution.

When applying for admissions you must send all official transcripts to:

AHCAS Transcript Processing Center
P.O. Box 9127
Watertown, MA 02471

Not submitting the transcripts via the AHCAS system will delay receipt of your transcript. Please send other information to the department by email (counseling@lsuhsc.edu). The transfer process may take up to six weeks to complete.

Note: All students who are granted transfer credits from another institution must still pass the department's comprehensive exam requirements for those courses covered. However, students do not need to complete the Key Performance Indicators (KPIs) that appear on departmental syllabi. The initial ICP should address the transfer credits and how they apply the comprehensive exam.

Technological Competence

Students should possess basic knowledge of Microsoft Office, internet usage, as well as Zoom for remote learning and the potential for clinical experience purposes. Additionally, students will be required to record mock and clinical sessions in classes as well as their fieldwork sites only on platforms as instructed. Students will need access to technologies with recording capabilities for these sessions. Students will use Moodle for their academic courses which houses course documents, discussion forums, and examinations. The School of Allied Health Professions has an Office of Technology Services. LSUHSC uses Zoom for remote learning needs. Further information can be found on the LSUHSC home webpage under IT. Students may contact the IT office at (504) 556-3410. Students are free to utilize these services as needed, but must use their LSUHSC email address for all official communications; as well as their LSUHSC Zoom account to further ensure compliance with the Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPA).

VI. STUDENT PROGRESSION AND REMEDIATION

Counselor education programs have and follow a written policy for student retention, remediation, and dismissal from the program consistent with institutional policies and procedures, the counseling

profession's ethical codes, and standards of practice. Students are regularly evaluated throughout the program by faculty, advisors, and site/university supervisors to determine academic matriculation or the need for remediation. To that end, the department has a Student Progression and Remediation Committee whose chair is appointed by the department head with ad hoc members serving as needed. The chair of this committee facilitates the systematic evaluation of both the efficacy of the counseling curriculum and the counseling students throughout their time in the program.

The evaluation process occurs at the end of each semester and includes the following:

1. Analysis of the results of Student Learning Rubrics for each standard addressed in each class;
2. Analysis of the results of the Key Performance Indicators (KPIs) addressed in each class; and
3. Analysis of the results of the Counselor Competence Scale – Revised (CCS-R) for Practicum, Internship I, and Internship II.

Students should be aware that student progress is discussed regularly during faculty meetings as an ongoing part of student evaluation. Faculty will keep student information confidential unless harm to self or others is indicated or evidence of unethical behavior at sites has been reported.

Expectations for Students

Students are expected to be concerned about client welfare, peers and faculty, stable and psychologically well-adjusted, effective in interpersonal relationships, and able to receive and give constructive feedback.

In addition, students are expected to be committed to personal growth and professional development through opportunities such as those provided in course work, group labs, supervision, self-selected readings, personal counseling, and personal wellness activities.

Examples of Professional Dispositions Meriting Formal Referral

Engagement

- Lack of punctuality to class and/or completing assignments on time
- Using cell phones and other electronic devices inappropriately during class time.
- Sleeping in class
- Not notifying faculty ahead of time of absence and reason for it; leaving class early
- Failure to respond to faculty and university correspondences within 48 business hours
- Failure to respond respectfully
- Over personalizing or oversharing

Self-Awareness and Professional Maturity

- Inappropriate response to feedback and constructive criticism.
- Difficulties in self-management
- Disrespectful behavior to classmates, staff, faculty, and/or patients
- Inappropriate demeanor in response to frustrating circumstances

Clinical Judgement

- Failure to maintain confidentiality
- Failure to Use FERPA/HIPPA compliant platforms
- Violating ethical behavior (i.e., boundaries, treatment planning, general competency, inappropriate self-disclosure)
- Porr demonstration of compassion, cultural sensitivity, empathy, and humaneness.
- Failure to adhere to site protocols

*This is not an exhaustive list, and other concerns can be listed as needed.

Referring to the Student Progress and Remediation Committee

Faculty members are encouraged, when possible, to identify student concerns as early as possible, thus assisting students in developing solutions before concerns might merit formal remediation procedures. However, faculty are also encouraged to refer for formal remediation, when appropriate, to maximize student success in the program. Referral to the committee can also be made by the department head for other academic or behavioral concerns that merit formal referral.

An official referral to the committee requires the use of the Formal Student Referral for Remediation (See Appendix C). Once the formal referral is received by the committee chair, the chair will request the department head to appoint an ad hoc member to the committee. Then the chair will call a meeting of the committee with the student to create a remediation plan.

The plan will:

1. List behaviorally the specific concerns;
2. List behaviorally the specific goals matched to each concern;
3. List objectives for each goal to indicate the threshold of success for each goal which are specific, measurable, attainable, relevant, and time-bound;
4. Include responsibilities only for the individuals participating in the development of the plan;
5. List the future dates/times for progress monitoring to objectively rate the success of the plan components;
6. Be in writing, signed by the student and the members of the committee; and
7. Be provided to the student, placed in the student's departmental file, along with the updates from the future progress monitoring meetings.

Additional activities such as personal counseling, group growth experiences, self-structured behavioral change, or additional academic course or work/field experiences may be recommended.

Continuation, Completion or Expiration of the Remediation Plan

The Student Progress and Remediation Committee will review the objective success of the plan and report the progress in regularly scheduled faculty meetings. The outcomes can always be shared or escalated to with the Department Head earlier, if deemed appropriate by the committee chair.

Ultimately, the chair of the Student Progress and Remediation Committee will recommend one of the

following to the department head:

1. *Successful Remediation and Continuation in the Program:* The committee agrees that remediation has occurred as outlined in the plan and that the specified concerns no longer present a significant problem; the recommendation to the department head will be for continuation in the program. The department head can accept or reject this recommendation.
2. *Continued remediation*: If progression is toward achieving the objectives is documented on the but further remediation activities are warranted, then a recommendation to the department head can be made to create an updated behavioral plan with future dates for progress monitoring with the committee. The department head can accept or reject this recommendation.
3. *Voluntary resignation*: Students are permitted to withdraw from the program at any time. If they wish to be considered for readmission, they must file an application for readmission with the Office of Student Affairs and be evaluated by the promotions committee of the year in the curriculum from which the student withdrew. The recommendation from the committee chair to the department head may be to accept the resignation of the student from the department.
4. *Referral to the Department Head for Administrative Referral Consideration:* If a student refuses participation in the remediation, refuses continued remediation or does not meet the requirements outlined in the remediation plan, the committee chair can recommend to the department head an administrative referral to the Campus Assistance Program. (CAP) and possible continuation of the remediation plan. If the department head determines that an administrative referral to the Campus Assistance Program (CAP) is not appropriate; or the results obtained after an administrative referral has been made to the CAP with possible continuation of the remediation plan do not place the student back in good standing, a referral to associate dean for academic affairs (ADAA) shall take place within five days of this determination for academic misconduct.
5. *Referral to the Associate Dean for Academic Affairs (ADAA*). If a student refuses participation in the remediation, refuses continued remediation or does not meet the requirements outlined in the remediation plan, the committee chair can recommend to the department head a referral to the Associate Dean for Academic Affairs to so that the policies and procedures from the SAHP student handbook can be followed that may lead to involuntary separation from the program and school.

VII. SCHOLASTIC PROCEDURES

The following requirements apply to all students enrolled in the MHS-COUN program in the Department of Counseling. These requirements are in addition to those appearing in the LSUHSC School of Allied Health Professions Student Handbook and the LSUHSC Catalog/Bulletin.

https://alliedhealth.lsuhsc.edu/admin/docs/studenthandbook5.22.24.pdf
Louisiana State University Health Sciences Center at New Orleans - Acalog ACMS™ (lsuhsc.edu)

1. Maintain a grade point average which is consistent with the graduate scholastic standards of the School of Allied Health Professions. A minimum cumulative GPA of 3.0 is required for graduation.
2. The minimum scholastic requirement for course work is a grade of "C." However, no more than 6 credit hours of C grades may be counted toward a degree unless otherwise established by the department. In courses designated Pass/Fail or Satisfactory/Unsatisfactory a grade of Pass or Satisfactory is required.
3. The grade of "I" (Incomplete) indicates that the student has not completed the course for some unavoidable reason which has been approved by the faculty. A grade of "I" will be converted to "F" unless it is removed prior to the deadline set by the university.
4. Satisfactorily complete all required departmental course work required for graduation in not more than six calendar years.
5. For a student to be eligible for placement in practicum, the student must have satisfactorily completed all preceding coursework (refer to the Student Handbook for "Statement of satisfactory academic progress.").

http://alliedhealth.lsuhsc.edu/crc/docs/Practicum_Internship_Handbook.pdf

6. For a student to be eligible for placement in Internship II, the student must have satisfactorily completed Internship I and the department's comprehensive exam.
7. Students who wish to take a leave of absence for any reason, at any point during their semester of study or program, must apply to do so with the department head. The department head will give final approval/denial to such situations.
8. Students who choose to seek approval for a leave of absence for more than one semester must reapply to the program.

Probation

A student who has a cumulative grade-point average below 3.0 will be placed on probation. Those students who are on probation for two consecutive semesters may be subject to dismissal. Continuation in the program in a second probationary semester must be approved by the department head. Please find the SAHP Graduate Professional Academic Standards in the *SAHP Student Handbook*:

https://alliedhealth.lsuhsc.edu/Admin/docs/StudentHandbook.pdf?Spr20

Attendance

Attendance at all classes is required. Absences may be requested to be remediated at the discretion of

the course instructor, (see course attendance policies for each course found in the respective course syllabus).

Degree Requirements

The Counseling curriculum requires a minimum of 60 semester hours. This includes Practicum and Internship hours. Students must also pass a comprehensive examination in order to progress and graduate in the program.

VIII. CURRICULUM PLAN of STUDY

The Master of Health Science in Counseling offers both full-time and part-time curriculum plans of study. Students will create an Individualized Curriculum Plan (ICP) with their assigned academic advisor to best plan the matriculation plan toward graduation. The initial ICP should tentatively outline the entire sequence to maximize chances of identifying scheduling inconsistencies. ICP meetings should occur every semester to properly plan for the next semester and can be amended at other times to best facilitate successful completion of the program. The student is responsible for requesting these meetings with their advisor.

Traditional Fall Semester Start

First Semester Fall
COUN 5601 Foundations in Counseling **3**
COUN 5612 Development Across the Lifespan **3**
COUN 5650 Crisis Counseling Intervention **3**
COUN 6611 Counseling Theories & Practice **3**
COUN 5614 Professional Practicum **1**

Second Semester Spring
COUN 5654 Mental Health Diagnosis and Treatment Planning **3**
COUN 6612 Counseling Techniques and Process **3**
COUN 6630 Vocational/ Career Development **3**
COUN 6634 Ethics in Counseling **3**
COUN 5614 Professional Practicum **1**

Third Semester Summer
COUN 6614 Group Process and Counseling **3**
COUN 6640 Research Methods and Techniques in Rehabilitation **3**
COUN 6641 Practicum in Counseling **3**
COUN 5614 Professional Practicum **1**

Fourth Semester Fall
COUN 6632 Assessment in Counseling **3**
COUN 5603 Intercultural and Psychosocial Aspects of Counseling **3**
COUN 6643 Internship in Counseling I **6**

COUN **** Elective Course **3**

Fifth Semester Spring
COUN 6645 Internship in Counseling II **6**
COUN **** Elective Course **3**

Total: 60 Credit Hours

Traditional Spring Semester Start

First Semester Spring
COUN 5654 Mental Health Diagnosis and Treatment Planning **3**
COUN 6630 Vocational Counseling/ Career Development **3**
COUN 6634 Ethics in Counseling **3**

Second Semester Summer
COUN 6614 Group Process and Counseling **3**
COUN 6640 Research Methods and Techniques in Rehabilitation **3**

Third Semester Fall
COUN 5601 Foundations in Counseling **3**
COUN 5612 Development Across the Life Span **3**
COUN 6611 Counseling Theories and Practices **3**
COUN 5614 Professional Practicum in Counseling **1**

Fourth Semester Spring
COUN 6612 Counseling Techniques and Process **3**
COUN 5614 Professional Practicum in Counseling **1**
COUN **** Elective Course **3**
(COUN **** Elective Course **3**; if needed for full time)*

Fifth Semester Summer
COUN 6641 Practicum in Counseling **3**
COUN **** Elective Course **3**
COUN 5614 Professional Practicum in Counseling **1**

Sixth Semester Fall
COUN 5650 Crisis Counseling Intervention **3**
COUN 6632 Assessment in Counseling **3**
COUN 5603 Multicultural and Psychosocial Aspects of Counseling **3**
COUN 6643 Internship in Counseling I **6**

Seventh Semester Spring
COUN 6645 Internship in Counseling II **6**

Total: 60 Credit Hours (63 Credit Hours if an extra elective is taken for full time status.)*

IX. COMPREHENSIVE EXAMINATIONS

Students are required to pass the comprehensive general examination requirements before registering for COUN 6645 Internship II. This general examination is designed to assess students' proficiency in the eight common core areas highly relevant to the field of counseling. These common core areas include:
(CACREP common core areas)

- **Human growth and development**
- **Assessment and testing**
- **Social and cultural diversity**
- **Career development**
- **Research and program evaluation**
- **Counseling and helping relationships**
- **Professional counseling orientation and ethical practice**
- **Group counseling and group work**

The Counselor Preparation Comprehensive Exam (CPCE) is used to assess competence in these areas. It must be noted that there is a fee associated with this exam which is the responsibility of the student. Information can be found at https://home.pearsonvue.com/cpce.

To sit for the comprehensive examination, the student must have completed, received transfer credit for, or be currently enrolled in these following courses:

COUN 5601 Foundations in Counseling
COUN 5603 Intercultural and Psychosocial Aspects of Counseling
COUN 5612 Development Across the Life Span
COUN 5650 Crisis Counseling Intervention
COUN 5654 Mental Health Diagnosis and Treatment Planning
COUN 6611 Counseling Theories and Practices
COUN 6612 Counseling Techniques and Process
COUN 6614 Group Process and Counseling
COUN 6630 Vocational Counseling/ Career Development
COUN 6632 Assessment in Counseling
COUN 6634 Ethics in Counseling 3
COUN 6640 Research Methods and Techniques in Rehabilitation

The comprehensive examination will be administered in the semester prior to enrollment in COUN 6645 Internship in Counseling II.

Students who do not follow the standard program sequence but have met the course requirements to sit for the comprehensive examination, must schedule a meeting with their faculty advisor to schedule their examination. The faculty advisor will discuss with the departmental faculty the request and an examination date will be provided, upon approval from the department head. Grading is on a Pass or

Fail basis. Students who do not receive a passing grade on the CPCE must meet with the Chair of the Comprehensive Exam (COMPs) Committee and/or the Department Head to decide on a date to sit for a second attempt of the comprehensive exam. This second attempt will consist of 200 multiple choice questions created by the faculty covering the eight common core areas previously outlined above.

If a student is not successful with the second attempt, a third and final format of the comprehensive exam will consist of essay questions developed by the COMPs Committee. The date and time of this administration will be determined by the faculty advisor after consultation with the Chair of the COMPs Committee. This third attempt should be completed at least two weeks before the last day of the semester. If this third exam is not completed by the end of the semester, then exam only enrollment fees may be assessed for further matriculation in the program. Students who are not successful by the third attempt will be dismissed from the program.

Counseling Research Practicum and Counseling Research Project:

Students can participate in scholarly activities with a selected faculty member, upon the faculty member's permission. Students are encouraged to participate in faculty directed research activities. Faculty assumes responsibility for ensuring that the conditions of the student's scholarship experience are met. There are strict limitations on the type of activities in which student scholars may engage.

Appropriate activities might include conceptualization of a research project, library research concerning a research topic, stimulus material design, data collection, data entry, data analysis, and writing tasks relevant to the research. Faculty members will make every effort to make sure the scholars' tasks and activities are meaningful. In addition, faculty should include the student scholar as a participant in any product (e.g., conference presentation or published paper) that their joint activities have produced. The nature of student credit will of course be based on the amount of their contribution to a project.

Appropriate activities do not include: any type of general clerical work, or work stimulated by the faculty member's teaching responsibilities. Prohibited activities would include grading papers, teaching, research to prepare a class lecture, or any activity associated with the faculty member's teaching responsibilities.

TEAM UP™

TEAM UP Compassion, Communication, Collaboration® (TEAM UP$^{TM)}$ is a required component of COUN 5641 Professional Practicum. Students must pass TEAM UP^{TM} to successfully complete this course. Please see the TEAM UP^{TM} Moodle page and OneNote for more information. TEAM UP^{TM} is the institution's primary interprofessional education (IPE) curriculum. IPE occurs "when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes" (World Health Organization, 2010). IPE is a required accreditation standard for most of the programs at LSU Health New Orleans. IPE and associated competencies cannot occur in silo with one profession or via lecture.

https://www.lsuhsc.edu/administration/academic/cipecp/team_up_overview.aspx

Fieldwork

The Practicum and Internship handbook is available online and students are encouraged to review the handbook prior to enrollment into fieldwork regarding related requirements for fieldwork:

http://alliedhealth.lsuhsc.edu/crc/docs/Practicum_Internship_Handbook.pdf

Departmental Policies

Students in the Counseling Program are expected to meet the standards and abide by the regulations and pronouncements of the LSU Health Sciences Center, the School of Allied Health Professions, and the Department of Counseling.

Professional Development

Throughout the year, the department conducts training activities for students, faculty, and clinical affiliates. Attendance at these training activities is often required. Students unable to attend a training activity for legitimate reasons such as accident, illness, or death in the family must meet with the department head to agree upon an alternative assignment which is the equivalent of the missed opportunity. These activities include, but are not limited to, the following:

a. Counseling Department Research Symposium
b. SAHP Research Day
c. Family Day

Professional Conduct

https://www.lsuhsc.edu/administration/cm/cm-56.pdf

http://alliedhealth.lsuhsc.edu/Admin/studentconduct.aspx

http://www.lsuhsc.edu/administration/academic/policies.aspx

Students are expected to demonstrate behavior inside and outside of the classroom that is consistent with professional standards of accountability, dedication, ethical decision making, discipline, and respect. For example, students are expected to check their LSUHSC e-mail account daily to ensure that they are in regular communication to receive announcements or instructions from the faculty and school. (E-responses should be made withing 48 business hours for both faculty and students.) Cell phones should be turned off during all departmental classes, meetings, and events. Any activity should be avoided or postponed that distracts a student or fellow participants from attending to the speaker and purpose of a class or other department-sponsored event.

Unprofessional conduct of any kind, including cheating on an examination, plagiarism (e.g., copying entire sentences or paragraphs from another author's work without referencing it), or unprofessional conduct in classes, laboratories, or in a clinical setting, will subject the offending student to disciplinary action. This action may include dishonorable dismissal.

For the full policy go to:

https://alliedhealth.lsuhsc.edu/admin/studentconduct.aspx

Policy on Providing Accommodations for Students with Disabilities

Students who require disability-related academic accommodations must comply with LSUHSC School of Allied Health Professions Policy for Students with Disabilities.

Guidelines for individuals with disabilities may be found at:
https://alliedhealth.lsuhsc.edu/admin/studentswithdisabilities.aspx
https://www.lsuhsc.edu/administration/academic/ods/

It is the responsibility of the student to inform the faculty if the student believes that he or she has a disability which requires accommodation for each class. Students requesting accommodations (classroom or otherwise) are required to provide the appropriate documentation verifying their disability, in order to assist in determining the necessity and appropriate type of accommodation. Requests for accommodations should be made well in advance in order to allow time for: 1) documentation of the disability, 2) determination of appropriate accommodation, if needed, and 3) implementation of the accommodation. Examples of accommodations that are available to students include, but are not limited to, alternate application process, approval of reduced course load, classroom, and examination accommodations (e.g., padded chair, extended time), and use of auxiliary learning aids. Finally, accommodation is based upon student needs and the specific impact of their disability.

Individualized Curriculum Plan of Study (ICP)

Students must meet with their academic advisor at least once per semester. Students MUST meet with their academic advisor prior to registration each semester so that they can submit and discuss their Individualized Curriculum Plan (ICP) of Study. This plan is developed by the student based on the Curriculum Sequence outlined in the student handbook. This plan needs to be signed off by both the student and his/her advisor each semester at the very least. (See Appendix A.)

Technical Standards

http://alliedhealth.lsuhsc.edu/Admin/academicstandards.aspx

I Grades

A grade of temporary significance which may be issued by a department, but which is not recorded on the student's permanent record is incomplete. A grade of I (Incomplete) is assigned when, for reasons beyond the student's control or because of some acceptable circumstance, the student has been unable to complete the course requirements in the usual time or manner. This grade does not imply a deficiency on the part of the student. On completion of the required course work, the grade of I will be changed to an appropriate letter grade. Students with incomplete status in a course must finish all required work in a manner specified by the department involved. In general, this should be done in a brief period after the regular termination date of the course. The department may allow a longer period for reasons which are considered appropriate. A student cannot be promoted until all incomplete grades have been removed. Unless there is an acceptable reason for further delay, an incomplete grade which is not changed by the date set by the university will change on the record to an F.

Compliance

As part of your enrollment at LSUHSC-NO, you are required to complete Continuing Compliance Education training in accordance with federal and state laws and regulations.

HIPAA

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) (P.L. 104-191) is an amendment to the Social Security Act. Its primary purpose is to place restrictions on what can be categorized as pre-existing conditions when an employee moves from one job to another. However, Title II of the Act, entitled Administrative Simplification, sets new requirements for healthcare providers, payers, and clearinghouses in the areas of privacy, information security, and electronic data interchange.

FERPA

What is FERPA? The Family Educational Rights and Privacy Act (FERPA) of 1974 (also known as the Buckley Amendment) is a federal law that protects the privacy of a students' education records. The Act applies to LSUHSC-NO as the institution is a recipient of federal funds. FERPA affords students certain rights with respect to their educational records.

Code of Professional Ethics

Ethics are the principles of conduct governing a profession. The practice of the profession of Counseling raises many complex ethical questions. To address and resolve these questions, please refer to the American Counseling Association Code of Ethics. Students in the MHS-COUN program are expected to be familiar with and abide by the ACA Code of Ethics.

https://www.counseling.org/docs/default-source/default-

document-library/ethics/2014-aca-code-of-ethics.pdf

Student Dress Code

It is incumbent upon each student to maintain awareness of the need for a professional appearance and manner that is in keeping with the standards of a health professions school. The following guidelines have been approved by the LSUHSC School of Allied Health Professions Student Government Association with the approval of the Dean.

Students who are in the Allied Health Buildings and the Medical Education Building during regular working hours (8am-5pm) will not wear tank tops, halter tops, short pants, clothing with holes, cut-offs or "short" shorts, flip-flopsandals.

Jeans are permitted but should not have holes, patches, or ragged, frayed bottom edges. Miniskirts are not permitted. If tennis shoes are worn, they need to be clean and without holes.

Whenever a student has direct contact with clients, his or her appearance should be that of a professional. Therefore, in addition to the guidelines above, those having client contact should observe the following:

Sports/dress shirts and all shirts should have collars, dresses (not "cocktail" dresses) or pants and blouses.

X. Departmental Systematic Evaluation Procedures

As a part of the School of Allied Health Professions, the Counseling Department must follow the accreditation requirements of the Southern Association of Colleges and Schools Commission on Colleges (SACS-COC). Therefore, our Departmental Systematic Evaluation Procedures are designed to align with both SACS-COC and CACREP requirements for assessing program objectives and student learning throughout the student's course of study and after they have graduated. Therefore, the program faculty engages in an annual sequence of assessment procedures to systematically evaluate the program objectives, including student learning. To that end, the Counseling Department utilizes multiple empirical indicators to accomplish this goal.

Data Collected: Aggregate Student Assessment Data of Knowledge Skills, and Professional Dispositions; Demographics on Applicants, Students, and Graduates; and Systematic Studies of Graduates, Site Supervisors, and Employers.

Regarding the primary evaluation of program objectives, six different surveys are used: the Student Department Evaluation Survey; the Student Exit Survey; the Alumni Survey; the Faculty Survey; the Site Supervisor Annual Survey; and the Employer Survey. Each survey includes items directly assessing each of the five program objectives. (It should be reiterated that the first objective consists of nine sub-objectives relating to the core instructional areas.) Each of these surveys are a Likert rating scale which is administered one time each academic year, except for the Student Department Evaluation Survey, which is administered three times each academic year .

Secondly, student learning/performance is systematically assessed with the identification of key performance indicators (KPIs) in each of the eight core areas; the area of clinical mental health

counseling and for the student's professional dispositions. These measurements of student learning are conducted via multiple measures; over multiple points in time, and these data are analyzed by the faculty.

Finally, while the Counselor Preparation Comprehensive Examination (CPCE) (and/or the department created comprehensive exam - if needed) are primarily used to assess student learning, the results of these exams are also reviewed by the Department Chair to identify core areas where the program may wish to target improvements. Regarding student learning, a passing score on the CPCE or department created comprehensive exam is required for students before they can enter their second and final semester of internship (i.e., Internship II).

Procedural Review of Documented Plan

This documented plan of the Departmental Systematic Evaluation Procedures is annually reviewed and approved by the department's faculty and advisory board. It should be noted that a grand analysis based on the available data sets is to occur every year for programmatic changes and improvements in this documented empirically based plan for systematically evaluating the program objectives, including student learning.

Alumni Survey – This survey is to be solicited from graduate alumni for completion by June 30th of every year. This survey provides the department with feedback based on feedback on current professional endeavors, the eight CACREP domains, and other comments that may be offered.

Employer Survey - This survey is to be solicited from employers of our graduate alumni for completion by June 30th of every year. This survey will provide the department information on the eight CACREP domains and an opportunity for comments on the strengths and areas of growth for the program.

Faculty Department Evaluation Survey – This survey will be solicited from the departmental faculty for completion by June 30th of every year. This survey will provide the department with feedback based on faculty feedback on current professional endeavors, the program, the eight CACREP domains, and other comments offered by the faculty.

Site Supervisor Annual Survey - This survey will be solicited from practicum/internship site supervisors who had a student placed at their site during the past calendar year for completion by June 30th of every year. This survey will provide the department information on the eight CACREP domains and possible additional comments on the strengths and areas of growth for the practicum/internship program.

Student Department Annual Survey - This survey is to be solicited from current students for completion by March 15th, June 30th, and October 15th of every year. This survey will provide the department with feedback based on feedback on current professional endeavors, the program, the eight CACREP domains, and comments offered by current students.

Student Exit Survey – This survey is to be solicited from graduating students for completion by April 30th of every year. This survey will provide the department with feedback based on feedback on your future professional endeavors and the eight CACREP domains.

Data Collection Procedure

The following outlines the procedure for how and when each data component is collected. The components that systematically evaluate the program objectives are assessed with surveys are each described below:

The Student Department Evaluation Survey is sent to all current students via Survey Monkey three times each year: February 15; June 1; and September 15; with due dates of March 15; June 30, and October 15; respectively.

The Student Exit Survey is sent each year only to the graduating students via Survey Monkey on April 1, with a due date of April 30th.

The Alumni Survey is sent each year to any graduate of the program that has thier email address on file via Survey Monkey on June 1, with a due date of June 30th.

The Faculty Department Evaluation Survey is sent each year to all members of the faculty via Survey Monkey on June 1, with a due date of June 30th.

The Site Supervisor Annual Survey is sent each year to any practicum or internship supervisor that served during the past academic year via Survey Monkey on June 1, with a due date of June 30th.

The Employer Survey is sent to known employers of our graduate alumni on June 1, with a due date of June 30th.

The table below shows the timeline for these data collections.

Survey	Send Date	Due Date	First Reminder Date	Final Reminder Date
Alumni Survey	June 1	June 30	June 15	June 22
Employer Survey	June 1	June 30	June 15	June 22

Faculty Department Evaluation Survey	June 1	June 30	June 15	June 22
Site Supervisor Annual Survey	June 1	June 30	June 15	June 22
Student Department Evaluation Survey	Feb 15 June 1 Sept 15	March 15 June 30 Oct 15	March 1 June 15 Oct 1	March 8 June 22 Oct 8
Student Exit Survey	April 1	April 30	April 15	April 22

Secondly, the components that systematically evaluate student learning are assessed with two empirical measures: The Counselor Competencies Scale – Revised) CCS-R and the LSUHSC Key Performance Indicators (KPIs). Each is described below along with the procedure and timelines for completion.

The Counselor Competencies Scale – Revised) CCS-R and the LSUHSC Counseling Key Performance Indicators (KPIs) are both analyzed by the chair of the Student Progression and Remediation Committee.

Finally, the Counselor Preparation Comprehensive Examination (CPCE) must be taken as the departmental comprehensive examination. The student must create and account and register to take the exam. If the student does not surpass the required score set by the department on the CPCE , then the student must take the department created comprehensive multiple-choice exam as a second attempt. If the student is not successful on the second attempt, a third and final attempt is offered in the format of brief essay questions developed by the faculty. The date and time of this administration will be determined by the student's faculty advisor.

Data Utilization

The Department of Counseling makes routine annual curriculum and program improvements primarily during the summer semester utilizing the data summaries and analyses from the previous academic year. Additionally, these data summaries and analyses are presented to the Advisory Board during the fall and spring meetings for additional recommendations for curriculum and program improvements.

Student Services for Health, Wellness, Counseling, and Support

Confidential counseling and other supportive and health-related services are available to students free of charge. For information about these services, contact your faculty advisor, the Campus Assistance Program (CAP) at (504) 568-8888, or Student Health Services at (504) 525-4839. For appointments, there are two off- campus health clinics. Their telephone numbers are 412-1366 and 412-1705. The Wellness Center (504-568- 3700) offers free programs and exercise facilities.
https://www.lsuhsc.edu/orgs/campushealth/cap.aspx

Student Organizations

http://alliedhealth.lsuhsc.edu/Admin/docs/PoliciesProceduresFormStudentOrganizations.pdf

Honor Society

Chi Sigma Iota (CSI): Counseling, Academic, and Professional Honor Society International – Rho Chi Chapter is an international honor society that values academic and professional excellence in counseling. The mission of CSI is to promote scholarship, research, professionalism, leadership, advocacy, and excellence in counseling, and to recognize high attainment in the pursuit of academic and clinical excellence in the profession of counseling. The LSUHSC Rho Chi Chapter is one of 270 active chapters. Each year deserving students are invited to submit a proposal to join and become initiated into the society. Additional information about membership may be obtained by contacting a faculty member.

Membership Requirements:

1. Students must have completed at least one semester of full-time graduate coursework in a counselor education degree program, have earned a grade point average of 3.5 or better on a 4.0 system, and be recommended for membership in CSI by the chapter. Criteria include capacity to represent the best about professional counseling, appropriate professional behavior, ethical judgment, emotional maturity, and attitudes conducive to working to advocate for wellness and human dignity for all.

2. Faculty and alumni of the program shall have met the overall G.P.A. requirement as graduates of a counselor education program and be recommended to CSI by the chapter.

3. The primary identity of these persons shall be as professional counselors including evidence of a state or national credential as a professional counselor.

4. Students who have obtained an average of 3.5 or better on a 4.0 system will be invited to submit a proposal documenting their interests in developing a project for the upcoming semester(s) to be participated in by all members.

Membership in Professional Organizations

Affiliation with national professional organizations provides many opportunities for professional growth. In addition to evidencing support for your profession, organizational membership brings the student in contact with current literature in the organizations' journals provided to members; with national, regional, state, and local issues and news; and, through conferences and seminars, with the leaders of the profession. Most professional organizations offer student membership at a reduced rate. Membership in various professional organizations enhances the individual student's specific career interests, as well as lends broad support to the student's chosen profession of Counseling. The primary Counseling professional organizations may be contacted, at the addresses below, for membership applications.

American Counseling Association (ACA)
6101 Stevenson Ave., Suite 600
Alexandria, VA 22304
(800) 347-6647 Ext. 222
www.counseling.org

Louisiana Counseling Association
353 Leo Avenue Shreveport, Louisiana, 71105
Phone: 318 861-0657
Fax: 318 868-3341
Email: lca_austin@bellsouth.net

Certification and Licensure

Upon completing the MHS-COUN program, it is recommended that students apply for one or more professional certification and licensure options. The choice of which option(s) to pursue depends on the interests of each student. Many of the certifications and licenses stipulate work experience after obtaining the master's degree as a requirement for eligibility. Some of the viable options are listed below. Contact the specific organization of interest for further information on their stipulations. Except for the COUN certification, the department's curriculum and graduation requirements do not guarantee eligibility for any credential. It is the student's responsibility to become informed and proactive about planning for desired certification and licensure options.

Council for Accreditation of Counseling & Related Educational
Programs 1001 North Fairfax Street, Suite 510
Alexandria, VA 22314
Phone (703) 535-5990
Fax (703) 739-6209
www.cacrep.org

Licensed Professional Counselor (LPC)
Louisiana Licensed Professional Counselors Board of
Examiners 8631 Summa Avenue, Suite A
Baton Rouge, LA 70809
(225) 765-2515
www.lpcboard.org

National Certified Counselor (NCC)
National Board for Certified
Counselors PO Box 77699
Greensboro, North Carolina 27417-7699
(336) 547-0017
www.nbcc.org

Policy on Written Endorsements

Students who graduate from the counseling program are prepared to begin collaborating with clientele in mental health settings, including hospitals, schools, private, non-profit, and other clinical settings. Faculty members provide advising to students from acceptance to graduation. The program provides students and graduates with potential employment opportunities throughout their course of study as well as beyond graduation. Students wishing to pursue written endorsements by one or more faculty members must follow the process in requesting a written endorsement:

Licensure/ Certification: Students/graduates should contact the Coordinator of the Academic Area to request such written endorsements of their education and training.
Employment Reference: students/graduates should contact each faculty member separately. It is important to note that faculty members are not required to endorse students. Students' and graduates' grades are not sole determinants of a supportive reference letter. Professional dispositions and behaviors are also considered in the decision.

Department Clinical Operations: LSUSHSC Child & Family Counseling Clinic (CFCC)

The LSUHSC Child & Family Counseling Clinic is an outpatient mental health clinic designed to provide mental health services to children, adolescents, adults, and their families. It is affiliated with the Louisiana State University Health Sciences Center and is housed in the School of Allied Health Professions in the Department of Counseling as a teaching, training, and research facility.

The clinic provides testing/assessment, individual, group, and family therapy including play therapy, filial therapy, and child-parent relationship therapy, dialectical behavior therapy, and couples counseling. In addition, the clinic provides consultation services to caregivers and professional training to students and post-graduates seeking to earn continuing education hours toward licensure and certification.

Professional Trainings

The LSUHSC Department of Counseling is currently a provider of continuing education. In addition, the department and clinic both offer workshop opportunities year around for students, postgraduates, and professionals. Questions and additional inquiries about the workshops can be emailed to the department at counseling@lsuhsc.edu or the Child & Family Counseling Clinic at cfcc@lsuhsc.edu.

The Child and Family Clinic offers workshops in provides testing/assessment, individual, group, and family therapy including play therapy, filial therapy, and child-parent relationship therapy to provide training to students and practicing clinicians seeking to earn continuing education hours towards licensure and certification.

The department offers the Tigers and Stripes Workshop Series that offers continuing education towards licensure and certification for mental health professionals interested in training on topics focused on mental health counseling.

Student Informed Consent of Adherence

I_____have read through and consent to comply with all policies and procedures as outlined in this *Student Handbook.* I understand that it is my responsibility to seek advising from my assigned advisor, should an issue or question arise regarding my ability or commitment to comply with the policies and procedures stated herein.

_____ _____

Printed Name **Signature/Date**

HELPFUL WEBSITES & CONTACT INFORMATION

Site	Location	Telephone	Website
Bookstore	433 Bolivar Street	504 568-2504	http://www.lsuhsc.edu/administrator/ae/hsb.aspx
Bulletin/Catalogue			http://catalog.lsuhsc.edu/
Associate Dean for Academic Affairs	Dr. Andrew Pellett 411 S.Prieur Street	504-568-4246	apelle@lsuhsc.edu
Associate Dean for Student Affairs	Dr. Kevin Lord 411 S.Prieur Street	504-556-3470	klord@lsuhsc.edu
CAP	2nd floor HDC	504-568-8888	https://www.lsuhsc.edu/orgs/campushealth/cap.aspx
Registrar	Resource Center	504-568-4829	http://www.lsuhsc.edu/registrar/
Student Financial Aid	Resource Center	504-568-4820	https://www.lsuhsc.edu/financialaid/default.aspx
Student Health	2820 Napoleon	504-412-1366	https://www.lsuhsc.edu/orgs/studenthealth/
Student Housing	Residence Hall 2nd fl.	504-568-6262	http://www.lsuhsc.edu/administration/ae/housing.aspx

Wellness Center	CALS	504-568-3700	http://www.lsuhsc.edu/administration/wellness/
Parking Office	Clinical Sciences Research Bldg.	504-568-4884	http://www.lsuhsc.edu/administration/ae/parking.aspx
Human Resources	433 Bolivar St. 6th Floor		https://www.lsuhsc.edu/administration/hrm/default.aspx
Library	Resource Center Bldg. 3rd Floor	504-568-6100	http://www.lsuhsc.edu/library/
PAY PAW			http://www.lsuhsc.edu/administration/ae/paypaw.aspx
IT Help New Orleans Campus		504-556-3410	ahnopcsupport@lsuhsc.edu
NOPD	1300 Perdido St.	504-658-4000	http://www.nola.gov/GOVERNMENT/NOPD
EMERGENCY	University Police 425 S. Roman Street, Room 301	EMERGENCY 504-568-8999 Non-emergency 504-568-8270	https://911.lsuhsc.edu/eas/ https://www.lsuhsc.edu/administration/vcgcsa/police/
Medical Emergency		911	After being released by the 911 operator, call the University Police at 504-568-8999
Weather Emergency			http://www.lsuhsc.edu/alerts/ https://www.lsuhsc.edu/administration/cm/

Department Faculty/ Staff	Location	Telephone	Email
Dr. Deborrah Allbrook	411 S. Prieur Room 319	504-556-7546	Dalls1@lsuhsc.edu
Dr. Rose Angelocci	411 S. Prieur Room 434-E	504-556-7519	range3@lsuhsc.edu
Dr. Adrianne Frischhertz	411 S. Prieur Room 318	504-556- 7544	alola1@lsuhsc.edu
Dr. George Hebert	411 S. Prieur Room 321	504-556-7566	gheber@lsuhsc.edu
Dr. Holly Walters	411 S. Prieur Room 320	504-556-7549	hharry@lsuhsc.edu
Dr. Erin Dugan	411 S. Prieur Room 422	504- 556-3400	emart3@lsuhsc.edu
Ms. Demeka Thompson Child & Family Counseling Clinic	411S.Prieur Room 307	504-556-3451	CFCC@lsuhsc.edu
Dr. Henry McCarthy	411S.Prieur Room 313	504-556-7554	hmccar@lsuhsc.edu

APPENDICES

A. Student Individualized Curriculum Planning (ICP) Form

B. Counseling Curriculum and Course Descriptions

C. Formal Student Referral for Remediation

D. Counselor Competencies Scale-Revised (CCS-R)

E. Key Performance Indicators (KPIs)

Appendix A

Student Individualized Curriculum Planning (ICP) Forms

LSUHSC—New Orleans Suggested Advisory Meeting Checklist

Student notified and/or received copies of Student Handbook, Curriculum Sequence, and Individualized Curriculum Plan.

Student notified of mandatory attendance at certain events while in the program.

Required Advisory Meetings

- Initial Advisory Session Upon Entry into Program
- Individual Curriculum Plan Meeting each semester student enrolling in upcoming coursework
- Fieldwork Placement Meeting before pre-fieldwork is due
  - Practicum
  - Internship I
  - Internship II
- Professional and/or Academic Support as needed

Student and advisor reviewed resources and tools for student success.

- Department: office hours, townhall meetings, advising
- School/University: CAP, APRIL, PALs, Student

Government Student and advisor reviewed student's
academic status.

- Provisional Acceptance: GRE Score Received
- Semester GPA
- Cumulative GPA

Student and advisor reviewed student's Individualized Curriculum Plan.

- Required courses discussed
- Electives discussed
- Prerequisites discussed

Student and advisor sign the ICP and the student uploads the signed document to Tavera.
Student and advisor discussed potential fieldwork sites for Practicum and Internship.
Student and advisor discussed COMPS.
Student and advisor discussed licensure requirements.

- Licensure exam (NCE, NCMHCE, CRC)
- State requirements
- Resources for selecting a board approved supervisor

Student and advisor discussed career outlook after graduation.

CACREP Specialty Area of Clinical Mental Health Counseling
Individual Curriculum Plan

Student Name: _____ **Date of Initial ICP:** _____

Student Start Semester: _____

Student Status: **Full-Time** **Part-Time** **Alternative**

Student Anticipated Practicum Semester: _____

Student Anticipated Comprehensive Exams Semester: _____

Student Anticipated Graduation Semester: _____

Faculty Advisor: _____

Courses	Semester Planned	Semester/ Year Taken	Grade Anticipated	Grade Received
COUN 5601 Foundations in Counseling 3				
COUN 5612 Development Across the Life Span 3				
COUN 5614 Professional Practicum in Counseling 1				
COUN 5650 Crisis Counseling Intervention 3				
COUN 6611 Counseling Theories and Practices 3				
COUN 5614 Professional Practicum in Counseling 1				
COUN 5654 Mental Health Diagnosis and Treatment Planning 3				
COUN 6612 Counseling Techniques and Process 3				
COUN 6630 Vocational Counseling/ Career Development 3				
COUN 6634 Ethics in Counseling 3				
COUN 5614 Professional Practicum in Counseling 1				
COUN 6614 Group Process and Counseling 3				
COUN 6641 Practicum in Counseling 3				
COUN 6640 Research Methods and Techniques in Rehabilitation 3				
COUN 6632 Assessment in Counseling 3				
COUN 5603 Multicultural and Psychosocial Aspects of Counseling 3				
COUN 6643 Internship in Counseling I 6				
COUN 6645 Internship in Counseling II 6				
Elective: COUN				
Elective: COUN				
Elective: COUN				
Comprehensive Examination				

Program changes may be made only with the advisor's approval. The plan approved above must conform to the program of study for the degree sought. It is the student's responsibility to be knowledgeable of LSUHSC, School of Allied Health, and Departmental Requirements.

Advisory Meeting Date	Notes, Recommendations, Changes	Student Signature & Date	Faculty Advisor Approval Signature & Date

Appendix B

Course Descriptions (Linked)

REQUIRED COURSES

COUN 5601 - FOUNDATIONS IN COUNSELING
COUN 5603 - INTERCULTURAL AND PSYCHOSOCIAL ASPECTS IN COUNSELING
COUN 5612 - DEVELOPMENT ACROSS THE LIFESPAN
COUN 5614 - PROFESSIONAL PRACTICUM IN COUNSELING
COUN 5650 - CRISIS COUNSELING INTERVENTION
COUN 5654 - MENTAL HEALTH DIAGNOSIS AND TREATMENT PLANNING
COUN 6611 - COUNSELING THEORIES AND PRACTICES
COUN 6612 - COUNSELING TECHNIQUES AND PROCESS
COUN 6614 - GROUP PROCESS AND COUNSELING
COUN 6630 - VOCATIONAL COUNSELING/CAREER DEVELOPMENT
COUN 6632 - ASSESSMENT IN COUNSELING
COUN 6634 - ETHICS IN COUNSELING
COUN 6640 - RESEARCH METHODS & TECHNIQUES IN REHABILITATION
COUN 6641 - PRACTICUM IN COUNSELING
COUN 6643 - INTERNSHIP IN COUNSELING I
COUN 6645 - INTERNSHIP IN COUNSELING II

ELECTIVE COURSES

COUN 5602 - MEDICAL ASPECTS OF DISABILITY
COUN 5605 - COUNSELING SPECIAL POPULATIONS
COUN 5606 - CHILD AND ADOLESCENT PSYCHOPATHOLOGY
COUN 5607 - ADVANCED INTERCULTURAL & PSYCHOSOCIAL ASPECTS OF COUNSELING
COUN 5608 - COMMUNITY COUNSELING
COUN 5609 - COUNSELING CHILD AND ADOLESCENTS
COUN 5610 - INTRODUCTION TO SCHOOL COUNSELNG
COUN 5613 - ADVANCED PLAY THERAPY
COUN 5616 - PLAY THERAPY THEORY, SKILLS & TECHNIQUES
COUN 5618 - FILIAL THERAPY & CHILD-PARENT RELATIONSHIP THERAPY
COUN 5619 - GROUP PLAY/ACTIVITY THERAPY
COUN 5620 - ADVANCED SKILLS IN COUNSELING
COUN 5640 - FAMILY AND COUPLES COUNSELING
COUN 5645 - CHILD-PARENT RELATIONSHIP THERAPY
COUN 5651 - SUPERVISED PROJECT IN COUNSELING
COUN 5652 - SUPERVISED PROJECT IN VOCATIONAL EVALUATION
COUN 5653 - HUMAN BEHAVIOR MANAGEMENT
COUN 5655 - BENEFITS COUNSELING IN REHABILITATION COUNSELING
COUN 5656 - CASE MANAGEMENT IN REHABILITATION COUNSELING
COUN 5658 - SUBSTANCE ABUSE IN COUNSELING
COUN 5659 - PROFESSIONAL COMMUNICATIONS
COUN 5660 - CONTEMPORARY ISSUES IN COUNSELING
COUN 5661 - INTRODUCTION TO PLAY THERAPY

COUN 5662 - PRIVATE SECTOR REHABILITATION COUNSELING
COUN 5664 - ADVANCED PROFESSIONAL COMMUNICATION
COUN 5665 - GRANT WRITING IN COUNSELING
COUN 6650 - COUNSELING RESEARCH PRACTICUM

Appendix C

Formal Student Referral for Remediation

Date of Referral: _____

Student Name: _____

Faculty Name: _____

Presenting Problems (Listed Behavioral Definitions of Excesses or Deficits with Dates)

_____
_____
_____
_____
_____
_____

(Additional Documents Can be Added)

Goals for Each Presenting Problem (Behavioral Statement of Successful Performance)

_____
_____
_____
_____
_____
_____

Faculty Name: _____

Faculty Signature: _____

Appendix D

Counselor Competencies Scale-Revised (CCS-R)

With **CACREP (2016) Common Core Standards**

Counselor Competencies Scale - Revised (CCS-R) ©

(Lambie, Mullen, Swank, & Blount, 2016)

The *Counselor Competencies Scale-Revised* (CCS-R) assesses counselors' and trainees' skill development and professional competencies. Additionally, the CCS-R provides counselors and trainees with direct feedback regarding their demonstrated ability to apply counseling skills and facilitate therapeutic conditions, and their counseling dispositions (dominant qualities) and behaviors, offering the counselors and trainees practical areas for improvement to support their development as effective and ethical professional counselors.

Scales Evaluation Guidelines

- **Exceeds Expectations / Demonstrates Competencies (5)** = the counselor or trainee demonstrates **strong** (i.e., *exceeding* the expectations of a beginning professional counselor) knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).
- **Meets Expectations / Demonstrates Competencies (4)** = the counselor or trainee demonstrates **consistent** and **proficient** knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s). A beginning professional counselor should be at the 'Demonstrates Competencies' level at the conclusion of his or her practicum and/or internship.
- **Near Expectations / Developing towards Competencies (3)** = the counselor or trainee demonstrates **inconsistent** and **limited** knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).
- **Below Expectations / Insufficient / Unacceptable (2)** = the counselor or trainee demonstrates **limited** or **no evidence** of the knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).
- **Harmful (1)** = the counselor or trainee demonstrates harmful use of knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

Directions: Evaluate the counselors or trainees counseling skills, ability to facilitate therapeutic conditions, and professional dispositions & behaviors per rubric evaluation descriptions and record rating in the score column on the left.

CACREP (2016) Common Core Standards:

- **Strategies for personal and professional self-evaluation and implications for practice (Section II, *Standard* 1.k.).**
- **Self-care strategies appropriate to the counselor role (Section II, *Standard* 1.l.).**
- **Multicultural counseling competencies (Section II, *Standard* 2.c.)**
- **A general framework for understanding differing abilities and strategies for differentiated interventions (CACREP, 2016, Section II, *Standard* 3.h.).**
- **Ethical and culturally relevant strategies for establishing and maintaining in-person and technology-assisted relationships (Section II, *Standard* 5.d.).**
- **Counselor characteristics and behaviors that influence the counseling processes (Section II, *Standard* 5.f.).**
- **Essential interviewing, counseling, and case conceptualization skills (Section II, *Standard* 5.g.).**
- **Developmentally relevant counseling treatment or intervention plans (Section II, *Standard* 5.h.).**
- **Processes for aiding students in developing a personal model of counseling (Section II, *Standard* 5.n.).**
- **The counselor education program faculty has a systematic process in place for the use of individual student assessment data in relation to retention, remediation, and dismissal. (Section 4, *Standard* H.).**
- **Professional practice, which includes practicum and internship, provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community (Section III, *Professional Practice*).**
- **Entry-Level Professional Practice and Practicum (Section III, Professional Practice, p. 13).**
  - **a) Students are covered by individual professional counseling liability insurance policies while enrolled in practicum and internship.**
  - b) Supervision of practicum students includes program-appropriate audio/video recordings and/or live supervision of students interactions with clients.
  - c) Formative and summative evaluations of the students counseling performance and ability to integrate and apply knowledge are conducted as part of the students practicum.
  - d) Students must complete supervised counseling practicum experiences that total a **minimum of 100 clock hours** over a full academic term that is a minimum of 10 weeks.
  - e) Practicum students must **complete at least 40 clock hours of direct service** with actual clients that contributes to the development of counseling skills.
  - f) Practicum students have weekly interaction with supervisors that averages **one hour per week of individual and/or triadic supervision** throughout the practicum by (1) a counselor education program faculty member, (2) a student supervisor who is under the supervision of a counselor education program faculty member, or (3) a site supervisor who is working in consultation on a regular schedule with a counselor education program faculty member in accordance with the supervision agreement
  - g) Practicum students participate in an average of **1 1/2 hours per week of group supervision** on a regular schedule throughout the practicum. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member.

CACREP (2016) Specialty Standards:

- Clinical Mental Health Counseling
    - Techniques and interventions for prevention and treatment of a broad range of mental health issues (3. Practice, *Standard* b.).
- Marriage, Couple, and Family Counseling
    - Techniques and interventions of marriage, couple, and family counseling (3. Practice, *Standard* c.).
- School Counseling
    - Techniques of personal/social counseling in school settings (3. Practice, *Standard* f.).

Part I: Counseling Skills & Therapeutic Conditions

Specific Counseling Skills and Therapeutic Conditions Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Harmful (1)
1.A Nonverbal Skills **Includes Body Position, Eye Contact, Posture, Distance from Client, Voice Tone, Rate of Speech, Use of silence, etc.** *(attuned to the emotional state and cultural norms of the clients)*	Demonstrates effective nonverbal communication skills, conveying connectedness & empathy (85%).	Demonstrates effective nonverbal communication skills for the majority of counseling sessions (70%)	Demonstrates inconsistency in his or her nonverbal communication skills.	Demonstrates limited nonverbal communication skills.	Demonstrates poor nonverbal communication skills, such as ignores client &/or gives judgmental looks.
❒ Not Observed	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.B Encouragers **Includes Minimal Encouragers & Door Openers such as 'Tell me more about...', 'Hmm'**	Demonstrates appropriate use of encouragers, which supports development of a therapeutic relationship (85%).	Demonstrates appropriate use of encouragers for the majority of counseling sessions, which supports development of a therapeutic relationship (70%).	Demonstrates inconsistency in his or her use of appropriate encouragers.	Demonstrates limited ability to use appropriate encouragers.	Demonstrates poor ability to use appropriate encouragers, such as using skills in a judgmental manner.
❒ Not Observed	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.C Questions **Use of Appropriate Open & Closed Questioning** *(e.g. avoidance of double questions)*	Demonstrates appropriate use of open & close-ended questions, with an emphasis on open-ended question (85%).	Demonstrates appropriate use of open & close-ended questions for the majority of counseling sessions (70%).	Demonstrates inconsistency in using open-ended questions & may use closed questions for prolonged periods.	Demonstrates limited ability to use open-ended questions with restricted effectiveness.	Demonstrates poor ability to use open-ended questions, such as questions tend to confuse clients or restrict the counseling process.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

1.D Reflecting - Paraphrasing

1.D Reflecting - Paraphrasing Basic Reflection of Content - Paraphrasing (With couples and families, paraphrasing multiple perspectives)	Demonstrates appropriate use of paraphrasing as a primary therapeutic approach (85%).	Demonstrates appropriate use of paraphrasing for the majority of counseling sessions (70%).	Demonstrates paraphrasing inconsistently & inaccurately or mechanical or parroted responses.	Demonstrates limited proficiency in paraphrasing or is often inaccurate.	Demonstrates poor ability to paraphrase, such as being judgmental &/or dismissive.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.E Reflecting (b) Reflection of Feelings Reflection of Feelings *(With couples and families, reflection of each clients' feelings)*	Demonstrates appropriate use of reflection of feelings as a primary approach (85%).	Demonstrates appropriate use of reflection of feelings (majority of counseling sessions; 70%).	Demonstrates reflection of feelings inconsistently & is not matching the client.	Demonstrates limited proficiency in reflecting feelings &/or is often inaccurate.	Demonstrates poor ability to reflective feelings, such as being judgmental &/or dismissive.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

Specific Counseling Skills and Therapeutic Conditions Descriptors	Exceeds Expectations / Demonstrates Competencies (5)		Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Harmful (1) Competencies (3)	Below Expectations / Unacceptable (2)
1.F Reflecting (c) Summarizing Summarizing content, feelings, behaviors, & future plans *(With couples and families, summarizing relational patterns of interaction)*	Demonstrates consistent ability to use summarization to include content, feelings, behaviors, and future plans (85%).	Demonstrates ability to appropriately use summarization to include content, feelings, behaviors, and future plans (majority of counseling sessions; 70%).	Demonstrates inconsistent & inaccurate ability to use summarization.	Demonstrates limited ability to use summarization (e.g., summary suggests counselor did not understand clients or is overly focused on content rather than process).	Demonstrates poor ability to summarize, such as being judgmental &/or dismissive.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.G Advanced Reflection (Meaning) Advanced Reflection of Meaning, including Values and Core Beliefs *(taking counseling to a deeper level)*	Demonstrates consistent use of advanced reflection & promotes discussions of greater depth during counseling sessions (85%).	Demonstrates ability to appropriately use advanced reflection, supporting increased exploration in session (majority of counseling sessions; 70%).	Demonstrates inconsistent & inaccurate ability to use advanced reflection. Counseling sessions appear superficial.	Demonstrates limited ability to use advanced reflection &/or switches topics in counseling often.	Demonstrates poor ability to use advance reflection, such as being judgmental &/or dismissive.
❒ Not Observed	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.H Confrontation Counselor challenges clients to recognize & evaluate inconsistencies.	Demonstrates the ability to challenge clients through verbalizing inconsistencies & discrepancies in the clients' words &/or actions in a supportive fashion. Balance of challenge & support (85%).	Demonstrates the ability to challenge clients through verbalizing inconsistencies & discrepancies in the clients' words &/or actions in a supportive fashion (can confront, but hesitant) or was not needed; therefore, appropriately not used (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to challenge clients through verbalizing inconsistencies & discrepancies in clients' words &/or actions in a supportive fashion. Used minimally/missed opportunity.	Demonstrates limited ability to challenge clients through verbalizing discrepancies in the client's words &/or actions in a supportive & caring fashion, &/or skill is lacking.	Demonstrates poor ability to use confrontation, such as degrading client, harsh, judgmental, &/or aggressive.

❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.I Goal Setting **Counselor collaborates with clients to establish realistic, appropriate, & attainable therapeutic goals** *(With couples and families, goal setting supports clients in establishing common therapeutic goals)*	Demonstrates consistent ability to establish collaborative & appropriate therapeutic goals with clients (85%).	Demonstrates ability to establish collaborative & appropriate therapeutic goals with client (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to establish collaborative & appropriate therapeutic goals with clients.	Demonstrates limited ability to establish collaborative, appropriate therapeutic goals with clients.	Demonstrates poor ability to develop collaborative therapeutic goals, such as identifying unattainable goals, and agreeing with goals that may be harmful to the clients.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

Specific Counseling Skills and Therapeutic Conditions l (1) Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Harmfu
1.J Focus of Counseling **Counselor focuses (or refocuses) clients on their therapeutic goals** (i.e., purposeful counseling)	Demonstrates consistent ability to focus &/or refocus counseling on clients' goal attainment (85%).	Demonstrates ability to focus &/or refocus counseling on clients' goal attainment (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to focus &/or refocus counseling on clients' therapeutic goal attainment.	Demonstrates limited ability to focus &/or refocus counseling on clients' therapeutic goal attainment.	Demonstrates poor ability to maintain focus in counseling, such as counseling moves focus away from clients' goals
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.K Facilitate Therapeutic Environment(a): **Empathy & Caring** **Expresses accurate empathy & care. Counselor is "present" and open to clients. (includes immediacy and concreteness)**	Demonstrates consistent ability to be empathic & uses appropriate responses (85%).	Demonstrates ability to be empathic & uses appropriate responses (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to be empathic &/or use appropriate responses.	Demonstrates limited ability to be empathic &/or uses appropriate responses.	Demonstrates poor ability to be empathic & caring, such as creating an unsafe space for clients.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
1.L Facilitate Therapeutic Environment(b): ***Respect & Compassion*** **Counselor expresses appropriate respect & compassion for clients**	Demonstrates consistent ability to be respectful, accepting, & compassionate with clients (85%).	Demonstrates ability to be respectful, accepting, & compassionate with clients (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to be respectful, accepting, & compassionate with clients.	Demonstrates limited ability to be respectful, accepting, &/or compassionate with clients.	Demonstrates poor ability to be respectful & compassionate with clients, such as having conditional respect.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

Total Score *(out of a possible 60 points)*

Part 2: Counseling Dispositions & Behaviors

Specific Counseling Skills and Therapeutic Conditions Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Harmful (1)
2.A Professional Ethics Adheres to the ethical guidelines of the ACA, ASCA, IAMFC, APA, & NBCC; including practices within competencies.	Demonstrates consistent & advanced *(i.e., exploration & deliberation)* ethical behavior & judgments.	Demonstrates consistent ethical behavior & judgments.	Demonstrates ethical behavior & judgments, but on a concrete level with a basic ethical decision-making process.	Demonstrates limited ethical behavior & judgment, and a limited ethical decision-making process.	Demonstrates poor ethical behavior & judgment, such as violating the ethical codes &/or makes poor decisions.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
2.B Professional Behavior Behaves in a professional manner towards supervisors, peers, & clients (e.g., emotional regulation). Is respectful and appreciative to the culture of colleagues and is able to effectively collaborate with others.	Demonstrates consistent & advanced respectfulness and thoughtfulness, & appropriate within *all* professional interactions.	Demonstrates consistent respectfulness and thoughtfulness, & appropriate within *all* professional interactions.	Demonstrates inconsistent respectfulness and thoughtfulness, & appropriate within professional interactions.	Demonstrates limited respectfulness and thoughtfulness & acts inappropriate within some professional interactions.	Demonstrates poor professional behavior, such as repeatedly being disrespectful of others &/or impedes the professional atmosphere of the counseling setting / course.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
2.C Professional & Personal Boundaries Maintains appropriate boundaries with supervisors, peers, & clients.	Demonstrates consistent & strong appropriate boundaries with supervisors, peers, & clients.	Demonstrates consistent appropriate boundaries with supervisors, peers, & clients.	Demonstrates appropriate boundaries inconsistently with supervisors, peers, & clients.	Demonstrates inappropriate boundaries with supervisors, peers, & clients.	Demonstrates poor boundaries with supervisors, peers, & clients; such as engaging in dual relationships.

❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
2.D Knowledge & Adherence to Site and Course Policies Demonstrates an understanding & appreciation for *all* counseling site and	Demonstrates consistent adherence to *all* counseling site and course policies & procedures, including strong attendance and engagement.	Demonstrates adherence to most counseling site and course policies & procedures, including strong attendance and engagement.	Demonstrates inconsistent adherence to counseling site and course policies & procedures, including attendance and engagement.	Demonstrates limited adherence to counseling site and course policies & procedures, including attendance and engagement.	Demonstrates poor adherence to counseling site and course policies, such as failing to adhere to policies after discussing with supervisor /
❒ Not Observed.	5	4	3	2	1

Specific Counseling Skills and Therapeutic Conditions mful (1) Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Har
2.E Record Keeping & Task Completion **Completes *all* weekly record keeping & tasks correctly & promptly** (e.g., case notes, psychosocial reports, treatment plans, supervisory report).	Completes *all* required record keeping, documentation, and assigned tasks in a through, timely, & comprehensive fashion.	Completes *all* required record keeping, documentation, and tasks in a competent & timely fashion.	Completes *all* required record keeping, documentation, and tasks, but in an inconsistent & questionable fashion.	Completes required record keeping, documentation, and tasks inconsistently & in a poor fashion.	Failure to complete paperwork &/or tasks by specified deadline.
❒ Not Observed	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
2.F Multicultural Competence in Counseling Relationship Demonstrates respect for culture (e.g., race, ethnicity, gender, spirituality, religion, sexual orientation, disability, social class, etc.) and awareness of and responsiveness to ways in which culture interacts with the counseling relationship.	Demonstrates consistent & advanced multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates inconsistent multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates limited multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates poor multicultural competencies, such as being disrespectful, dismissive, and defensive regarding the significance of culture in the counseling relationship.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

2.G Emotional Stability & Self- control Demonstrates self-awareness and emotional stability (i.e., congruence between mood & affect) & self-control (i.e., impulse control) in relationships with clients.	Demonstrates consistent emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates inconsistent emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates limited emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates poor emotional stability & appropriateness in interpersonal interactions with client, such as having high levels of emotional reactants with clients.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

2.H Motivated to Learn & Grow / Initiative Demonstrates engagement in learning & development of his or her counseling competencies.	Demonstrates consistent and strong engagement in promoting his or her professional and personal growth & development.	Demonstrates consistent engagement in promoting his or her professional and personal growth & development.	Demonstrates inconsistent engagement in promoting his or her professional and personal growth & development.	Demonstrates limited engagement in promoting his or her professional and personal growth & development.	Demonstrates poor engagement in promoting his or her professional and personal growth & development, such as expressing lack of appreciation for profession &/or apathy to learning.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

Specific Counseling Skills and Therapeutic Conditions Harmful (1) Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	
2.I Openness to Feedback Responds non-defensively & alters behavior in accordance with supervisory &/or instructor feedback.	Demonstrates consistent and strong openness to supervisory &/or instructor feedback & implements suggested changes.	Demonstrates consistent openness to supervisory &/or instructor feedback & implements suggested changes.	Demonstrates openness to supervisory &/or instructor feedback; however, does not implement suggested changes.	Demonstrates a lack of openness to supervisory &/or instructor feedback & does not implement suggested changes.	Demonstrates no openness to supervisory &/or instructor feedback & is defensive &/or dismissive when given feedback.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
2.J Flexibility & Adaptability Demonstrates ability to adapt to changing circumstance, unexpected events, & new situations.	Demonstrates consistent and strong ability to adapt & "reads- &-flexes" appropriately.	Demonstrates consistent ability to adapt & "reads-&-flexes" appropriately.	Demonstrated an inconsistent ability to adapt & flex to his or her clients' diverse changing needs.	Demonstrates a limited ability to adapt & flex to his or her clients' diverse changing needs.	Demonstrates a poor ability to adapt to his or her clients' diverse changing needs, such as being rigid in work with clients.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1
2.K Congruence & Genuineness Demonstrates ability to be present and 'be true to oneself'	Demonstrates consistent and strong ability to be genuine & accepting of self & others.	Demonstrates consistent ability to be genuine & accepting of self & others.	Demonstrates inconsistent ability to be genuine & accepting of self & others.	Demonstrates a limited ability to be genuine & accepting of self & others (incongruent).	Demonstrates a poor ability to be genuine & accepting of self & others, such as being disingenuous.
❒ Not Observed.	❒ 5	❒ 4	❒ 3	❒ 2	❒ 1

Demonstrates consistent and strong ability to adapt & "reads-&-flexes" appropriately.

Total Score *(out of a possible 55 points)*

Narrative Feedback from Supervising Instructor / Clinical Supervisor

Please note the counselor's or trainee's areas of strength, which you have observed:

Please note the counselor's or trainee's areas that warrant improvement, which you have observed:

Please comment on the counselor's or trainee's general performance during his or her clinical experience to this point:

Signatures

Who is the Evaluator?

❒ Student Self Evaluation ❒ Site Supervisor Evaluation

❒ Faculty Supervisor Evaluation ❒ Faculty - Clinical Interview Instructor Evaluation

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Phase:

❒ Pre-Practicum ❒ Practicum ❒ Internship I

❒ Internship II ❒ Other:

Date CCS-R was reviewed with Counselor or

Trainee: Counselor's or Trainee's Name (print):

Counselor's or Trainee's Signature

_____ _____

Supervisor's Name (print):

Faculty Supervisor's Signature

* *Note.* If the supervising instructor / clinical supervisor is **concerned** about the counselor's or trainee's progress in demonstrating the appropriate counseling competencies, he or she should have another appropriately trained supervisor observe the counselor's or trainee's work with clients to provide additional feedback to the counselor or trainee.

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Appendix E

LSUHSC (Louisiana State University Health Sciences Center)
Department of Counseling
Key Performance Indicators

(2024 CACREP Standards)

(Red Font Should be Used to Highlight Specific Course Assessments)

Program Benchmark: 80% of students will meet or exceed expectations for each assessment.

1. PROFESSIONAL COUNSELING ORIENTATION AND ETHICAL PRACTICE						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to **PROFESSIONAL COUNSELING ORIENTATION AND ETHICAL PRACTICE**	(3.A.2) the multiple professional roles and functions of counselors across specialized practice areas	COUN 5601 Foundations (knowledge) *Assignment: Professional Counselor Interview Paper & Presentation*	COUN 6634 Ethics (knowledge) *Assignment: Personal Belief Statement*	COUN 6643 Internship I (Skills) *Assignment: Therapeutic Intervention Presentation*		
2. SOCIAL AND CULTURAL DIVERSITY						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to social and cultural diversity.	(3.B.1) theories and models of multicultural counseling, social justice, and advocacy	COUN 6641 Practicum in Counseling Assignment: Technique Intervention Presentation (TIP)	COUN 6643 Internship I (Skills) Assignment: Casee Presentation	COUN 5603 Multicultural Counseling (knowledge & Skills Assignment: Cultural Autobiography		
3. HUMAN GROWTH AND DEVELOPMENT						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to human growth and development.	(3.C.10) biological, neurological, and physiological factors that affect lifespan development, functioning, behavior, resilience, and overall wellness	COUN 5612 Development Across the Lifespan (knowledge) *Assignment Group Presentation of a Published Systematic Review Addressing*	COUN 5654 Mental Health Diagnosis & Treatment Planning *Assignment: Site Visit Presentation*	COUN 6645 Internship II in Counseling (knowledge & skills) *Assignment: Case Presentation*		

		Multicultural Issues				
4. CAREER DEVELOPMENT						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to vocational counseling	(3.D.3) processes for identifying and using career, avocational, educational, occupational, and labor market information resources, technology, and information systems	COUN 6630 Vocational Counseling (knowledge) *Assignment: Career Assessment Project*	COUN 5614 Professional Practicum (knowledge) Professional Script	COUN 6643 Internship I Counseling (knowledge & skills) Assignment: Site Presentation		
5. COUNSELING AND HELPING RELATIONSHIPS						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to counseling and helping relationships.	(3.E.1) theories and models of counseling, including relevance to clients from diverse cultural backgrounds	COUN 6611 Theories (knowledge) Assignment Conceptualization Paper	COUN 6612 Techniques Assignment: (skills and knowledge) Counseling Videos	COUN 6641 Practicum in Counseling (Knowledge and skills) Assignment: Theory Reflection		
6. GROUP COUNSELING AND GROUP WORK						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to group counseling and group work.	(3.F.3) therapeutic factors of group work and how they contribute to group effectiveness	COUN 6614 Group Process (knowledge) Assignment: Group Observation	COUN 6614 Group Process (knowledge & skills) Assignment: Group Facilitation	COUN 6643 psychoeducational group assignment.		
7. ASSESSMENT AND TESTING						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***

Students will demonstrate competency related to assessment and testing.	(3.G7) use of culturally sustaining and developmentally appropriate assessments for diagnostic and intervention planning purposes	COUN 5654 Mental Health Diagnosis & Treatment (knowledge and skills) Diagnostic Interview and Presentation	COUN 6632 Assessment (skills) Integrated Assessment, Report of Findings, and PowerPoint Case Conference	COUN 6645 Internship II in Counseling Knowledge & (skills) *Assignment: Therapeutic Intervention Presentation*		
8. RESEARCH AND PROGRAM EVALUATION						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to research and program evaluation.	(3.H.6) analysis and use of data in research	COUN 5612 Development Across the lifespan (knowledge & Skills) Group Systematic Review APA (American Psychological Association) Paper	COUN 6640 Research Desing and Methodology (knowledge and skills) Quantitative Study/APA Paper Submission	Dept. Research Symposium Poster/Platform Presentation		
9. CLINICAL MENTAL HEALTH COUNSELING (SECTION 5: ENTRY-LEVEL SPECIALTY AREA)						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to clinical mental health counseling.	(5.C.1) etiology, nomenclature, diagnosis, treatment, referral, and prevention of mental, behavioral, and neurodevelopmental disorders	COUN 5603 Foundations *Assignment:* Specialty Area Presentation	COUN 6641 Practicum in Counseling *Assignment: Therapeutic Intervention*	COUN 6645 Internship II in Counseling (skills) *Assignment: Summative PowerPoint Presentation*		
10. Professional Dispositions						
Key Performance Indicators	***Related CACREP Standards***	***First Assessment***	***Second Assessment***	***Third Assessment***	***Results***	***Conclusions and Action Steps***
Students will demonstrate competency related to professional dispositions.	(3.A.11) self-care, self-awareness, and self-evaluation strategies for ethical and effective practice	COUN 5614 Professional Practicum Assignment: Professional Plan	COUN 5614 Professional Practicum Assignment: Wellness Plan	COUN 5614 Professional Practicum Assignment: Professional Script		