

PRACTICUM II IN PROFESSIONAL MENTAL HEALTH COUNSELING

*Department of Counseling Psychology
Lewis & Clark College*

CPSY 505

Spring, 2014

*“ For therapy to be therapeutic, it is more important for the clinician to understand
people than to master specific treatment techniques”*

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COURSE INFORMATION

Time: Wednesday, 2:00pm-8:30pm

Location: LC Community Counseling Center Rm 124

Credits: 3 credit hours

Pre-requisites: CPSY 503, CPSY 506, CPSY 509, CPSY 510, CPSY 513, CPSY 514 or
515, CPSY 522, CPSY 523, CPSY 524, CPSY 530 or CPSY 535, CPSY 534, CPSY 550.

COURSE DESCRIPTION

Working with clients in the practicum clinic, agency or school setting (eight to 10 hours per week, 150 hours total over two practica) under intensive supervision from CPSY faculty, developing the therapeutic relationship and basic counseling competencies. Students are expected to demonstrate personal characteristics and professional conduct necessary for effective, ethical counseling.

COURSE OBJECTIVES

This course is designed as a beginning practicum experience in counseling psychology where you will be provided the opportunity (1) to work therapeutically with a variety of clients from diverse backgrounds; (2) to learn new skills in therapeutic intervention and conceptualization, and to apply these in a multicultural context; (3) to identify and address potential ethical issues; and (4) to facilitate an ongoing self-awareness of personal characteristics that impact your development as a psychotherapist. To this end, several objectives define the practicum in this particular setting. The primary objective is to provide a coherent training experience for students in the broad array of direct service

interventions that characterizes counseling (including, but not limited to, psychotherapy, couples' counseling, and career counseling). An important secondary purpose is to provide quality services to clients in the community. While the overall objectives of this course form a composite, more specifically, the practicum will focus on providing students with the following training experiences:

1. Practicum students will engage in a helping relationship with their clients focusing on the development of the therapeutic relationship. (CC: 5a, 5b, 5c)
2. Demonstrate consistent use of micro skills which includes interviewing skills, client conceptualization and effective use of prevention/intervention strategies (CC: 7h, 5h, 5c)
3. Demonstrate engaging in a therapeutic relationship based on benevolence, trustworthiness and authenticity (CC: 5a, 5b, 5c)
4. Demonstrate intake interviews as well as appropriate client assessments and screening (CC: 7g)
5. Demonstrate evaluation of risk factors related to client's safety and welfare as well as perpetrator of violence or abuse (CC: 7h)
6. Demonstrate appropriate documentation and record keeping skills (CC: 5g)
7. Utilize effective treatment planning, goal planning and termination plans (CC: 7h)
8. Engage in case presentations, consultation, communication with supervisor and peers utilizing professional language (CC: 5a, 5b, 5c)
9. Utilize community resources and understanding of how to access and refer, as well as consult with outside agencies as necessary (CC: 3c, 1b)
10. Maintain ethical counseling standards with an ability to identify ethical issues, their evaluation, use consultation and engage in the ethical decision making process (CC: 5g, 7i)
11. Maintain a protocol for self-care, identifying personal support systems, appropriate boundary management and life activities that generate overall well being. (CC: 5a)

REQUIRED TEXT

Jongsma, A. E. & Peterson, L. M. (2006). *The Complete Adult Psychotherapy Treatment Planner*. Hoboken, NJ: Wiley & Sons.

Additional readings as outlined in the syllabus

Recommended:

Kleespies, P. M. (2009). *Behavioral Emergencies: An evidence-based resource for evaluating and managing risk of suicide, violence, and victimization*. Washington, D.C.: American Psychological Association.

Vandiver, V. (2013). *Best practices in community mental health: A pocket guide*. Chicago: Lyceum books.

Wachtel, P. (2011). *Therapeutic communication: Knowing what to say when*. New York: Guilford.

COURSE POLICIES

Email Policy

I maintain a 48-hour response policy for all email communications not including weekends. If you do not receive an email response within 48 hours of your email being sent, assume that I did not receive your email unless I respond noting otherwise. **In very rare circumstances (i.e., emergencies) will an email receive a response between 5pm Friday and 8am Monday.** Note: Questions regarding assignments are not typically considered emergencies.

Attendance and Participation

Attendance: You are expected to attend every class. Because this course only meets once a week, missing one class can be detrimental to your overall success in the course as a whole. **More than one absence (excused or not) will result in a grade of No Credit being awarded.** Additionally, it is important that you be on time for class.

Absences and Tardiness: Excused absences, in which prior arrangements are not possible, (i.e. accident requiring hospitalization, death of an immediate family member, sudden illness, etc.) will be handled on a case-by-case basis. In the event of an absence you are required to attend to the care of your clients, meaning that you are responsible for ensuring that they are contacted and made aware of your absence. Failure to do so will jeopardize your successful completion of practicum and will be reflected in your evaluation.

Participation: You are expected to participate in class discussions and group supervision. Participation not only adds to the quality of discussions, but also demonstrates that the class is completing assigned readings and understanding the material. When you do not participate, other students are forced to pick up your slack. **You can't participate if you are not present.** Active participation is essential and will be evaluated in the following way:

Excellent - Proactive participation through leading, originating, informing, challenging contributions that reflect in-depth study, thought, and analysis of the topic under consideration. This does not mean dominating the discussion or using a lot of words to say little.

Satisfactory - Reactive participation with supportive, follow-up contributions that are relevant and of value, but rely on the leadership and study of others, or reflect opinion rather than study, thought, and contemplation.

Minimal acceptability - Passive participation including being present, awake, alert, attentive, but not actively involved.

Unsatisfactory - Uninvolved including being absent, late, present but not attentive, sleeping, reading the newspaper, making irrelevant contributions that inhibit the progress of the discussion.

Late assignments

All assignments will be due at the start of class on the dates outlined in the syllabus. Late assignments will be penalized 10% of the points available for each 24-hour interval that they are late. Assignments > 1 week late will not be accepted unless you have medical or other valid documented reasons for the delay. In short, all assignments are outlined in the syllabus, are not subject to change, thus providing you with all the information and ample time to plan your schedules accordingly to ensure that all assignments are completed thoroughly and in a timely fashion.

COURSE REQUIREMENTS

1. Case Presentations. Students are required to make a comprehensive case presentation lasting 45 minutes as part of the group supervision sessions. For each presentation, a formal case write up (typed) will be prepared following one of the available formats. A draft of your write up is due to the supervisor ONE WEEK before your scheduled presentation! PLAN ACCORDINGLY! Students are expected to choose at least one theoretical orientation with which to conceptualize the case. This report differs from the writing tasks required by the clinic (e.g., intakes and closing summaries) in a number of ways; however, the most obvious difference is the focus on psychological theory as the driving force for the case conceptualization and intervention strategies. In the group supervision session, the student will present a brief review of the written material and present excerpts (to be selected prior to presentation) of the videotaped therapy session (3-5 minutes in length).

Case presentations will be scheduled at the start of the semester. You will be responsible to present on the date assigned. There is no possibility of a make-up, as our schedule is going to be full. If for some reason you cannot make your presentation, it is your responsibility to arrange for a classmate to take your time slot. You must successfully complete all requirements to receive a passing grade.

Case presentations that do not meet the expectations of the seminar will not be accepted. Examples of an inadequate presentation include: an inaudible tape, an outdated tape of a client, no written case conceptualization, no tape excerpts, a clear lack of preparation concerning the client's issues or your needs, etc. **ABSOLUTELY NO CLIENTS CAN BE SCHEDULED DURING CASE PRESENTATIONS; EITHER YOUR OWN OR A PEERS.**

2. Transcript: Please make a transcript of an illustrative 15-minute section of one of your sessions. On your transcript, you should comment on the process occurring between you and your client, e.g., what were you trying to accomplish, where did you have emotional reactions, where do you think your client's responses are indicative of the presenting problems, the transference relationship, etc. This assignment is **due at the beginning of class on March 19, 2014**.
3. Progress notes: Client progress notes and files must be up to date at all times in accordance with ACA ethical and record keeping guidelines as well as those outlined in the practicum manual. Notes are to be turned in weekly for signing by the supervisor, and should be written no later than 48 hours following session. **All client notes must be typed; no handwritten note will be signed off on.** Client notes should not be written on any computer outside of the Counseling Center. Doing so may result in immediate consequence including but not limited to immediate termination of your practicum and/or internship, and dismissal from the program. Additionally, part of the training experience is receiving constructive feedback, both about your clinical skills and your case notes. You will *likely* receive feedback on your case notes that will require some revising. This is normal and to be expected.
5. Attendance. Students are expected to approach the practicum at the Community Counseling Center in a professional manner. The practice of counseling psychology carries with it the burden of responsibility for client welfare. Thus, students should cancel or reschedule client appointments only in extreme situations (e.g., illness). Missing more than 1 class will result in the failure of practicum.

COURSE EXPECTATIONS

Include, but are not limited to:

1. Process and Communication Skills.
 - Students will continue to develop the skills learned in Practicum I. Process skills refer to counselor behaviors that can be observed either through two-way mirrors, videotaping, or audiotaping. Process skills range from simple (restatement) to sophisticated (paradoxical intervention) depending on counselor ability. These skills enhance the process of counseling and are evaluated in their execution rather than their choice.
 - Make highly accurate responses to client's statements by responding to client needs, feelings, cues, and behavior.
 - Understand but not become overly involved in the problems of individuals.
 - Facilitate and remain open to the intense affective responses of the client, including those directed toward the counselor.
 - Maintain an appropriate separateness from the client.
 - Facilitate self-exploration and understanding on the part of the client through the appropriate use of empathy and respect.

- Appropriately share experiences, feelings, and ideas in an open, non-dogmatic manner while keeping the focus on the client.
 - Place a client at ease prior to the initial counseling experience through informal and casual discussion aimed at dispelling hostile and apprehensive attitudes toward the counseling process.
 - Demonstrate ability to terminate the counselor/client relationship.
 - Use more advanced (interviewing) counseling skills such as probing, interpretation, and constructive feedback appropriate to counselor's theoretical frame of reference.
2. Conceptualization Skills.
- Students will continue to develop intervention strategies learned in Practicum I. Conceptualization skills reflect deliberate thinking and case analysis; such "thinking" takes place both in the session and between sessions.
 - Conceptualization skills include: identifying the major concern of the client, recognizing dominant themes in a session, planning for future sessions, and choosing a particular helping response/technique with a certain goal in mind.
 - Appropriately apply counseling skills to problems presented by a variety of individuals in an agency setting.
 - Establish an ongoing counseling relationship with a client(s) based on accurate case conceptualization.
 - Set process and outcome goals related to identified client problems.
 - Develop and implement counseling plans to meet identified client problems.
 - Demonstrate knowledge of counseling intervention strategies/theories by applying them and/or by identifying their potential use during in class tape critiques.
 - Identify client strengths, goals, and self-defeating behaviors.
 - Understand and use transference-laden behavior to increase client/self knowledge.
 - Skillfully perform the techniques specific to the counselor's declared mode/theory of choice.
 - Apply problem-solving strategies with a client.
 - Identify and report client problems from both the counselor and client perspectives.
 - Develop and implement counseling plans to meet identified goals and objectives.
 - Recognize the indications for termination of the counseling relationship and demonstrate an appropriate termination process.
 - Report outcomes, results, and status of problems and clients at termination of counseling.
 - Explain and demonstrate the use of a personal model of counseling.
3. Personalization Skills.
- Students will continue to develop an understanding of their personal issues and growth (begun in Practicum I).
 - Personalization skills are those personal attributes which counselors use in the counseling relationship. Personalization also refers to the degree to which the student has adapted to the role of helper.
 - Such skills include:
 - o Being comfortable with the professional responsibility of being a counselor.

- Being able to separate personal reactions to an issue from those of the client.
 - Allowing a sense of humor to emerge.
 - Not being defensive with an accusing client.
 - Being able to handle a range of emotions in self or client.
 - Being able to accept constructive critique in supervision.
4. Professional Skills.
- Students are expected to develop and demonstrate the professional behaviors that will support the ethical standards of the American Counseling Association.
 - Such skills include:
 - Complete written clinical documentation in a timely fashion. All client contact should be documented before leaving the clinic for the day.
 - No clinical documentation should be written outside of or leave the clinic for any reason.
 - Safeguard confidentiality.
 - Behave professionally in field placement.
 - Dress appropriately for counseling contacts.
 - Remain objective toward opinions, practices, ethnicity, religious and spiritual values, different from self held beliefs.
 - Understand self and be aware of emotional limitations.
 - Remain open to assessments by others as to personality and counseling style, including complementary as well as critical statements.
 - Communicate to the client the nature of the relationship so that the client understands the limits of the services offered.
 - Relate to clients of various religious and ethnic backgrounds.
 - Display an awareness of the specialties, skills, and services of other helping personnel in the community so that referral, when necessary, is a possibility.
 - Determine in specific cases when it is appropriate to share a client's private communication and when the counselor must act autonomously and in confidence.
 - Confront and assist student peers who are not exhibiting professional behavior.

COURSE FORMAT

- We will spend the first 1.5 hours of each meeting in group supervision, which is to be used to discuss assigned readings, clinical and training needs and issues, and client concerns.
- Triadic supervision will be provided during each scheduled meeting time. Student pairs will receive 50mins of triadic supervision each class meeting with the professor. Triadic supervision will include review of observed sessions, audio/video tape review, case conceptualization, and discussion of pertinent issues.

- The remainder of your time will be spent in counseling sessions, reviewing tapes of your therapy sessions, observing counseling sessions of your peers, writing chart notes, phone intake coverage, and sundry professional tasks.

GRADES

The practicum is graded *credit/no credit*. Failure to complete the required number of direct service hours may result in a deferred grade. **I will NOT award a passing grade without 40 direct service hours. You cannot begin internship without a passing grade in practicum.** Meeting the above requirements is a minimum criterion for evaluation. Among the additional dimensions considered by the instructor are the following:

1. *Collegial Interactions:*
 - a. Willingness to provide feedback and suggestions to others.
 - b. Openness to feedback and suggestions from others.
 - c. Utilization of resources within LCCCC and within the group.
 - d. Comporting yourself in a professional manner at all times.
2. *Interview Behavior:*
 - a. Attention to the process aspects of the counseling relationship.
 - b. Attention to content, affect, and non-verbal behavior.
 - c. Development of a therapeutic relationship.
 - d. Development of a comprehensive case conceptualization and diagnosis replete with treatment goals.
 - e. Implementation of appropriate counseling techniques and strategies.
 - f. Comfort and ability to work with people with differing values and perspectives
 - g. Awareness of the impact of one's values on clients and the therapeutic process
3. *Case Management:*
 - a. Attention to pre-session preparation.
 - b. Integration of theory, research, and practice in case conceptualizations.
 - c. Attention to the development and implementation of referral and consultation skills, particularly in regard to working with other professionals in the Center and in the community.
4. *Clinical Supervision:*
 - a. Reviewing audio/video tapes of therapy sessions.
 - b. Preparation of materials, thoughts, issues, and questions prior to supervision.
 - c. Openness to and utilization of supervision.
 - d. Willingness to discuss with the supervisor any problems encountered in the practicum, in group supervision, or with the supervisor.
 - e. Treating the supervisor with respect.
5. *Professional Attitude*
 - a. Being appropriately proactive, taking the initiative and responsibility for your

- training and development as a professional counselor.
- b. You are expected to keep your commitments to the site and to the practicum group. These include, but are not limited to, being prepared for supervision, keeping your scheduled appointments with clients, colleagues, and supervisors, and behaving professionally and responsibly in all related activities.
 - c. You are expected to maintain timely case notes for all clients whom you see and turn in your notes at the specified times.
 - d. All case materials must be safeguarded for confidentiality. These include chart notes, case presentations, test materials, tapes, etc. Case notes and charts cannot be removed from the site without permission of the supervisor.
 - e. You are expected to conduct yourself in a responsible manner, in accordance with legal statutes, ethical principles, and professional standards, in all of your practicum activities [e.g., ACA (2005)].

Grounds for an Unsatisfactory Grade include but are not limited to:

- In the absence of unforeseen and unavoidable circumstances, failure to adhere to expectations a - c *may* be seen as sufficient grounds for insisting that you withdraw from the practicum. A single instance of failure to adhere to expectations d or e *will* be viewed as sufficient grounds for a “U”, insisting that you withdraw from the practicum, with referral to the appropriate Department and University judicial committee(s).
- Failure to complete required assignments (e.g., self-assessments, clinical logs, case presentations)
- Absences
- Failure to complete basic administrative responsibilities (e.g., case notes, taping of sessions, case conceptualization)
- Inappropriate, unprofessional, and/or unethical behavior that is unresponsive to feedback and/or jeopardizes client or colleague welfare
- Unwillingness or inability to take corrective actions in response to supervisory feedback
- Inappropriate imposition of personal values and/or consistent skill deficiencies that are unresponsive to supervisory feedback and compromise clinical work

A NOTE ABOUT SUPERVISION

The broad goals of supervision include (a) development of diagnostic and case conceptualization skills, (b) development of the ability to translate theory and research into practice, (c) enhancement and refinement of interviewing, assessment, and psychotherapy techniques (within session behavior), (d) understanding of relationship and process issues and their emotional components, and (e) personal and professional development. Of course, of primary concern is the welfare of your clients.

Because psychotherapy is an immensely personal and emotional experience for both client and therapist, you can expect to be challenged personally throughout your practicum experience. You are likely to find yourself questioning aspects of your own

personality as well as re-interpreting your past experiences as a child and as an adult. You may also find the process of beginning to identify yourself as a therapist to be quite disturbing, and this process may have ramifications in your personal and family relationships. These issues are normal and expectable. As such, they are appropriate topics for discussion in supervision.

As one example, you may find that you have difficulty allowing a client to express strong emotions (e.g., anger, pain). (This is common!) The extent to which such a walling-off of feeling is characteristic of you or is due to experiencing a personal crisis in your own life may become part of our dialogue in supervision. While these discussions may have secondary therapeutic benefits for you, the goal is *not* psychotherapy. In other words, while we may explore your conflicts in supervision as it relates to your work with clients, the ultimate goal is not to modify your personality. The goal is, rather, to help you work through specific personal barriers that impede your work with clients, that impede your participation in individual or group supervision, or that impede your interactions and functioning as a therapist.

Such dialogue is, of course, confidential. Evaluation of your counseling skills and professionalism is not confidential. You will not be evaluated based on any feelings, weaknesses, or inadequacies you discuss in supervision (unless they negatively impact the client or are a threat to client or colleague welfare). I will, however, expect you to be willing to explore personal reactions to clients and to supervision and to be open to considering your personal contribution to the therapeutic context. You will be evaluated based on your behaviors and attitude.

Please note that despite the formality of this document the practicum will be relaxed with an emphasis on individualized learning. The intent is to provide an opportunity to share cases and experiences and to learn from one another.

Course Schedule

Week 1	Jan 8	Introductions and orientation, case presentation format, clinical documentation overview
Week 2	Jan 15	CNPAAEMI (2003). Psychological Treatment of Ethnic Minority Populations AMCD Multicultural Counseling Competencies ALGBTIC Competencies for Counseling LGBQQIA Individuals
Week 3	Jan 22	Case presentation 1
Week 4	Jan 29	Case presentation 2
Week 5	Feb 5	Case presentation 3
Week 6	Feb 12	Case Presentation 4
Week 7		

	Feb 19	Case Presentation 5
Week 8		
	Feb 26	Case Presentation 6
Week 9		
	March 5	CATP: Depression, ADHD, Low Self Esteem and Dependency
Week 10		
	March 12	CATP: Panic and Anxiety
Week 11		
	March 19	CATP: Childhood Traumas, Borderline, and PTSD
Week 12		
	March 26	NO CLASS
Week 13		
	April 2	CATP: Grief, Intimate Relationship Conflict
Week 14		
	April 9	Liu et al (2007). White middle-class privilege: Social class bias and implications for training and practice (pp. 194-206) Liu et al (2004). <i>A new framework to understand social class in counseling. The social class worldview mode and modern classism theory.</i> (pp.95-122) Hooks, b. (2000). <i>Coming to class consciousness</i> (pp. 24-37). In <i>Where we stand: Class matters.</i>
Week 15		
	April 16	Open Case Discussion- Last Day to see terminating clients
Week 16		
	April 23	Wrap up and Final Evaluations- Last day to see transferring clients