



DEPARTMENT OF CLINICAL REHABILITATION &  
COUNSELING

---

Master of Health Sciences in Clinical Rehabilitation Counseling

# Practicum & Internship Handbook

LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER—NEW ORLEANS

# Practicum & Internship Handbook

---

Department of Clinical Rehabilitation and Counseling  
411 S. Prieur Street • Room 308  
New Orleans, LA 70112  
Phone 504-556-3453 • Fax 504-556-7540  
crc@lsuhsc.edu  
<http://alliedhealth.lsuhscc.edu/crc/default.aspx>

Revised December 2018, KGC

---

# Table of Contents

<b>Section 1: Overview of Practicum and Internship</b> .....	<b>3</b>
Program Mission and Goals .....	3
Objective of Practicum and Internship .....	4
Course Descriptions .....	5
Standards and Policies .....	7
Faculty and Staff Contact Information .....	12
<b>Section 2: Standards of the Field</b> .....	<b>13</b>
CACREP .....	13
Ethical Standards .....	17
Course Syllabi .....	17
<b>Section 3: Roles and Responsibilities</b> .....	<b>18</b>
Students .....	18
Sites .....	20
Site Supervisors .....	20
Faculty Supervisors .....	21
Placement Coordinators .....	22
RSA Principal Investigator .....	23
Communication.....	23
<b>Section 4: Remediation Policies and Procedures</b> .....	<b>25</b>
Reasons or Causes for Remediation .....	25
Remediation Process .....	25
<b>Section 5: Placement Procedures and Materials</b> .....	<b>28</b>
Placement Procedures .....	28
Practicum and Internship Application Part I and II Checklist .....	31
Practicum and Internship Application .....	32
Site Data Sheet .....	33
Live Supervision Approval Form.....	34
Sample Working Contract.....	35
Sample Declaration of Practices.....	41

---

Course Syllabus Guide.....	43
Clinical Experience Documentation.....	43
Client Case Presentations.....	45
Weekly Logs.....	47
Clinical Experience Log.....	49
Client Consent Form.....	50
Recording Verification Form.....	51
Live Supervision Verification Form.....	52
Faculty Supervisor Site Visit Form.....	54
<b>Section 6: Safety Policies and Practices .....</b>	<b>55</b>
Student Conduct.....	55
Campus Assistance Program.....	55
Substance Abuse.....	56
Student Health Services.....	56
Office of Compliance.....	56
Emergency Disaster Plan.....	56
At risk/Crisis Incidents.....	56
<b>Section 7: Assignment of Grade and Evaluations .....</b>	<b>57</b>
Gate Keeping.....	57
Evaluations.....	57
<b>Section 8: Tips fpr Success .....</b>	<b>81</b>
Students.....	81
Supervisors.....	82
<b>Manual Acknowledgement Statement &amp; Informed Consent</b> .....	<b>84</b>

---

## Overview of Practicum and Internship

The Master of Health Sciences in Clinical Rehabilitation and Counseling (MHS-CRC) program is a 60 credit hour program designed to prepare professional counselors for licensure and certification. In January 2015, the Council for Accreditation of Counseling and Related Educational Programs (CACREP) approved the dual accreditation (Clinical Mental Health Counseling—CMHC/Clinical Rehabilitation Counseling—CRC) through the CACREP/Council on Rehabilitation Education (CORE) conversion process. The program is now CACREP accredited through 2023. In accordance with Louisiana licensure requirements, CACREP standards, and department training goals, the MHS-CRC program prepares students to become professional counselors who may work with a diverse population in a variety of settings. Our graduates work in private practice, community agencies, hospitals, inpatient and outpatient facilities, schools, state and federal vocational rehabilitation agencies, and correctional facilities, as well as attend doctoral programs to further their education. Practicum and internship experiences represent the culmination of counselor education where students will apply theory, knowledge, and skills of training firsthand in fieldwork placement.

This handbook is designed to orient practicum and internship students, site supervisors, faculty supervisors, and the placement coordinators to program expectations and requirements for satisfactory completion of Practicum in Counseling (REHAB 6641), Internship I in Counseling (REHAB 6643), and Internship II in Counseling (REHAB 6645). It provides requirements, information, and forms needed to complete the necessary experiences, supervision, and paperwork. The purpose of this guide is to clarify the fieldwork benchmarks so that students may focus on creating quality experiences in their field work. Students, site supervisors, and faculty will be expected to refer to this handbook often throughout their clinical experiences for guidance and reference.

### Program Mission and Goals

The mission of the program for the Master of Health Sciences degree in Clinical Rehabilitation and Counseling is to provide professional education and clinical experience to master's level students who are committed to serving persons of all ages with various challenges related to physical, developmental, cognitive, and emotional disabilities or other life situations to achieve their academic, personal, career, social and independent-living goals in the most integrated settings possible. Professional preparation of master's level students will focus on equipping students with knowledge and skills to improve the quality of life for a diverse population. 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.

Students should be exposed to a variety of settings and professionals in order to maximize the educational benefits. *\*Students on the RSA grant are required to complete a minimum of Internship I at a state or federal based rehabilitation agency (i.e. LRS), and must complete Internship II at a state or federal rehabilitation agency, private sector rehabilitation, supported sites, or a state vendor related to rehabilitation counseling.*

# Objectives of Practicum and Internship

Practicum and internship placements provide practical on-the-job training, interaction with clients, and direct contact with professionals in the field that enable integration of didactic preparation with actual practice. As such, the fieldwork placement sequence is an extremely important component of the program that prepares students for eventual entry into the field. The professionals with whom students interact become mentors who facilitate this preparation.

## PRACTICUM OBJECTIVES

The counseling practicum is designed:

1. To provide a practical training experience, which allows the student to gain experience in individual and group interaction with clients.
2. To help the student acquire proficiency and gain confidence by integrating skills and techniques with theoretical knowledge.
3. To provide the opportunity for the student to integrate the theory and practice of counseling and to develop their own personal style.
4. To provide the opportunity for the student to work as a member of an educational or treatment team by providing counseling and case management services.
5. To provide an environment and opportunity for the student to assess strengths, weaknesses, and the practice of giving and receiving feedback.
6. Develop and support necessary self-awareness (e.g., personal issues, attitudes, and behaviors based on such factors as race/ethnicity, gender, sexual orientation, etc.)
7. Facilitate awareness of the role of culture in counseling, including knowledge, and skills for working with persons similar and different from one's own cultural identity.
8. To explore legal, ethical, and professional issues confronting the counselor trainees.
9. To provide an opportunity for students to develop and enhance case conceptualization skills.

## INTERNSHIP I & II OBJECTIVES

The counseling internship course is designed to:

1. Develop and improve basic skills in counseling, consultation, and the behavior change process.
2. Assist in the integration of theory, practice, skills, and ethical standards of counseling with one's own personal style.
3. Provide the opportunity to participate as a member of a team by planning and providing counseling and case management services.
4. Develop and support necessary self-awareness (e.g., personal issues, attitudes, and behaviors based on such factors as race/ethnicity, gender, sexual orientation, etc.)
5. Engage in opportunities for growth by evaluating one's own behavior and the effect of that behavior on others in the helping relationship.
6. Stimulate the formation of and identification with a professional role.
7. Facilitate awareness of the role of culture in counseling, including knowledge, and skills for working with persons similar and different from one's own cultural identity.
8. Enhance case conceptualization skills, including diagnosing and treatment, and the application of one's theoretical orientation to understand clients' unique presenting circumstances and formulation of a treatment plan.
9. Provide an opportunity to fully participate in-group supervision with faculty instructor and peers.

Examples of the types of agencies which can provide a suitable placement experience include the following:

Community Mental Health Centers	Community Based Not-for-Profit Agencies
Hospital Based Rehabilitation Units	Proprietary Rehabilitation Agencies
Psychiatric Treatment Centers	Rehabilitation Centers
Residential Rehabilitation Programs	Vocational Workshops
State Offices of Rehabilitation	Substance Abuse Programs
Vocational Programs	Advocacy Organizations
Schools	University Based Clinics
Private Practice	

The fieldwork placement sequence consists of a practicum and two internships carried out under the supervision of a faculty supervisor and a qualified site supervisor with appropriate licensure and credentials (i.e., LPC, LRC, NCC, CRC) in an approved setting for a minimum of 700 total hours. *Under no circumstances may the practicum and internships be taken concurrently. Students cannot fulfill fieldwork requirements at a current place of employment.* Students' schedules will be agreed upon before the beginning of the fieldwork experience and a signed contract must be on file with the site and the university before students are allowed to be on-site. Students are required to attend weekly group supervision at the university, including finals week and/or any week students are approved to be on-site. All practicum and internship students are required to purchase and maintain personal professional liability insurance that is valid throughout the duration of their fieldwork. Documentation of students' current liability insurance must be available and on file with the placement coordinators before students are allowed to be on-site. The practicum and internship classes are graded on a pass/fail basis in accordance with the course syllabus dependent upon the completion of necessary hours, students' self-evaluation, site supervisors' evaluations, faculty supervisors' evaluations, and professionalism. A written remediation plan will be introduced if deemed necessary by the faculty supervisor and/or placement coordinators.

## Course Descriptions

### REHAB 6641. PRACTICUM IN COUNSELING (3 cr.)

Students register for a 3-credit hour practicum graduate seminar. Practicum placements begin and end in one academic semester. The practicum is the first experience during which students apply counseling theory and demonstrate their counseling skills in a professional supervised setting. A minimum of 100 hours is required for practicum; therefore, students must spend a minimum of 10 hours per week on-site in a clinical rehabilitation counseling or mental health counseling community agency. If students are taking practicum in the summer, students are advised to be on-site a minimum of 13 hours per week since the semester is shorter. As part of practicum, students will obtain a minimum of 40 hours of direct client contact (counseling, testing, intake interviewing, etc.). The development of program-appropriate audio/ video recording for use in supervision or live supervision of the student's interactions with clients is required. Students must adhere to confidentiality standards when maintaining and transporting records. Each week students are on-site, they are required to receive a minimum of one hour of individual, face-to-face supervision from their site supervisor. If students miss individual supervision with the site supervisor for an unavoidable reason, they need to make up that supervision hour within that week. The site supervisor will work in consultation with the counselor education faculty supervisor on a regular schedule. Students may not be on-site for official university holidays or university emergency closure dates.

The practicum course consists of 1.5 hours of weekly group supervision at the university with peers and the faculty supervisor(s). Every effort should be made to attend regular weekly group supervision. During a semester, a student is allowed to miss one group supervision meeting. If a second group supervision is missed, the student will not be able to count hours for that week. In addition, students are required to participate in a minimum of four hours of individual supervision with the faculty supervisor to discuss student progress throughout the semester, with two of the four hours completed before the midterm date.

According to CACREP (2016), students complete the 100 hours of practicum (40 direct, 60 indirect) over a full academic term that is a minimum of 10 weeks. CACREP further specifies the duration of a student's supervised practicum experience is to extend across a full academic term to allow for the development of basic counseling skills and the integration of knowledge. Practicum is completed prior to internship. Therefore, CACREP standards do not allow for extra hours obtained during the practicum to be counted toward the 600 hours internship requirement.

**Prerequisites for Enrollment in Practicum.** Students must successfully complete 26 required hours of the 45 non-fieldwork coursework with a "C" or higher before beginning practicum. Core coursework includes REHAB 5601 Foundations in Counseling, 5612 Development Across the Life Span, 5614 Professional Practicum (minimum of 2 semesters completed), 6611 Counseling Theories and Practices, 6612 Counseling Techniques and Process, 6630 Vocational Counseling/Career Development, and 6634 Ethics in Counseling. Students must obtain placement in an appropriate site in which to complete the counseling practicum. Students must submit a completed Practicum and Internship Application as a prerequisite the semester before Practicum in Counseling enrollment. Students must have appropriate signatures and should schedule appointments with the site supervisor, faculty advisor, and placement coordinator to review the application. Evidence of current professional liability insurance and current CPR certification are required. Student eligibility to enroll in practicum will be based on review of their application by the placement coordinators, as well as advisement by the student's faculty advisor. RSA Scholars must have approval of their practicum site by the placement coordinators and the principal investigator of the RSA Grant.

**Group Experience:** Due to CACREP requirement, "in addition to the development of individual counseling skills, during *either* the practicum or internship, students must lead or co-lead a counseling or psychoeducational group" (CACREP Standards, 2016, p. 14).

#### REHAB 6643. INTERNSHIP I IN COUNSELING (6 cr.) and REHAB 6645. INTERNSHIP II IN COUNSELING. (6 cr.)

The internship courses for students are designed as a work experience for two consecutive semesters, with a minimum of 20 hours per week on-site, in a rehabilitation or clinical mental health agency. Completion of internship requires a total of no less than 300 hours per semester, minimum of 600 hours total. Students will complete as a part of the 300-hour experience on-site a minimum of 120 hours of direct services to clients (e.g., intakes, counseling, testing, and job placement). The development of program-appropriate audio/ video recording for use in supervision or live supervision of the student's interactions with clients is required. Students must adhere to confidentiality standards when maintaining and transporting records. Each week students are at their sites, they are required to receive one hour of individual, face-to-face supervision from their site supervisors. If students miss individual supervision for an unavoidable reason, they need to make up that supervision hour within that week. The site supervisor will work in consultation with the counselor education faculty supervisor on a regular schedule. Students may not be on-site for official university holidays or university emergency closure dates.

The internship course consists of 1.5 hours of weekly group supervision at the university with peers and the faculty supervisor. Every effort should be made to attend regular weekly group supervision. During a semester, a student is allowed to miss one group supervision meeting. If a second group supervision is missed, the student will not be able to count hours for that week. In addition, students are required to participate in a minimum of two hours of individual supervision with the faculty supervisor to discuss student progress throughout the semester, with one hour completed before the midterm date as stated in the course syllabus.

**Prerequisites for Enrollment in Internship I (REHAB 6643).** Students must successfully pass REHAB 6641 Practicum in Counseling. Students must submit a completed Practicum and Internship Application the semester before Internship I enrollment. Students must obtain placement in an appropriate setting in which to complete the counseling internship. Students must have appropriate signatures and should schedule appointments with site supervisor, faculty advisor, and placement coordinator to review application. Evidence of current professional liability insurance and current CPR certification are required. Student eligibility to enroll in internship will be based on review of their application by the placement coordinators, as well as advisement by the student's

faculty advisor. RSA Scholars must have approval of their practicum site by the placement coordinators and the principal investigator of the RSA Grant.

**Prerequisites for Enrollment in Internship II (REHAB 6645):** Students must have successfully passed all core coursework, passed the comprehensive examination, passed REHAB 6641 Practicum in Counseling, and passed REHAB 6643 Internship I in Counseling in order to register for Internship II. Students must submit a completed Practicum and Internship Application the semester before Internship II enrollment. Students must obtain placement in an appropriate setting in which to complete the counseling internship. Students must have appropriate signatures and should schedule appointments with site supervisor, faculty advisor, and placement coordinator to review application. Evidence of current professional liability insurance and current CPR certification are required. Student eligibility to enroll in Internship II in Counseling will be based on review of their application by the placement coordinators, as well as advisement by the student's faculty advisor. RSA Scholars must have approval of their practicum site by the placement coordinators and the principal investigator of the RSA Grant.

**Banking Hours:** Students in Internship I in Counseling, who have exceeded the minimum direct and indirect hours requirements for Internship I in Counseling may begin to bank hours towards Internship II in Counseling within the Internship I semester if the student is staying at the same site for Internship II in Counseling. Students may not be on-site for official university holidays and/or university emergency closure dates. Students may not be on-site in-between semesters when not actively enrolled as a student at LSUHSC-NO and/ or when not actively participating in group supervision at the university.

**Group Experience:** Due to CACREP requirements, "in addition to the development of individual counseling skills, during *either* the practicum or internship, students must lead or co-lead a counseling or psychoeducational group" (CACREP Standards, 2016, p. 14).

## Standards and Policies

Students are expected to conduct themselves as professionals during their field experiences both on-site and on campus. This role means that students follow the rules, regulations, and calendars of both the agency assigned to, as well as the university and the department. This includes arriving on time, not leaving early (unless specific arrangements are made), calling the agency if ill, observing the dress code, and other professional behaviors. Students' conduct must be in accordance with state and federal laws, university policies, agency policies, professional organization standards (ACA, CRCC), and the appropriate ethical standards (i.e., *ACA Code of Ethics*, *CRCC Code of Ethics*, *ASCA Code of Ethics*). Laws regarding mandated reporting and confidentiality are to be followed explicitly. If a legal or ethical issue arises, students should contact both their site supervisor and their faculty supervisors within 24-hours. Failure to conduct oneself in a professional manner, or as according to the fieldwork handbook and/or the course syllabus is grounds for a failing grade in the course, a remediation plan, and/or removal from the site.

### PRACTICUM AND INTERNSHIP APPLICATION

Students will complete a practicum and internship application for each semester the student wishes to enroll in fieldwork. *It is the student's responsibility to secure his or her own fieldwork placement.* Securing a site is defined as the student has met and interviewed with the site supervisor, the student has confirmed that both the site and the site supervisor meet the CACREP and department requirements for placement stated in this handbook, and the site supervisor has extended an offer for placement to the student. RSA Scholars must have approval by the placement coordinators and principal investigator of the RSA Grant for every semester of fieldwork. The placement coordinators and the department faculty reserve the right to contest or deny a student's placement.

A new Practicum and Internship Application is required to be completed for enrollment of each of the fieldwork courses. Applications are available in this handbook, as well as via email by the placement coordinators. The application must be submitted on or before the below deadlines to the placement coordinators by 12:00 pm. If any of these dates fall on a weekend or holiday, applications will be due by 12:00 pm on the next business day.

*Late or incomplete applications will evoke a remediation plan for the student and may delay fieldwork enrollment by a semester.*

Spring	October 15
Summer	March 15
Fall	June 15

## PROFESSIONAL LIABILITY INSURANCE

Under the LSUHSC's affiliation agreement with the clinical sites, as well as CACREP standards, students are required to carry their own personal professional liability insurance. Students must obtain coverage prior to the beginning of practicum. Several options are available to obtain liability insurance for students. The minimum policy amount coverage will pay for defense against covered claims and provide professional liability limits up to \$1,000,000 per claim, up to \$3,000,000 annual aggregate.

If students are members of the American Counseling Association (ACA), their student membership may include liability insurance to ACA student members enrolled and engaged in a master's degree counseling curriculum. Coverage is solely while performing counseling services related to graduate curriculum. This information can be obtained online at [www.counseling.org](http://www.counseling.org). Students may also utilize other insurance providers such as HPSO for coverage.

A current copy of proof of liability insurance is required for students to be enrolled in Practicum in Counseling, Internship I in Counseling, and Internship II in Counseling and will be kept on file. It is the student's responsibility to submit proof of liability insurance to the placement coordinators. Students must be covered for the entirety of the semester and if there is a pending expiration, students must submit new proof of liability insurance before the expiration date. Students who are unable to maintain current liability insurance will be withdrawn from the course by the faculty supervisor and removed from the placement site.

## CPR CERTIFICATION

Under the LSUHSC's affiliation agreement with the clinical sites, students are required to hold CPR certification for Healthcare Providers. A current copy of CPR certification is required for students to be enrolled in Practicum, Internship I, and Internship II and will be kept on file. It is the student's responsibility to submit proof CPR certification to the placement coordinators. Students must be covered for the entirety of the semester and if there is a pending expiration, students must submit new proof CPR certification before the expiration date. Students who are unable to maintain current CPR certification will be withdrawn from the course by the faculty supervisor and removed from the placement site.

## POSSIBLE REQUIREMENTS AND/OR DOCUMENTATION FOR FIELDWORK

Students are responsible for following up with their site to ensure that they have completed all necessary requirements to be cleared to be on-site and work with clients. Students should be aware that some sites require specific items prior to placement. Students may be required to submit certain documents, interviews, review/study particular terminology or guidelines before allowed to work on-site, and/or attend orientations or trainings.

The student at the interview should inquire with the site supervisor if there are any further requirements to practice at the site. The items mentioned below are at the expense of the student and/or site. Example of additional documentation includes, but is not limited to:

- Criminal Background Check
- Record of applicable immunizations
- Fingerprinting
- Negative Drug Screen

If your site requires any pre-screening documentation, students should complete site requirements before the beginning of the enrolled fieldwork semester so that the student is cleared and able to be on-site for the beginning of the semester. Students must start at their site the first week of the academic semester calendar.

## AFFILIATION AGREEMENTS

An affiliation agreement, or contract, is a required document to indicate the clinical affiliation agreement between LSUHSC School of Allied Health Professions Department of Clinical Rehabilitation and Counseling and the clinical affiliation site. The contract must be reviewed and signed by the appropriate representatives of both the clinical site and LSUHSC School of Allied Health Professions prior to the initiation of an affiliation. It is the student's responsibility to inquire about current affiliation agreements with the placement coordinators or to submit a request to the placement coordinators for a new affiliation agreement with their new site to be completed.

**Request for New Affiliation Agreement:** If there is no affiliation agreement on file, the student must submit in writing to the placement coordinators the legal name and address of the site, site phone number, site fax number, site website/email, the name, credentials, and contact information of the site supervisor, as well as the name and contact information of the authorized individual who may sign contracts for the site (administrative contact). The administrative contact typically is the president, CEO, etc. of the organization and not your site supervisor.

Once this information is received the placement coordinators will work directly with the School of Allied Health Professions and the site to develop an affiliation agreement. A draft agreement will be created and sent by the Academic Coordinator of the Department of CRC to the administrative contact for review, if accepted, the administrative contact will sign and date the contract and send back to the Academic Coordinator of the Department of CRC. Then, the Academic Coordinator of the Department of CRC will send the affiliation agreement to the Contracts department for review and to be sent to the Chancellor for signature. After the affiliation agreement is completed by all parties, the student and site supervisor will be notified and the site will receive a copy of the signed agreement. Depending on the size of the site and the chain of command, affiliation agreements may take months to complete; therefore, if students are wishing to be placed at a new site, they are highly encouraged to meet with the placement coordinators early in the semester and not wait until application deadlines.

A student may not be on-site without a proper affiliation agreement in place.

## STUDENT DRESS CODE

A student should verify the appropriate dress code with his or her site supervisor before fieldwork begins. 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, as well as adherence to your agency or site standards. The following guidelines have been approved by the LSUHSC School of Allied Health Professions Student Government Association with the approval of the Dean. Students placed in fieldwork will not wear attire with inappropriate logos, tank tops, halter tops, short pants, clothing with holes, cut-offs or "short" shorts, flip-flop sandals, jeans, or tennis shoes. Men must wear sports/dress shirts and all shirts should have collars. Women must wear dresses (not "cocktail" dresses) or pants/ skirt (not mini) and blouses. Whenever a student has direct contact with clients or is at a place where there may be client interaction, his or her appearance should be that of a professional. For more information, visit: <http://alliedhealth.lsuhs.edu/Admin/docs/StudentHandbook.pdf?version1.081116>

## PROFESSIONAL CONDUCT

Students are expected to demonstrate behavior inside and outside of the classroom that is consistent with professional standards of accountability, dedication, discipline, and respect. Counseling students accurately represent their training status to clients and correct any known misrepresentations of their qualifications by others. Students are not allowed to utilize any previously completed professional qualifications at their practicum or internship sites (i.e., ABA training, previous degrees and/or certifications).

Unprofessional conduct by students of any kind, including 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 a remediation plan or dishonorable dismissal.

For LSUHSC School of Allied Health Professionals full policies, students may reference the following sites:

- <http://alliedhealth.lsuhs.edu/AcademicAffairs/professionalconduct.pdf>
- <https://www.lsuhs.edu/administration/cm/cm-56.pdf>
- <http://alliedhealth.lsuhs.edu/Admin/studentconduct.aspx>
- <http://www.lsuhs.edu/administration/academic/policies.aspx>
- Bylaws and Regulations of the Board of Supervisors for Louisiana State University and Agricultural and Mechanical College <http://www.lsuhs.edu/administration/subscriptions/>
- LSU System Permanent Memoranda <http://www.lsuhs.edu/administration/pm/>
- LSUHSC-New Orleans Chancellor Memoranda <http://www.lsuhs.edu/administration/cm/>
- Office of Compliance Programs <http://www.lsuhs.edu/no/administration/ocp/>
- LSUHSC Calendar – PM 5: <http://www.lsuhs.edu/administration/pm/>
- SAHP Academic Calendar: <http://alliedhealth.lsuhs.edu/Admin/academicaffairs.aspx>

## CONFIDENTIALITY

This department abides by the most recent versions of the *Code of Ethics* of the American Counseling Association (ACA)/ Commission of Rehabilitation Counselors Council; the Health Information Portability Privacy Act (HIPPA), the Louisiana Board of Examiners for Licensed Professional Counselors, and the Louisiana Board of Examiners for Licensed Rehabilitation Counselors. All information shared by a client is considered confidential. Students must adhere to these standards, laws, and additional requirements specified by the practicum and internship site.

## SUPERVISION

Clinical supervision focuses on the services the student provides to clients and includes such areas as client welfare, the counseling relationship, assessment, diagnosis, clinical interventions, prognosis, appropriate referral techniques, consultation, and advocating for clients with other agencies in the community. The purpose of supervision includes:

1. Protect the welfare of clients receiving services.
2. Structure the activities of the supervisee to ensure they provide competent services.
3. Ensure that unlicensed provider functions within his or her level of competence and scope of practice.
4. Provide appropriate training for those seeking a master's degree and future licensure or certification.
5. Expand the competence of counseling students and assist with the acquisition of new skills.
7. Facilitate the counseling student's personal and professional development. Self-understanding will enhance the supervisee's effectiveness in helping others.
8. Promote accountability, that is, to provide evidence that the agency is accomplishing goals that it has contracted to achieve.

Students will actively participate in several forms of supervision including individual supervision with site and faculty supervisors, as well as group supervision through the Department. Depending on the site, students may participate in group supervision at their site. Supervisory activities including consultation, training, instruction, and evaluation. It is therefore the supervisee's responsibility to keep both the site supervisor and the faculty supervisor well informed of his or her activities. Openness with and trust in the supervisors will enhance both the experience of supervision and professional growth. The site supervisor and the faculty supervisor will be in regular communication regarding the student's progress.

## AUDIO/VIDEO RECORDING

Recording of sessions with clients for supervision purposes must be allowed by the site. While rehabilitation counseling, clinical mental health, and school settings may vary for many reasons such as clients, setting structure, availability or access to clients; students are required to gain client consent to audio or video record individual or group counseling sessions to submit to the group supervision class and to the faculty supervisor. The Permission and

Consent to Record Counseling Session is under Fieldwork Placement Materials in this manual, and should be utilized for client recording.

In special cases, live supervision and mock video recordings may be approved, but students must seek approval by the placement coordinators before placement at the site. When live supervision is approved, the placement coordinators will notify the faculty supervisor of the approval. Approved students must obtain live supervision either by their site supervisor or by the faculty supervisor onsite at their fieldwork site. The supervisor who completed the live supervision must then complete the Live Supervision Verification and Feedback Form. After live supervision, the student will then confidentiality video record a mock session based on the live feedback session. Students must utilize a fellow colleague from either their site or their group supervision class for the mock session to ensure client confidentiality. The student must submit the Live Supervision Verification and Feedback Form with their case presentation in class.

Students must use HIPPA-compliant storage solutions for recordings as recordings are confidential client records. Audio and/or video recordings should not be emailed or stored on personal devices (i.e., cell phones, non-secured jump drives).

LSUHSC Health Files—File Sharing Solution. LSUHSC has a specifically designed application to transmit secure, confidential records outside the LSUHSC network that is similar to Dropbox entitled “LSU Health FileS (File Sharing Solution).” The link to LSU Health FileS is located on the LSUHSC Information Technology website under “User Resources.”

Click on the link on webpage or enter: <https://files.lsuhs.edu/>. Students can save the link in their “Favorites” browser section to gain quick future access. Once on the webpage, enter the LSUHSC e-mail address, network password, and press login.

For basic operations, the file sharing solution works like an e-mail system and is similar to a Microsoft Outlook message. You will need to enter the e-mail address for each recipient in the “To” field. You may use the “Add CC” and/or “Add BCC” buttons to add recipient e-mail addresses. File(s) are attached using the “Add Files” button or using the “Drag and Drop” function. The system can handle large files up to 25MB.

To the right of the screen, there are additional tools available for specializing your file. Default settings to maintain when using the system include: 1) require authentication to access/download and 2) access restricted to specified recipients. In addition, students should set a message expiration date for two weeks and limit the number of downloads to 2 downloads per recipient. Finally, it is recommended that you send a copy of the message to yourself as you will need to use this system to review your videos in class.

To obtain a file from an outside source, click the request file button on the upper right portion of the screen. This will send an e-mail to the person requesting the file/s and will provide a link to the file sharing utility. The link can be used only once.

## CELL PHONES

Students should use official communication channels to communicate with their site and faculty supervisors. It is up to the discretion of the site supervisor whether or not they would like to provide their personal phone numbers to their students. Students should not use texting as a means of communication with their site supervisor, unless this communication method has been approved by the site supervisor. Any approved communication must follow HIPPA compliant and confidentiality standards. During clinical hours, students should keep their cell phones muted and not engage in active personal cell phone activity.

## Faculty and Staff Contact Information

PLACEMENT COORDINATORS:	Kellie Giorgio Camelford, Ph.D., LPC-S, NCC, NCSC 504-556-7546, kcamel@lsuhsc.edu
	Erin M. Dugan, Ph.D., LPC-S, RPT-S, CRC, NCC 504-556-3403, emart3@lsuhsc.edu
FACULTY SUPERVISORS:	Kellie Giorgio Camelford, Ph.D., LPC-S, NCC, NCSC 504-556-7546, kcamel@lsuhsc.edu
	Erin M. Dugan, Ph.D., LPC-S, RPT-S, CRC, NCC 504-556-3403, emart3@lsuhsc.edu
	Kimberly Frazier, Ph.D., LPC, LMFT, NCC 504-556-7554, kfraz1@lsuhsc.edu
	Krystal Vaughn, Ph.D., LPC-S, RPT-S, NCC 504-556-7547, kvaugh@lsuhsc.edu
RSA GRANT PRINCIPAL INVESTIGATOR:	Krystal Vaughn, Ph.D., LPC-S, RPT-S, NCC 504-556-7547, kvaugh@lsuhsc.edu
DEPARTMENT COORDINATOR:	Jeri Brumfield 504-556-3453, jbrum1@lsuhsc.edu

## Standards of the Field

**S**tudents enrolled in practicum and internship will abide by the policies and standards of the field prescribed by state and federal laws, fieldwork agency policies, university policies, department policies, course syllabi, accreditation standards, professional organization standards, and appropriate codes of ethics.

### Council for Accreditation of Counseling and Related Educational Programs (CACREP)

The Council for Accreditation of Counseling and Related Educational Programs (CACREP) approved the dual accreditation (Clinical Mental Health Counseling—CMHC/Clinical Rehabilitation Counseling—CLRC) through the CACREP/Council on Rehabilitation Education (CORE) conversion process. The 2016 CACREP standards are located at <http://www.cacrep.org/wp-content/uploads/2012/10/2016-CACREP-Standards.pdf>.

#### SECTION 3—PROFESSIONAL PRACTICE

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. The following Standards apply to entry-level programs for which accreditation is being sought.

##### ENTRY-LEVEL PROFESSIONAL PRACTICE (CACREP Standards, 2016, p. 14)

- A. Students are covered by individual professional counseling liability insurance policies while enrolled in practicum and internship.
- B. Supervision of practicum and internship students includes program-appropriate audio/video recordings and/or live supervision of students' interactions with clients.
- C. Formative and summative evaluations of the student's counseling performance and ability to integrate and apply knowledge are conducted as part of the student's practicum and internship.
- D. Students have the opportunity to become familiar with a variety of professional activities and resources, including technological resources, during their practicum and internship.
- E. In addition to the development of individual counseling skills, during *either* the practicum or internship, students must lead or co-lead a counseling or psychoeducational group.

##### PRACTICUM (CACREP Standards, 2016, p. 14)

- F. Students 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.
- G. Practicum students complete at least 40 clock hours of direct service with actual clients that contributes to the development of counseling skills.
- H. 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.

- I. Practicum students participate in an average of 1½ 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.

#### INTERNSHIP (CACREP Standards, 2016, p. 15)

- J. After successful completion of the practicum, students complete 600 clock hours of supervised counseling internship in roles and settings with clients relevant to their specialty area.
- K. Internship students complete at least 240 clock hours of direct service.
- L. Internship students have weekly interaction with supervisors that averages one hour per week of individual and/or triadic supervision throughout the internship, provided by (1) the site supervisor, (2) counselor education program faculty, or (3) a student supervisor who is under the supervision of a counselor education program faculty member.
- M. Internship students participate in an average of 1½ hours per week of group supervision on a regular schedule throughout the internship. 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.

#### SUPERVISOR QUALIFICATIONS (CACREP Standards, 2016, p. 15)

- N. Counselor education program faculty members serving as individual/triadic or group practicum/internship supervisors for students in entry-level programs have (1) relevant experience, (2) professional credentials, and (3) counseling supervision training and experience.
- O. Students serving as individual/triadic or group practicum/internship supervisors for students in entry-level programs must (1) have completed CACREP entry-level counseling degree requirements, (2) have completed or are receiving preparation in counseling supervision, and (3) be under supervision from counselor education program faculty.
- P. Site supervisors have (1) a minimum of a master's degree, preferably in counseling, or a related profession; (2) relevant certifications and/or licenses; (3) a minimum of two years of pertinent professional experience in the specialty area in which the student is enrolled; (4) knowledge of the program's expectations, requirements, and evaluation procedures for students; and (5) relevant training in counseling supervision.
- Q. Orientation, consultation, and professional development opportunities are provided by counselor education program faculty to site supervisors.
- R. Written supervision agreements define the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship. When individual/triadic practicum supervision is conducted by a site supervisor in consultation with counselor education program faculty, the supervision agreement must detail the format and frequency of consultation to monitor student learning.

#### PRACTICUM AND INTERNSHIP COURSE LOADS (CACREP Standards, 2016, p. 16)

- S. When individual/triadic supervision is provided by the counselor education program faculty or a student under supervision, practicum and internship courses should not exceed a 1:6 faculty:student ratio. This is equivalent to the teaching of one 3-semester credit hour or equivalent quarter credit hour course of a faculty member's teaching load assignment.
- T. When individual/triadic supervision is provided solely by a site supervisor, and the counselor education program faculty or student under supervision only provides group supervision, practicum and internship courses should not exceed a 1:12 faculty:student ratio. This is equivalent to the teaching of one 3-semester credit hour or equivalent quarter credit hour course of a faculty member's teaching load assignment.
- U. Group supervision of practicum and internship students should not exceed a 1:12 faculty:student ratio.
- V. When counselor education program faculty provide supervision of students providing supervision, a 1:6 faculty:student ratio should not be exceeded. This is equivalent to the teaching of one 3-semester or equivalent quarter credit hours of a faculty member's teaching load assignment.

## CLINICAL MENTAL HEALTH COUNSELING SPECIALIZATION STANDARDS (CACREP Standards, 2016, p. 23-24)

Students who are preparing to specialize as clinical mental health counselors will demonstrate the knowledge and skills necessary to address a wide variety of circumstances within the context of clinical mental health counseling.

1. Foundations
  - a. history and development of clinical mental health counseling
  - b. theories and models related to clinical mental health counseling
  - c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning
  - d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders
  - e. psychological tests and assessments specific to clinical mental health counseling
  
2. Contextual Dimensions
  - a. roles and settings of clinical mental health counselors
  - b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders
  - c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks
  - d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* and the International Classification of Diseases (ICD)
  - e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders
  - f. impact of crisis and trauma on individuals with mental health diagnoses
  - g. impact of biological and neurological mechanisms on mental health
  - h. classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation
  - i. legislation and government policy relevant to clinical mental health counseling
  - j. cultural factors relevant to clinical mental health counseling
  - k. professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling
  - l. legal and ethical considerations specific to clinical mental health counseling
  - m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling
  
3. Practice
  - a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management
  - b. techniques and interventions for prevention and treatment of a broad range of mental health issues
  - c. strategies for interfacing with the legal system regarding court-referred clients
  - d. strategies for interfacing with integrated behavioral health care professionals
  - e. strategies to advocate for persons with mental health issues

## CLINICAL REHABILITATION COUNSELING SPECIALIZATION STANDARDS (CACREP Standards, 2016, p. 25-27)

Students who are preparing to specialize as clinical rehabilitation counselors will demonstrate the professional knowledge and skills necessary to address a wide variety of circumstances within the clinical rehabilitation counseling context.

1. FOUNDATIONS
  - a. history and development of rehabilitation counseling
  - b. theories and models related to rehabilitation counseling

- c. social science theory that addresses psychosocial aspects of disability
- d. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning
- e. neurobiological and medical foundation and etiology of addiction and co-occurring disorders
- f. etiology and effects of disabilities and terminology relevant to clinical rehabilitation counseling
- g. screening and assessment instruments that are reliable and valid for individuals with disabilities

## 2. CONTEXTUAL DIMENSIONS

- a. roles and settings of rehabilitation counselors
- b. relationships between clinical rehabilitation counselors and medical and allied health professionals, including interdisciplinary treatment teams
- c. rehabilitation service delivery systems, including housing, independent living, case management, public benefits programs, educational programs, and public/proprietary vocational rehabilitation programs
- d. rehabilitation counseling services within the continuum of care, such as inpatient, outpatient, partial hospitalization and aftercare, and the rehabilitation counseling services networks
- e. operation of an emergency management system within rehabilitation agencies and in the community in relation to accommodating individuals with disabilities
- f. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD)
- g. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders
- h. impact of crisis and trauma on individuals with disabilities
- i. impact of biological and neurological mechanisms on disability
- j. effects of co-occurring disabilities on the client and family
- k. effects of discrimination, such as handicapism, ableism, and power, privilege, and oppression on clients' life and career development
- l. classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation
- m. effects of the onset, progression, and expected duration of disability on clients' holistic functioning (i.e., physical, spiritual, sexual, vocational, social, relational, and recreational)
- n. transferable skills, functional assessments, and work-related supports for achieving and maintaining meaningful employment for people with disabilities
- o. role of family, social networks, and community in the provision of services for and treatment of people with disabilities
- p. environmental, attitudinal, and individual barriers for people with disabilities
- q. assistive technology to reduce or eliminate barriers and functional limitations
- r. legislation and government policy relevant to rehabilitation counseling
- s. cultural factors relevant to rehabilitation counseling
- t. professional issues that affect rehabilitation counselors, including independent provider status, expert witness status, forensic rehabilitation, and access to and practice privileges within managed care systems
- u. record keeping, third party reimbursement, and other practice and management issues in rehabilitation counseling
- v. professional organizations, preparation standards, and credentials relevant to the practice of clinical rehabilitation counseling
- w. legal and ethical considerations specific to clinical rehabilitation counseling

## 3. PRACTICE

- a. diagnostic interviews, mental status examinations, symptom inventories, psychoeducational and personality assessments, biopsychosocial histories, assessments for treatment planning, and assessments for assistive technology needs

- b. career- and work-related assessments, including job analysis, work site modification, transferrable skills analysis, job readiness, and work hardening strategies to advocate for persons with disabilities
- c. strategies for interfacing with medical and allied health professionals, including interdisciplinary treatment teams
- d. strategies to consult with and educate employers, educators, and families regarding accessibility, Americans with Disabilities Act compliance, and accommodations

## ETHICAL STANDARDS

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, much effort has gone into developing the unified *Code of Professional Ethics for Rehabilitation Counselors* and the *American Counseling Association Code of Ethics*. Students in the MHS-CRC program are expected to be familiar with and abide by the appropriate code for their track and/or site location, as well as to incorporate an ethical decision making model into their practices.

Copies of these codes can be found at:

- <https://www.counseling.org/resources/aca-code-of-ethics.pdf>
- <http://www.crccertification.com/filebin/pdf/CRCCCodeOfEthics.pdf>

## COURSE SYLLABI

Every semester students are enrolled in fieldwork, they will receive a course syllabus for Practicum, Internship I, or Internship II. The course syllabus will outline the course description, course objectives, course structure and expectations, evaluation, required and recommended texts, CACREP standards, class activities and assignments, information related to LSUHSC policies, and a calendar including weekly group supervision meetings and deadlines for assignments. Students are instructed to follow the course syllabus and the faculty supervisor's instructions for the semester, as well as the Practicum and Internship Handbook.

## Roles and Responsibilities

**D**uring a student's fieldwork placement in practicum and internship, the student, the site supervisor, the faculty supervisor, and the placement coordinators have specific roles and responsibilities to complete. As required by CACREP, the practicum and internship experience involves several modalities of supervision. Site supervisors are seen as sharing in the teaching mission of the department and join the faculty in promoting the comprehensive development of the students as future professionals. Site supervisors and faculty supervisors will routinely consult regarding students' developmental performance throughout the semester. This section will define the roles, expectations, and responsibilities of these parties while a student is in the field providing counseling services.

### Students

It is the responsibility of students to follow established procedures for application, enrollment, and completion in practicum and internship coursework, as well as to be familiar with site policies for clinical placements and requirements. Students are primarily responsible for investigating, pursuing, and securing their practicum and internship sites because of the unique needs or interests of each student. When selecting a site, students should aim for a good fit for personal and professional needs, values, interests, program requirements, and licensure requirements. Students may elect to concentrate their experiences in clinical rehabilitation counseling, clinical mental health counseling, or both; however, *students on the RSA grant must complete at least Internship I at an approved clinical rehabilitation counseling state or federal site, as well as complete Internship II at a state or federal rehabilitation agency, private sector rehabilitation, or state vendor related to rehabilitation counseling, per the requirements in the RSA Long Term Training manual <http://alliedhealth.lsuhs.edu/crc/docs/RSAManual.pdf>*. Finally, students should select a potential site early to avoid last minute, unsatisfactory placement, and/or to account for different site requirements, such as interviews or background checks.

Students are responsible for complying with all policies, procedures, rules, regulations, and other information published by LSUHSC and their placement sites. In addition, students are expected to abide by all federal, state, and local laws. Students are expected to:

- Exhibit the highest standard of personal, academic, professional and ethical behavior.
- Treat faculty, staff, peers, clients, patients, and others with dignity and respect.
- Abide by the relevant ethical codes.
- Adhere to all of the provisions listed in this manual, department policies, and university policies.

Fieldwork allows the student the opportunity to acquire a wide range of experiences in clinical rehabilitation and clinical mental health counseling. Students should aim to use this opportunity to acquire practice or embellish their experience with varied clientele, settings, duties, and co-worker professionals. Specific student responsibilities are:

- Maintain hours throughout the semester to secure completion of requirements for the course. It is the responsibility of the student to develop a plan that takes into consideration the hours of operation and the holiday schedules of the fieldwork agency, and the semester calendar of LSUHSC, so that the required number of fieldwork hours are obtained before the end of the semester. Holidays do not count toward required hours. Students must start at their site the first week of the academic semester calendar.

- Attendance based upon the working contract is mandatory. Students should treat fieldwork experience as a professional experience. The student must request advanced permission from the faculty supervisor and site supervisor if it is anticipated that the student's schedule would deviate from the schedule agreed upon in the contract. Students should be aware of site policies from beginning of placement and not be tardy for fieldwork and should communicate with their site supervisor should an issue develop, such as illness or an emergency. If students must miss a scheduled day, students must also make arrangements to make sure their clients' needs are met.
- Students must maintain client records in accordance with their sites and ethical standards.
- Students are required to obtain informed consent from their clients and/or parent/guardian consent for minors or dependent adults. Informed consent documentation will be on file at the agency and not in the student or faculty supervisor's possession. The student will provide the faculty supervisor with a verification of release form which is signed by the student and site supervisor for recorded sessions of clients shown in individual or group supervision.
- Students must receive signed permission to audio/video tape counseling sessions and need to provide their clients with the program's informed consent document and verbally explain that they are in training and ensure clients understand what they are signing.
- Meet with site supervisor face-to-face for a minimum of 1 hour at regularly schedule supervision meetings each week. A student must receive an hour of supervision for each week the student is on-site.
- Attend group supervision with the assigned faculty supervisor on campus for at least 1.5 hours per week. If a second group supervision is missed, the student will not be able to count hours for that week.
- Meet with the faculty supervisor for a minimum of 4 hours for practicum and 2 hours for internship throughout the semester to discuss fieldwork, professionalism, and progress. It is the student's responsibility to contact the faculty supervisor to schedule these meetings; half of the hours should be completed before the mid-term deadline.
- Maintain weekly logs, and a mid-term and final clinical experience log of practicum/internship activities. Students will submit to the faculty supervisor typed and signed weekly logs at group supervision for his/her student file. The student is responsible to keep copies of weekly logs for personal records. At mid-term and final, students will submit an excel spreadsheet that captures an overview of the student's direct and indirect obtained hours.
- Attend appropriate meetings for your site (staff meetings, training sessions, family conferences, etc.).
- The student should inform the site supervisor and the faculty supervisor of any unethical behavior or expectations on the part of the site that the student observes.
- Facilitate formal evaluations by the site supervisor at mid-term and final. It is the student's responsibility to provide the site supervisor with blank evaluations and collect evaluations to submit to faculty supervisor.
- Complete and submit signed evaluation paperwork at mid-term and final by the student, site supervisor, and faculty supervisor in an envelope. Paperwork is submitted by the appropriate deadlines, per the course syllabus, to the faculty supervisor.
- A student must provide audible audio, videotapes, or live supervision evaluations to the faculty supervisor for review.
- Audio or video recordings may only be submitted through the LSUHSC-NO Secure Files Transfer Portal. Audio or video recordings should never be emailed or placed on unsecure devices due to the confidential nature of the recordings.
  - After recordings are used and the student's counseling intervention is assessed and documented, the recordings are deleted immediately, and thoroughly enough to reasonably prevent retrieval (a computer's recycle bin must be emptied). Recordings are used for the purpose of supervision only, and may be used by the student, the site supervisor, and the faculty supervisor.
  - Recordings are never:
    - recorded on cell phones due to the concerns and risks of breaching client confidentiality.
    - mailed, because even an encrypted recording is not "double-protected" in the mail as specified above.
    - stored, managed, streamed, or accessed in an insecure cloud computing or consumer grade online sharing system (e.g.: iTunes, RealPlayer, YouTube)
    - played among personnel who are not part of the supervisory process (e.g.: student counselor's roommate, significant other, classmates outside of clinical supervision, in

public, streamed online).

## CONTRACTUAL DUTIES

If the minimum 100 hours of practicum or minimum 300 hours of Internship I or II are completed before the end of the semester, students still need to adhere to their semester contracts with their sites and participate in all levels of direct and indirect hours for the remainder of the semester, including supervision. Students may not abandon their clients or their sites due to meeting the minimum hours requirement.

## Sites

An agency or school is a placement within the community or surrounding area that willingly provides the opportunity for students who are entering Practicum, Internship I, and/or Internship II to complete supervised training experiences and for whom supervision is provided.

The specific requirements of a site include:

- Designate a professionally qualified individual as the site supervisor for the student.
- Provide introductions, orientation, and training needed to orient the student to the site and/or population served. The orientation should include program components, policies and procedures, introduction to staff and their role, identification of expectations for interns, confidentiality and due process procedures, risk assessment, and the *Code of Professional Ethics for Rehabilitation Counselors* or the *ACA Code of Ethics*.
- Provide opportunities for the counseling student to engage in individual counseling, minimum of one counseling or psychoeducational group(s) to lead or co-lead, and related activities.
- Provide suitable workspace for the student.
- Ensure that either the site supervisor, or another licensed mental health clinician is on-site at all times when a student is on-site. Students may not be at their site unsupervised with clients.
- Ensure the student has the opportunity to accumulate the required number of direct and indirect hours and ensure the student has opportunities for individual and group work with clients.

## Site Supervisors

The site supervisor shares in the teaching mission of the department and is expected to be an exemplary role model and mentor for the students in their development as future professionals. Site supervisors have the responsibility of assisting supervisees through the process of gaining self-awareness, and assisting them in their growth of gaining new knowledge, skills, and abilities as a counselor. Supervisor responsibilities include professional development and evaluation of the student, as well as protecting the welfare of the student and clients at the site. A site supervisor has full responsibility for the supervised work of the supervisee, including diagnosis, treatment plan, and prescribed course of treatment. The specific requirements of site supervisors are:

- Site supervisors must hold a minimum of a master's degree from a regionally accredited university in counseling or a closely related field such as social work or psychology. Site supervisors must hold a minimum of two years post-master's pertinent professional experience in the speciality area in which the student is enrolled.
- For counseling identity purposes, site supervisors are required to be licensed (LRC, LPC, LMFT, LCSW, etc.), and/or have appropriate credentials, certifications (etc. CRC, NCC).
- Site supervisors are required to have knowledge of the LSUHSC CRC's program expectations, requirements, and evaluation procedures for students, as well as have relevant training in counseling supervision.
- Site supervisors must provide the student with a copy of their resume, which includes graduate degrees, majors, certifications, licenses held, professional work experience, supervisor experience, and professional association memberships.
- Coordinate all aspects of the student's agency experience, including an orientation of the student to the organization. Students must start at their site the first week of the academic semester calendar.

- Site supervisors work with students to create a contract that defines the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship should exist, be signed, and on file with the site supervisor, the student, and the placement coordinators. The contract must detail the format and frequency of consultation to monitor student learning.
- Provide appropriate, on-going training and practice activities for the students, with expansion of the activities and responsibilities as the student's independence within the organization develops. These activities should include a variety of professional activities in addition to direct service (e.g. record keeping, assessment instruments, supervision, provision of information and referral).
- Facilitate the opportunity for the student to develop appropriate audio/video recordings for use in supervision and/or provide live supervision of his or her interactions with clients.
- Review student's audio/video recordings to help skills development and to evaluate skills. If agency prevents recording, direct observation must be substituted with documentation of the observation submitted.
- Provide regularly, scheduled face-to-face individual supervision for a minimum of one hour per week in an environment that supports confidentiality and learning. Keep signed records of supervision that include dates and times of supervision sessions, content, and goals of supervision.
- Verify, sign, and date students' weekly logs to verify direct and indirect hours gained at the site, as well as the mid-term and final log sheets.
- Provide access to staff meetings and client staffing, when applicable.
- Provide on-going evaluations and feedback to the student and the faculty supervisor. It is essential that supervisors engage in ongoing assessment of a student's performance.
- Complete formal written evaluations of the student at mid-term and at the end of the semester. Forms will be provided by the student. Supervisors are expected to review their evaluations with students before deadlines. At mid-term, supervisors and students will be expected to evaluate students' progress and make any necessary adjustments to the goals and objectives that were developed at the start of the field experience.
- Consult regularly with the faculty supervisor regarding student progress throughout the semester through email, phone conference, and face-to-face meetings.
- If there are any problems with the student's performance, the site supervisor is expected to communicate this to the student and his or her faculty supervisor as soon as possible. The faculty, if needed, will develop a remediation plan. If a remediation plan is developed, the faculty supervisor should be provided with verbal and/or written feedback from both the student and the supervisor on a bi-weekly basis as to the student's progress.
- Attend LSUHSC Department of Clinical Rehabilitation and Counseling consultation and professional development opportunities offered throughout the semester.

## SUPERVISOR ORIENTATION AND CLINICAL TRAINING

Site supervisors are required to attend site supervisor orientation each semester they have student interns at their site as a way to stay informed on the program's expectations, requirements, and evaluation procedures for students as well as a way to gain training in counseling supervision. Furthermore, if the site supervisor does not have a designated supervisory credential, the site supervisor will be required to complete training in counseling supervision provided by the department. Knowledge of the program's expectations, requirements, and student, supervisor, and site evaluation procedures are required. The department has an online training supervision module available for review by site supervisors in need of additional support regarding clinical supervision. LSUHSC's Child and Family Clinic also offers continuing education presentations throughout the year on supervision. For additional support or resources needed regarding supervision, the site supervisor may contact the faculty supervisor or placement coordinators.

## Faculty Supervisors

To ensure high quality of university supervision, all designated faculty supervisors will be members of the department with relevant experience, professional credentials, and counseling supervision training and experience.

The faculty supervisor responsibilities are:

- To notify the placement coordinators immediately if a site change needs to take place during the semester for a particular student, assuming all other interventions have been exhausted.
- To meet regularly with students in an on-campus group supervision seminar. These seminars should meet weekly or biweekly and are designed to be interactive in small groups. The ratio of students to faculty will not exceed 12 to 1.
- To consult regularly with the site supervisor regarding student progress throughout the semester through email, phone conference, and face-to-face meetings, and to provide consultation to the site supervisor as needed.
- To visit each student's site at least once a semester and document visit through the Site Visit Evaluation Form.
- To meet individually with practicum students a minimum of 4 hours and internship students a minimum of 2 hours during the semester to discuss fieldwork experiences and progress. If needed, faculty supervisors will provide additional individual supervision to a student as needed.
- To complete formal written evaluations of the student at mid-term and final.
- To provide ongoing evaluation of student progress, including grading the student's practicum or internship experience on a pass/fail basis. The faculty supervisor will take into account the student's performance based on the student's self-evaluation, the site supervisor's evaluation, the faculty supervisor's evaluation, and general professionalism at site and in group supervision in making this determination.
- To collect student's logs on a weekly basis and review student's direct and indirect hours.
- To provide copies of the student's evaluation of the site to the placement coordinators.
- To provide written procedures and/or remediation plans for responding to students who do not demonstrate satisfactory practicum or internship knowledge and/ or clinical skills.

## Placement Coordinators

To ensure high quality of fieldwork, the placement coordinators will be members of the department with relevant experience, professional credentials, and counseling supervision training and experience. The placement coordinators responsibilities are:

- To provide an informational session for students entering into practicum or internship in the semester before enrolled in fieldwork.
- To provide guidance in the selection of sites. The ultimate responsibility for the placement coordinator is to ensure that the training site meets a student's training needs.
- To meet with site supervisors and schedule on-campus training meetings, as required by CACREP.
- To provide site supervisors with a site supervisor orientation before the beginning of each semester.
- To ensure affiliation agreements are active between the site and the university.
- To visit each newly contracted site and new site supervisor.
- To collect, review, and approve all application materials from students and contracts for practicum and internship.
- To be a resource for faculty supervisors and site supervisors on the policies and procedures related to practicum and internship including the Practicum and Internship Handbook, Department policies, University policies, CACREP standards, and appropriate ethical codes.

## RSA Principal Investigator

To ensure that RSA scholars meet the specific RSA standards and terms set forth from the RSA manual for practicum and internship, the RSA Principal Investigator will review practicum and internship placements for RSA scholars. The RSA Principal Investigator will meet with RSA scholars, as well as meet with the placement coordinators to review and approve RSA scholar fieldwork placement for REHAB 6641 Practicum in Counseling, REHAB 6643 Internship I in Counseling, and REHAB 6645 Internship II in Counseling. For RSA requirements, RSA scholars may visit: <http://alliedhealth.lsuhsu.edu/crc/docs/RSAManual.pdf>

## Communication

Various forms of communication are important to maintain throughout the student's fieldwork experiences. The student will develop strong communication skills to work with the site supervisor, placement setting, and university. In addition, the university will regularly communicate with placement sites to consult and infer on how a student is doing in his or her placement, as well as the continued viability of a site.

Students are encouraged to communicate in a professional and timely manner to their clients, supervisors, and colleagues. The majority of communication between the student and the various supervisors (site, faculty) should be in person. Students are encouraged to schedule appropriate meetings should any issues arise that need to be addressed. Telephone communication provides the method for spontaneous or emergency communication between the student, clinical, and academic facilities. In addition, email communication provides another method for communication between student, clinical, and academic facilities, yet students should be reminded to not disclose confidential information when communicating through electronic formats.

### STUDENT AND SITE SUPERVISOR

During the affiliation, it is expected that communication between the student and the site supervisor will be ongoing, mutual, and constructive.

Once a site placement has been confirmed for the student, the student is required to meet with his or her site supervisor to obtain information about work hours, dress code, and type of clinical experiences offered. The student should work with the site supervisor to create the working contract and the student's declaration of practices and procedures for the site. It is expected that students will take the responsibility to develop a good working relationship with their site supervisor. Students are required to notify the site supervisor of any absences or emergencies that result in loss of any clinical time as soon as possible and to consider potential client impact of absence.

The site supervisor has the responsibility to continuously assess student performance and recognize when the performance is at the correct level, above the expected level, or below the expected level. In the event, the site supervisor determines that there is an area for growth; an early warning system will give the student an opportunity to improve by the site supervisor directly discussing concerns with the student. If the site supervisor has specific concerns or complaints about the student, the site supervisor is requested to contact the faculty supervisor immediately.

### STUDENT AND FACULTY SUPERVISOR

During the semester, it is expected that communication between the student and the faculty supervisor will be ongoing, mutual, and constructive. The student will adhere to the course syllabus related to the methods of communication with their faculty supervisor. Students are required to notify the faculty supervisor of any absences or emergencies that result in loss of any clinical time within 24 hours. During site visits and in group class, students are expected to provide open and honest feedback about their clinical education experiences.

The faculty supervisor has the responsibility to continuously assess student performance and recognize when the performance is at the correct level, above the expected level, or below the expected level. In the event, the faculty

supervisor determines that there is an area for growth; an early warning system will give the student an opportunity to improve by the site supervisor directly discussing concerns with the student.

## CLINICAL SITE AND UNIVERSITY

Ongoing and timely communication is vital to develop a close and collaborative relationship between the academic and clinical facilities. This communication fosters the interchange of ideas and stimulates growth as each facility has unique perspective on the clinical education process, student, and academic program. Effective communication is achieved formally and informally, and may include on-site visits, phone calls, letters, emails, and meetings between the placement coordinator, the faculty supervisor, the site supervisor, and/or the student.

On-site visits are performed by the faculty supervisor to:

- Evaluate and establish the clinical facility as a clinical affiliation site.
- Discuss the progress and performance of the student.
- Discuss the problems, potential problems, or areas of opportunity for the student or to discuss facility concerns that the student may encounter. This may involve talking to the student to assess the situation and develop an appropriate plan.
- Evaluate the clinical site with an emphasis on any personnel or administrative changes that may have occurred since the previous visit.
- Gather feedback from the site supervisor on the strengths and weaknesses of the academic curriculum at LSUHSC- Department of Clinical Rehabilitation and Counseling and clinical faculty needs.

## STUDENT AND PLACEMENT COORDINATORS

Students are expected to call or email the placement coordinators if they have any concerns or problems related to the clinical affiliation, site supervisor, or faculty supervisor. If a student does not want to discuss the issues while at the clinical site, the student should contact the placement coordinators upon completion of the term so that a time can be determined to discuss the issues.

## Remediation Policies and Procedures

Program faculty maintain the right and responsibility to review at any time any circumstance or behaviors by a student that could affect the student's status in the practicum/internship experience. Faculty also maintain the right to, at any time, review competencies for individual professional practice that may impact whether a student should continue in the clinical experience. Faculty has the right and responsibly to review students whose demeanor or behaviors might threaten the welfare or well-being of a client.

### Reasons for Remediation

Common reasons for remediation plans include, but are not limited to, the following examples:

- violation of professional standards or ethical codes
- inability or unwillingness to acquire or manifest professional skills at an acceptable level of competency
- behaviors that can reasonably be predictive of poor future professional functioning, such as extensive lateness in client record-keeping or poor compliance with supervisory requirements
- interpersonal behaviors and interpersonal functioning that impairs one's professional functioning
- inability to exercise sound clinical judgment, poor interpersonal skills, and pervasive interpersonal problems.
- academic misconduct or dishonesty
- criminal conviction/felony
- failure to comply with course syllabus
- failure to comply with site, university, and/or department policies and requirements
- cognitive, affective, and/or behavior impairments that obstruct the training process and/or threaten the welfare of others
- substance abuse
- substandard scores on the mid-term or final evaluation by the site supervisor and/or the faculty supervisor as stated in the course syllabus

### Remediation Procedures

Students asked to complete a remediation plan are students who the faculty believe have the capacity to be successful in the program. Remediation occurs when students do not demonstrate satisfactory knowledge, skills, and attitudes as determined by the student, the site supervisor, the faculty supervisor, and/or the placement coordinators. The purpose of remediation is to resolve the unsatisfactory concern(s) so that a student may successfully continue their fieldwork and professional development. If a student chooses to dismiss the remediation plan offer or if a student does not complete the remediation plan as agreed upon, the department may dismiss the student from the program.

## INITIATION OF REMEDIATION PLAN

The remediation process will be implemented for practicum and internship students who experience difficulties at their sites, difficulties with site and/or faculty supervisors, and/or difficulties with professionalism. Students may be placed on a remediation plan by the faculty supervisor based on evidence of unethical, unprofessional, and/or impaired behaviors by the student.

In addition, students will be placed on a remediation plan if they receive unsatisfactory scores on their formal evaluations at mid-term or final. Unsatisfactory scores are defined as any score below a 2—At-Level (therefore receives a 0—Not evident and/or 1—Below level) in one or more areas of the ratings section or has concerning remarks in the evaluation section on the student's mid-term or final site supervisor and/or faculty supervisor evaluations.

## REMEDIATION MEETING(S) & PLAN

The faculty supervisor will call the student in for a remediation meeting. The remediation meeting will include the student and the faculty supervisor. The purpose of the meeting is to address the deficient area(s) highlighted from the supervisor's evaluation(s) or in which the site or faculty supervisor have vocalized concerns. The student may request an additional faculty member be present.

At this meeting, the faculty supervisor will inform the student of the deficiency or problem(s). Together, the student and the faculty supervisor will develop an individual remediation plan. Remediation plans are considered and designed on a case-by-case basis to meet the individual and developmental needs of the student. Remediation plans may include academic, professional, and/or personal growth opportunities. The remediation plan will include expected outcomes, how they are measured, and time lines for demonstration of expected improvements. Example required activities selected for remediation plans, but not limited to, call for students to attend CAP, attend continuing education opportunities, repeat coursework, research evidenced-based strategies and interventions, and/or take time off from the program in order to facilitate growth. The remediation plan will be explained both verbally and in writing, and should be mutually agreed upon by the student and the faculty supervisor. The remediation plan will be signed by both the student and the faculty supervisor. The faculty supervisor will give a copy of the remediation plan to the student, the placement coordinators, and if appropriate, to the site supervisor.

Once the student is on a remediation plan, the student will meet with his/her faculty supervisor on a weekly basis in order to monitor progress of the plan to promote support and success of the plan.

## REMEDIATION OUTCOMES

Remediation process outcomes include a) successful completion of remediation plan and student continues on track in program, b) failure to complete remediation plan and failure of fieldwork course, therefore student must continue remediation plan and repeat fieldwork course, c) student is placed on leave for a determined time period and/or until specific requirements are fulfilled, d) student is dismissed from the program, or e) student resigns from the program. If a student chooses not to comply with their remediation process, the student may be withdrawn from the program.

If the remediation plan is not successfully completed by the final day of the academic semester, the student will receive a failing grade in the course. In addition, if a student receives on their final evaluation any score below a 2—At-Level (therefore receives a 0—Not evident and/or 1—Below level) in one or more areas of the ratings section or has concerning remarks in the evaluation section on the student's final site supervisor and/or faculty supervisor evaluations the student will receive a failing grade in the course and a remediation plan will be developed.

## SITE DISMISSAL

Practicum/Internship sites retain the right to dismiss students from the site for any reason. In the event a student has been asked to leave their site, the student may withdraw from the course or may receive a failing grade in the course

and be placed on a remediation plan. Both the student and the site supervisor must submit separate written explanations as to why the student was “fired.”

In the event a student is released from a site because of issues with the site that are beyond the student’s control, the student, placement coordinators, and the faculty supervisor will attempt to place the student with a new site if feasible. Both the student and the site must submit in writing the details surrounding why the site released the student. A new placement setting is not guaranteed and students must be aware that being released from their site may require the student to withdraw from the course if a new site cannot be secured in a timely manner.

Any student who fails to adhere to the laws governing the counseling professional or the ethical standards of rehabilitation counseling and mental health counseling may be dismissed from the fieldwork site, may receive a failing grade for the practicum or internship course, and may be dismissed from the program.

# Practicum and Internship Placement Procedures and Materials

Students enrolling in Practicum in Counseling (REHAB 6641), Internship I in Counseling (REHAB 6643), and Internship II in Counseling (REHAB 6645) need to follow the application process and submit the appropriate documentation for successful placement and course enrollment for fieldwork. Students must submit an application for practicum and internship before beginning their fieldwork experience for each semester. Applications are available in the practicum and internship manual, as well as via email by the placement coordinators. Late or incomplete applications will evoke a remediation plan for students and may delay fieldwork enrollment by one semester.

## Placement Procedures

The following steps will assist students to ensure the proper fieldwork procedures are followed to maximize students' chances for successful enrollment in fieldwork courses.

1. Review the program's prerequisites and expectations for practicum and internship located in the department student handbook and the practicum and internship handbook.
2. Attend the mandatory informational session for practicum and internship hosted by the placement coordinators in the semester before your fieldwork enrollment. Students must attend the meeting before each fieldwork course.
3. Explore, investigate, and pursue sites with availability early in the semester. Ensure that the site supervisor and the site meet the program and CACREP requirements, and an affiliation agreement is in place. Inquire if the site requires a minimum semester-length commitment.
  - If the site has not been previously vetted and approved by the Department of Clinical Rehabilitation and Counseling, please contact the placement coordinators so that the placement coordinators may complete a site review and establish an affiliation agreement if the site and site supervisor is approved. Students must submit in writing a request for an affiliation agreement with a new site to the placement coordinators.
4. Contact site supervisors to set-up interviews based on students' interests and specialty areas.
  - If students are having difficulties finding sites, students should schedule a meeting with the placement coordinators to provide evidence of difficulties, and to discuss and develop a plan for making contact with potential sites in a timely manner.

- *RSA Scholars: students entering Practicum need to secure a rehabilitation setting; students entering Internship I need to secure a state or federal based rehabilitation agency (i.e. LRS), and must complete Internship II at a state or federal rehabilitation agency, private sector rehabilitation, or state vendor related to rehabilitation counseling as per the terms of the agreement..*
  - Students should not interview at sites if they are ineligible for placement at that site (i.e., RSA Scholar at an elementary school for internship; school for summer placement)
5. Meet with your faculty advisor to discuss your placement options and seek guidance for specializations. Obtain faculty advisor's signature on application verifying your number of completed curriculum hours. *RSA scholars additionally will meet with the principal investigator of the RSA grant for placement approval.*
  6. Complete and submit the Practicum and Internship Application Part I to the placement coordinators by the designated timelines. For fall placement, the application deadline is June 15 by noon. For spring placement, the application deadline is October 15 by noon. For summer placement, the application deadline is March 15 by noon. If the date falls on a weekend or holiday, application is due the next business day by noon. Part I submission includes:
    - Practicum and Internship Application Part I and II Checklist (student initials and date).
    - Practicum and Internship Application with original signatures and dated (student, faculty advisor).
    - Site Data Sheet with original signatures and dated (student, site supervisor).
    - Site supervisor's resume that includes educational background, licensure, and setting information.
    - Signed Practicum and Internship Handbook Signature Page.
    - Request for Affiliation Agreement (*if applicable*).
    - Live Supervision Approval Form (*if applicable*).
  7. Receive email with site supervisor cc'ed from the placement coordinators confirming placement and discussing the upcoming semester's timeframe, requirements, and expectations.
    - The placement coordinators, in consultation with the faculty, will review sites and students for fit. If the placement is not acceptable, the placement coordinators will contact the student and the student will repeat the application process with an alternate site.
  8. Schedule a meeting with the site supervisor. During this meeting, create a working contract between the student and site supervisor that includes the student's work and supervision schedule, as well as original signatures of the student and site supervisor.
  9. Complete and submit the Practicum and Internship Application Part II to the placement coordinators by the last Monday at noon of the academic calendar for the semester before placement. Part II submission includes:
    - Personalized working contract, with original signatures and dated by student and site supervisor. Signatures for placement coordinators and/or RSA principal investigator, if applicable, will be obtained by the placement coordinators.
    - Updated Declaration of Practice and Procedures with the specific information for your site.
    - Proof of purchase of professional liability insurance for the duration of practicum and internship. A copy of the declaration page of the insurance application, which shows the amount of coverage (a minimum of \$1 million to \$3 million liability limit).
    - Proof of Cardio-Pulmonary Resuscitation (CPR) certification for the duration of practicum and internship.

Students cannot be on-site or acquire hours towards fieldwork unless the Practicum and Internship Application Parts I and II are completed and approved by the placement coordinators.

## Contract Revisions

After a student has selected a practicum or internship site, significant changes to the contract and decisions regarding continuation or termination may be made only with the approval of the placement coordinators, the site supervisor, the faculty supervisor, and the RSA principal investigator, if applicable. If changes are approved and made to the working contract, a revised or addendum contract must be completed and signed with original signatures by all parties for the student to continue to accrue hours on-site.

## Dual Sites

Pending approval from the placement coordinators, students may split an internship between two sites. Students must submit an application for each site along with necessary requirements. Students are to ensure that each site supervisor is notified of the split and that the split is agreeable by all parties.

# Practicum and Internship Application Part I and II Checklist

Student Name: \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_

Semester Enrolling: \_\_\_\_\_ Course Enrolling: \_\_\_\_\_

<b>Practicum and Internship Application Part I</b>	
<i>Deadline: For Fall, June 15; for Spring, October 15; for Summer, March 15 by noon</i>	
<i>Hard copies only. Incomplete applications or late applications will initiate a remediation plan for the student.</i>	
<i>Requirement</i>	<i>Placement Coordinator Initials &amp; Date</i>
Practicum and Internship Application Part I and II Checklist	
Application Form Completed with Faculty Advisor Signature/ Date	
Site Data Sheet Completed with Site Supervisor Signature/ Date	
Site Supervisor Resume with degree(s), licensure, and certification(s) highlighted *Waived if completing fieldwork at the CFCC *Waived if continuing at the same site with the same site supervisor	
Signed Practicum and Internship Handbook Signature Page	
Request for Affiliation Agreement ( <i>if applicable</i> )	
Live Supervision Approval Form ( <i>if applicable</i> )	
<b>Practicum and Internship Application Part II</b>	
<i>Deadline: The last Monday by noon of the academic calendar for the semester before placement.</i>	
<i>Hard copies only. Incomplete applications or late applications will initiate a remediation plan for the student.</i>	
<i>Requirement</i>	<i>Placement Coordinator Initials &amp; Date</i>
Working Contract Completed with Student and Site Supervisor Signatures and Dates	
Proof of Current Professional Liability Insurance	
Proof of Current CPR Certification	
Updated Declaration of Practices and Procedures, Approved by Site	
<b>Practicum and Internship Placement Coordinators End of Semester Verifications</b>	
Affiliation Agreement On File	
For Practicum: Completed 26 hours of required coursework with a "C" or higher	
For Internship I: Passed REHAB 6641.	
For Internship II: Completed all core coursework with a "C" or higher, Passed REHAB 6643, Passed Comps.	

# Practicum and Internship Application

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

Telephone: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

LSUHSC Email: \_\_\_\_\_ Specialty Track (circle): CMHC CRC

RSA Scholar (circle): Yes No RSA Principal Investigator Signature: \_\_\_\_\_

*\*RSA Scholars entering Internship I need to secure a state or federal based rehabilitation agency (i.e. LRS), and must complete Internship II at a state or federal rehabilitation agency, private sector rehabilitation, or state vendor related to rehabilitation.*

Course (circle): Practicum, Internship I, Internship II Semester Enrolling & Year: \_\_\_\_\_

Secured Site: \_\_\_\_\_

Site Supervisor Name with Credentials: \_\_\_\_\_

**List semester, year, and grade for completion or plan of completion of prerequisite courses:**

		Semester	Year	Grade
REHAB 5601	Foundations in Counseling	_____	_____	_____
REHAB 6634	Ethics in Counseling	_____	_____	_____
REHAB 5612	Development Across the Life Span	_____	_____	_____
REHAB 6611	Counseling Theories and Practices	_____	_____	_____
REHAB 6630	Vocational Counseling/ Career Development	_____	_____	_____
REHAB 6612	Counseling Techniques and Process	_____	_____	_____
REHAB 5614	Professional Practicum (Fall, Spring, Summer)	_____	_____	_____
REHAB 5650/5602	Crisis Counseling OR Medical Aspects of Counseling	_____	_____	_____
REHAB 6641	Practicum in Counseling Name of Site _____	_____	_____	_____
REHAB 6643	Internship I in Counseling Name of Site _____	_____	_____	_____

Total Hours Completed and In Progress in the Program: \_\_\_\_\_

**Select one and complete the following:**

\_\_\_\_\_ I have met with and discussed the following REHAB 6641/ 6643/ 6645 (circle one) placement sites, with my faculty advisor:

Secured Site: \_\_\_\_\_

Additional Site: \_\_\_\_\_

Additional Site: \_\_\_\_\_

\_\_\_\_\_ I have met with and discussed with my faculty supervisor applying for 6643 or 6645 and plan to continue at the same site from previous semester with the same site supervisor.

My submitted application and signature confirms that I have secured a placement for fieldwork for the upcoming semester. I further understand that should I fail to meet any of the prerequisites for fieldwork or the program does not approve of the site, I will need to resubmit a new application to gain acceptance, otherwise I will not be enrolled or I will be withdrawn from upcoming fieldwork course(s).

\_\_\_\_\_  
Student's Signature and Date

\_\_\_\_\_  
Faculty Advisor's Signature and Date

# Site Data Sheet

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

**Legal Site Name:** \_\_\_\_\_

**Site Address:** \_\_\_\_\_  
\_\_\_\_\_

**Site Office Number:** \_\_\_\_\_

**Site Fax Number:** \_\_\_\_\_

**Description of site and clients:** \_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

<b>With client permission, what type of taping is allowed?</b>	Audio	Video	None
<b>Does this site require a one, two, or three semester commitment?</b>	One	Two	Three
<b>Types of counseling provided (circle all that apply):</b>	Child/Play	Adolescent	Couples
	Individual	Vocational	Family
	Group	Rehabilitation	Other:

**Site Supervisor Name:** \_\_\_\_\_

**Site Supervisor Credentials:** \_\_\_\_\_

**Site Supervisor Years Employed at Site:** \_\_\_\_\_

**Site Supervisor Years of Experience:** \_\_\_\_\_

**Site Supervisor Phone Number:** \_\_\_\_\_

**Site Supervisor Email:** \_\_\_\_\_

**As a site supervisor, I confirm that I meet the following criteria and agree to:**

- Master's degree in counseling or related field with a minimum of 2 years post-masters work completed.
- License or certification in a clinical mental health or rehabilitation counseling field (*CRC, NCC, LPC, LRC*).
- Attend site supervisor orientation and training provided by LSUHSC.
- Ensure that the counseling student intern will have a sufficient caseload to meet the semester direct hour requirement, as well as individual and group counseling requirements. (*Practicum: 40 direct, Internship: 120 direct, minimum of 1 counseling or psychoeducational group*)
- Provide a minimum of one hour of individual, face-to-face supervision weekly.
- Allow audio/video recording of clients to be used in individual and group supervision. \*If recording not allowed, I will provide live supervision to the student and complete the live supervision verification and feedback form if approved by the placement coordinators.

\_\_\_\_\_  
**Site Supervisor Signature & Date**

# Live Supervision Approval Form

Occasionally, the placement coordinators will allow students to be placed at a site that does not allow audio/video recording so that the student can gain experience with speciality populations. In the case when audio/video recording is not allowed, the site supervisor must agree to participate in live supervision with the counseling student throughout the semester.

Live supervision allows counseling students to receive guidance and oversight in a clinical setting with clients. While the counseling student conducts a session with a client, the site supervisor will either be in the room with the counseling student-client and/or the site supervisor will observe from another room (with client's consent). The site supervisor will observe and, if needed, intervene by calling in with suggestions for keeping the session on track and achieving session goals, as well as advancing therapist development. Upon completion of the live session, the site supervisor will complete the Live Supervision Verification and Feedback Form to discuss with the counseling student. The student will submit the Live Supervision Verification and Feedback Form to the faculty supervisor, and is encouraged to maintain a copy of the form.

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

Secured Site: \_\_\_\_\_

Semester: \_\_\_\_\_

Reason for Inability to Audio/Video Record: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I acknowledge that I am required to obtain live supervision from my site supervisor, to receive feedback from site supervisor based on the Live Supervision Verification and Feedback Form, to submit the Live Supervision Verification and Feedback Form to my faculty supervisor, and to create a confidential mock video recording based on the client session for my case presentation assignment in the course.

\_\_\_\_\_  
Student Signature & Date

I will provide live supervision to the student and complete the Live Supervision Verification and Feedback Form since the student is not allowed to audio/video record at our site.

\_\_\_\_\_  
Site Supervisor Signature & Date

I have approved the above student to utilize live supervision and mock videos for the semester and site stated above.

\_\_\_\_\_  
Practicum and Internship Coordinators Signature & Date

*\*Based on submission and approval of this form, the practicum and internship coordinators will notify the faculty supervisor of the student's ability to utilize a mock video in the approved semester course.*

# Sample Working Contract

*\*Contracts should be individualized to take advantage of the agency's specific goals, programs, and opportunities and to reflect the student's interests, needs, and career intentions. The statements listed in the General Requirements and Professional Work Behaviors sections are requirements of the LSUHSC Department of Clinical Rehabilitation and Counseling and shall be included in every student contract.*

## Practicum / Internship Contract

**Student Intern:** Jane Doe

**Site Supervisor:** Irby Hornsby, MHS, CRC  
Tel: (504) 555-6901 Fax: (504) 555-5706  
ihornsby@lrs.dss.state.org

**Site:** Louisiana Rehabilitation Services  
3101 W. Napoleon Ave.  
Suite 150  
New Orleans, La. 70015

**Duration:** Date to Date

**Work Schedule:** Mondays 8 a.m.-12 p.m.  
Wednesdays 8 a.m.-5 p.m.

**Site Supervision Schedule:** Mondays 9 a.m.-10 a.m.

## GENERAL REQUIREMENTS

- My Clinical Rehabilitation Counseling (Clinical Mental Health Counseling) Practicum (Internship) will average a minimum of 13 (20) hours per week, for not less than 100 (300) hours total. It will run for the full semester, including finals week. Practicum hours cannot be completed in less than 10 weeks. Internship cannot begin until Practicum is successfully completed.
- I will receive a minimum of 40 (120) hours of direct client contact that contributes to the development of rehabilitation counseling/ clinical mental health counseling skills and that will be facilitated by my site supervisor to insure fulfillment of this requirement.
- Practicum (Internship) will consist of direct services to clients. These services will include the following: individual and group counseling, intake interviewing, case management, client assessment/evaluation, client advocacy, client assistance, documentation, other related services, and attendance at the various agency-specific meetings conducted throughout the semester.
- The site supervisor will provide a minimum of 1 hour per week of individual face-to-face supervision. A standing weekly appointment will be made with the site supervisor to insure consistency in supervision.
- 100 (300) hours will be completed by [date]: \_\_\_\_\_.

## PROFESSIONAL WORK BEHAVIORS

- I will conduct myself in a professional manner at all times.
- I will adhere to the CRC Code of Professional Ethics for Rehabilitation Counselors (2017) and

ACA Code of Ethics (2014) at all times.

- I will follow all policies and procedures of the agency, university, school, and department.
- I will carry out all duties to the best of my ability.
- I will contact my faculty supervisor and/or placement coordinators immediately if I feel I am unable to fulfill my commitment as stated in this contract.

JOB DESCRIPTION AND EXPECTED ACTIVITIES (SPECIFIC TO STUDENT AND SITE, HAVE SITE SUPERVISOR REVIEW)

STUDENT GOALS FOR FIELDWORK (SPECIFIC TO STUDENT AND SITE, HAVE SITE SUPERVISOR REVIEW)

### STUDENT RESPONSIBILITIES

Students are responsible for complying with all policies, procedures, rules, regulations, and other information published by LSUHSC and their placement sites. In addition, students are expected to abide by all federal, state, and local laws. Students are expected to:

- Exhibit the highest standard of personal, academic, professional and ethical behavior.
- Treat faculty, staff, peers, clients, patients, and others with dignity and respect.
- Abide by the relevant ethical codes.
- Adhere to all of the provisions listed in this manual, department policies, and university policies.

Fieldwork allows the student the opportunity to acquire a wide range of experiences in clinical rehabilitation and clinical mental health counseling. Students should aim to use this opportunity to acquire practice or embellish their experience with varied clientele, settings, duties, and co-worker professionals. Specific student responsibilities are:

- Maintain hours throughout the semester to secure completion of requirements for the course. It is the responsibility of the student to develop a plan that takes into consideration the hours of operation and the holiday schedules of the fieldwork agency, and the semester calendar of LSUHSC, so that the required number of fieldwork hours are obtained before the end of the semester. Holidays do not count toward required hours. Students must start at their site the first week of the academic semester calendar.
- Attendance based upon the working contract is mandatory. Students should treat fieldwork experience as a professional experience. The student must request advanced permission from the faculty supervisor and site supervisor if it is anticipated that the student's schedule would deviate from the schedule agreed upon in the contract. Students should be aware of site policies from beginning of placement and not be tardy for fieldwork and should communicate with their site supervisor should an issue develop, such as illness or an emergency. If students must miss a scheduled day, students must also make arrangements to make sure their clients' needs are met.
- Students must maintain client records in accordance with their sites and ethical standards.
- Students are required to obtain informed consent from their clients and/or parent/guardian consent for minors or dependent adults. Informed consent documentation will be on file at the agency and not in the student or faculty supervisor's possession. The student will provide the faculty supervisor with a verification of release form which is signed by the student and site supervisor for recorded sessions of clients shown in individual or group supervision.
- Students must receive signed permission to audio/video tape counseling sessions and need to provide their clients with the program's informed consent document and verbally explain that they are in training and ensure clients understand what they are signing.
- Meet with site supervisor face-to-face for a minimum of 1 hour at regularly schedule supervision meetings each week. A student must receive an hour of supervision for each week the student is on-site.
- Attend group supervision with the assigned faculty supervisor on campus for at least 1.5 hours per week. If a second group supervision is missed, the student will not be able to count hours for that week.
- Meet with the faculty supervisor for a minimum of 4 hours for practicum and 2 hours for internship throughout the semester to discuss fieldwork, professionalism, and progress. It is the student's responsibility

to contact the faculty supervisor to schedule these meetings; half of the hours should be completed before the mid-term deadline.

- Maintain weekly logs, and a mid-term and final clinical experience log of practicum/internship activities. Students will submit to the faculty supervisor typed and signed weekly logs at group supervision for his/her student file. The student is responsible to keep copies of weekly logs for personal records. At mid-term and final, students will submit an excel spreadsheet that captures an overview of the student's direct and indirect obtained hours.
- Attend appropriate meetings for your site (staff meetings, training sessions, family conferences, etc.).
- The student should inform the site supervisor and the faculty supervisor of any unethical behavior or expectations on the part of the site that the student observes.
- Facilitate formal evaluations by the site supervisor at mid-term and final. It is the student's responsibility to provide the site supervisor with blank evaluations and collect evaluations to submit to faculty supervisor.
- Complete and submit signed evaluation paperwork at mid-term and final by the student, site supervisor, and faculty supervisor in an envelope. Paperwork is submitted by the appropriate deadlines, per the course syllabus, to the faculty supervisor.
- A student must provide audible audio, videotapes, or live supervision evaluations to the faculty supervisor for review.
- Audio or video recordings may only be submitted through the LSUHSC-NO Secure Files Transfer Portal. Audio or video recordings should never be emailed or placed on unsecure devices due to the confidential nature of the recordings.
  - After recordings are used and the student's counseling intervention is assessed and documented, the recordings are deleted immediately, and thoroughly enough to reasonably prevent retrieval (a computer's recycle bin must be emptied). Recordings are used for the purpose of supervision only, and may be used by the student, the site supervisor, and the faculty supervisor.
  - Recordings are never:
    - recorded on cell phones due to the concerns and risks of breaching client confidentiality.
    - mailed, because even an encrypted recording is not "double-protected" in the mail as specified above.
    - stored, managed, streamed, or accessed in an insecure cloud computing or consumer grade online sharing system (e.g.: iTunes, RealPlayer, YouTube)
    - played among personnel who are not part of the supervisory process (e.g.: student counselor's roommate, significant other, classmates outside of clinical supervision, in public, streamed online).

## CONTRACTUAL DUTIES

If the minimum 100 hours of practicum or minimum 300 hours of Internship I or II are completed before the end of the semester, students still need to adhere to their semester contracts with their sites and participate in all levels of direct and indirect hours for the remainder of the semester, including supervision. Students may not abandon their clients or their sites due to meeting the minimum hours requirement.

## SITE RESPONSIBILITIES

An agency or school is a placement within the community or surrounding area that willingly provides the opportunity for students who are entering Practicum, Internship I, and/or Internship II to complete supervised training experiences and for whom supervision is provided. The specific requirements of a site include:

- Designate a professionally qualified individual as the site supervisor for the student.
- Provide introductions, orientation, and training needed to orient the student to the site and/or population served. The orientation should include program components, policies and procedures, introduction to staff and their role, identification of expectations for interns, confidentiality and due process procedures, risk assessment, and the *Code of Professional Ethics for Rehabilitation Counselors* or the *ACA Code of Ethics*.
- Provide opportunities for the counseling student to engage in individual counseling, minimum of one counseling or psychoeducational group(s) to lead or co-lead, and related activities.
- Provide suitable workspace for the student.

- Ensure that either the site supervisor, or another licensed mental health clinician is on-site at all times when a student is on-site. Students may not be at their site unsupervised with clients.
- Ensure the student has the opportunity to accumulate the required number of direct and indirect hours and ensure the student has opportunities for individual and group work with clients.

## SITE SUPERVISOR RESPONSIBILITIES

The site supervisor shares in the teaching mission of the department and is expected to be an exemplary role model and mentor for the students in their development as future professionals. Site supervisors have the responsibility of assisting supervisees through the process of gaining self-awareness, and assisting them in their growth of gaining new knowledge, skills, and abilities as a counselor. Supervisor responsibilities include professional development and evaluation of the student, as well as protecting the welfare of the student and clients at the site. A site supervisor has full responsibility for the supervised work of the supervisee, including diagnosis, treatment plan, and prescribed course of treatment. The specific requirements of site supervisors are:

- Site supervisors must hold a minimum of a master's degree from a regionally accredited university in counseling or a closely related field such as social work or psychology. Site supervisors must hold a minimum of two years post-master's pertinent professional experience in the speciality area in which the student is enrolled.
- For counseling identity purposes, site supervisors are required to be licensed (LRC, LPC, LMFT, LCSW, etc.), and/or have appropriate credentials, certifications (etc. CRC, NCC).
- Site supervisors are required to have knowledge of the LSUHSC CRC's program expectations, requirements, and evaluation procedures for students, as well as have relevant training in counseling supervision.
- Site supervisors must provide the student with a copy of their resume, which includes graduate degrees, majors, certifications, licenses held, professional work experience, supervisor experience, and professional association memberships.
- Coordinate all aspects of the student's agency experience, including an orientation of the student to the organization. Students must start at their site the first week of the academic semester calendar.
- Site supervisors work with students to create a contract that defines the roles and responsibilities of the faculty supervisor, site supervisor, and student during practicum and internship should exist, be signed, and on file with the site supervisor, the student, and the placement coordinators. The contract must detail the format and frequency of consultation to monitor student learning.
- Provide appropriate, on-going training and practice activities for the students, with expansion of the activities and responsibilities as the student's independence within the organization develops. These activities should include a variety of professional activities in addition to direct service (e.g. record keeping, assessment instruments, supervision, provision of information and referral).
- Facilitate the opportunity for the student to develop appropriate audio/video recordings for use in supervision and/or provide live supervision of his or her interactions with clients.
- Review student's audio/video recordings to help skills development and to evaluate skills. If agency prevents recording, direct observation must be substituted with documentation of the observation submitted.
- Provide regularly, scheduled face-to-face individual supervision for a minimum of one hour per week in an environment that supports confidentiality and learning. Keep signed records of supervision that include dates and times of supervision sessions, content, and goals of supervision.
- Verify, sign, and date students' weekly logs to verify direct and indirect hours gained at the site, as well as the mid-term and final log sheets.
- Provide access to staff meetings and client staffing, when applicable.
- Provide on-going evaluations and feedback to the student and the faculty supervisor. It is essential that supervisors engage in ongoing assessment of a student's performance.
- Complete formal written evaluations of the student at mid-term and at the end of the semester. Forms will be provided by the student. Supervisors are expected to review their evaluations with students before deadlines. At mid-term, supervisors and students will be expected to evaluate students' progress and make any necessary adjustments to the goals and objectives that were developed at the start of the field experience.

- Consult regularly with the faculty supervisor regarding student progress throughout the semester through email, phone conference, and face-to-face meetings.
- If there are any problems with the student's performance, the site supervisor is expected to communicate this to the student and his or her faculty supervisor as soon as possible. The faculty, if needed, will develop a remediation plan. If a remediation plan is developed, the faculty supervisor should be provided with verbal and/or written feedback from both the student and the supervisor on a bi-weekly basis as to the student's progress.
- Attend LSUHSC Department of Clinical Rehabilitation and Counseling consultation and professional development opportunities offered throughout the semester.

## FACULTY SUPERVISOR RESPONSIBILITIES

To ensure high quality of university supervision, all designated faculty supervisors will be members of the department with relevant experience, professional credentials, and counseling supervision training and experience. The faculty supervisor responsibilities are:

- To notify the placement coordinators immediately if a site change needs to take place during the semester for a particular student, assuming all other interventions have been exhausted.
- To meet regularly with students in an on-campus group supervision seminar. These seminars should meet weekly or biweekly and are designed to be interactive in small groups. The ratio of students to faculty will not exceed 12 to 1.
- To consult regularly with the site supervisor regarding student progress throughout the semester through email, phone conference, and face-to-face meetings, and to provide consultation to the site supervisor as needed.
- To visit each student's site at least once a semester and document visit through the Site Visit Evaluation Form.
- To meet individually with practicum students a minimum of 4 hours and internship students a minimum of 2 hours during the semester to discuss fieldwork experiences and progress. If needed, faculty supervisors will provide additional individual supervision to a student as needed.
- To complete formal written evaluations of the student at mid-term and final.
- To provide ongoing evaluation of student progress, including grading the student's practicum or internship experience on a pass/fail basis. The faculty supervisor will take into account the student's performance based on the student's self-evaluation, the site supervisor's evaluation, the faculty supervisor's evaluation, and general professionalism at site and in group supervision in making this determination.
- To collect student's logs on a weekly basis and review student's direct and indirect hours.
- To provide copies of the student's evaluation of the site to the placement coordinators.
- To provide written procedures and/or remediation plans for responding to students who do not demonstrate satisfactory practicum or internship knowledge and/ or clinical skills.

## COMMUNICATION PLAN (STUDENTS WILL OUTLINE HOW THEY WILL COMMUNICATE WITH THEIR SITE SUPERVISOR, FACULTY SUPERVISOR, AND HOW THE SITE AND FACULTY SUPERVISOR WILL COMMUNICATE)

The majority of communication between the student and the various supervisors (site, faculty) should be in person. Students are encouraged to schedule appropriate meetings should any issues arise that need to be addressed. Telephone communication provides the method for spontaneous or emergency communication between the student, clinical, and academic facilities. In addition, email communication provides another method for communication between student, clinical, and academic facilities, yet students should be reminded to not disclose confidential information when communicating through electronic formats.

Ongoing and timely communication is vital to develop a close and collaborative relationship between the academic and clinical facilities. Effective communication is achieved formally and informally, and may include on-site visits, phone calls, letters, emails, and meetings between the placement coordinator, the faculty supervisor, the site supervisor, and/or the student.

On-site visits are performed by the faculty supervisor to:

- Evaluate and establish the clinical facility as a clinical affiliation site.
- Discuss the progress and performance of the student.
- Discuss the problems, potential problems, or areas of opportunity for the student or to discuss facility concerns that the student may encounter. This may involve talking to the student to assess the situation and develop an appropriate plan.
- Evaluate the clinical site with an emphasis on any personnel or administrative changes that may have occurred since the previous visit.
- Gather feedback from the site supervisor on the strengths and weaknesses of the academic curriculum at LSUHSC- Department of Clinical Rehabilitation and Counseling and clinical faculty needs.

### TERMS OF CONTRACT

This contract has been discussed and approved by all parties. This contract will be reviewed during supervision with my site supervisor and faculty supervisor to determine progress towards accomplishment of activities, expectations, and goals.

We agree, to the best of our ability, to uphold the directives specified in this working contract and to conduct our professional behavior according to the ethical principles of our profession.

\_\_\_\_\_  
Jane Doe  
Student Intern  
Signature & Date

\_\_\_\_\_  
Irby Hornsby, MHS, CRC  
Site Supervisor  
Signature & Date

\_\_\_\_\_  
Kellie Camelford, Ph.D., LPC-S  
Placement Coordinator  
Signature & Date

*Additional Signatures (Add only if applicable to your status/ placement):*

\_\_\_\_\_  
Krystal Vaughn, Ph.D., LPC-S  
RSA Principal Investigator  
Signature & Date  
*(If RSA Scholar)*

\_\_\_\_\_  
Erin Dugan, Ph.D. LPC-S, CRC  
Rehabilitation Placement  
Coordinator  
Signature & Date  
*(If at a rehab site)*

This contract is effective from \_\_\_\_\_ *(First day of academic semester)* to \_\_\_\_\_ *(Last day of academic semester)*. If the contract is revised, a revised contract must be approved by all parties, signed, and copies submitted to all parties.

# Declaration of Practices and Procedures Sample

Student First Name Last Name, Counseling Student Intern  
Name of Fieldwork Setting  
123 Practice Setting Address  
Address 2  
Work Phone Number of Practice Setting

**Qualifications:** I will earn a Masters of Health Sciences degree in Clinical Rehabilitation and Counseling from Louisiana State University Health Sciences Center—New Orleans in 20\*\*. I am a PRACTICUM/INTERNSHIP counseling student under the site supervision of SITE SUPERVISOR’S NAME, CREDENTIALS, as well as I am under faculty supervision of FACULTY SUPERVISOR’S NAME, CREDENTIALS. SITE SUPERVISOR NAME may be contacted at PHONE NUMBER/EMAIL ADDRESS, and FACULTY SUPERVISOR NAME may be contacted at PHONE NUMBER/EMAIL ADDRESS.

**Counseling Relationship:** I see counseling as a process in which you the client, and I, the counseling student intern having come to understand and trust one another, work as a team to explore and define present problem situations, develop future goals for an improved life and work in a systematic fashion toward realizing those goals.

**Areas of Focus:** I am currently on the TRACK (CLINICAL REHABILITATION COUNSELING, CLINICAL MENTAL HEALTH COUNSELING) at LSUHSC—New Orleans. SITE SPECIFIC INFORMATION AS STATED BY SITE SUPERVISOR HERE.

**Fees and Office Procedures:** SITE SPECIFIC INFORMATION AS STATED BY SITE SUPERVISOR HERE. (Fees, scheduling, cancellations, etc.)

**Services Offered and Clients Served:** ADD YOUR THEORETICAL ORIENTATION WITH DESCRIPTION HERE. ADD THE COUNSELING FORMATS (INDIVIDUAL, COUPLES, GROUP, ETC.) YOU WILL COMPLETE AS WELL AS ANY CLIENT DEMOGRAPHIC INFORMATION (AGES, BACKGROUNDS, ETC.)

**Code of Conduct:** As a a counseling student intern at LSUHSC—New Orleans, I am required to adhere to university and department policies of conduct, as well as adhere to the code of conduct at my site and the Code of Conduct outlined by the LPC Board of Examiners. Should you wish to file a disciplinary complaint regarding my practice as a counseling student intern, you may contact my SITE SUPERVISOR or my FACULTY SUPERVISOR.

In addition, I follow the appropriate code(s) of ethics for my specific professional organizations which I belong to including: LIST PROFESSIONAL MEMBERSHIPS (ACA, ASCA, CRCC, ETC.)

**Confidentiality:** Material revealed in counseling will remain strictly confidential except for material shared with my site supervisor, faculty supervisor, fieldwork group class, and under the following circumstances, in accordance with State law:

1. The client signs a written release of information indicating informed consent of such release.
2. The client expresses intent to harm him/herself or someone else.
3. There is reasonable suspicion of abuse/neglect against a minor child, elderly person (60 or older), or dependent adult
4. A court order is received directing the disclosure of information.

In the event of marriage or family counseling, material obtained from an adult client individually may be shared with the client’s spouse or other family members with the client’s written permission. Any material obtained from a minor client may be shared with the client’s parent or guardian.

**Privileged Communication:** It is my policy to assert privileged communication on behalf of the client and the right to consult with the client if at all possible, except during an emergency, before mandated disclosure. I will endeavor to apprise clients of all mandated disclosures as conceivable.



# Course Syllabus Guide

Faculty supervisors are required to follow the LSUHSC—New Orleans syllabus guidelines. In addition, faculty supervisors should address the following components in the course syllabus:

- Grading Rubric for Pass/Fall in Course
- Scheduling and/or Case Presentation Assignments
- Minimum of 2 Case Presentation & Verbatim
- Case Presentation/ Tape Feedback Form for Peer Review

## Clinical Experiences Documentation

Students must use the approved forms for logging direct, indirect, and supervision hours. Logs must be typed, not handwritten, with no whiteout or crossed off marks. Be sure to keep good logs of hours and have the appropriate original signatures from supervisors (photocopy or scanned logs will not be accepted). Students should always keep copies of their logs for reference.

Students will turn in weekly logs, a mid-term clinical experience log, and an end-of-semester clinical experience log. Due dates are provided on the course syllabus. Instructions for log completion and summaries of code descriptions are provided. The faculty supervisor will provide additional clarification, as needed.

### SPECIFICATION OF HOURS

All activities are broken down into three areas: 1) direct services benefitting clients, 2) services indirectly benefitting the client, and 3) supervision. The following is a description of each of the areas. The list is meant to help clarify coding for the student on the clinical experience log. The lists are meant in no way to be an exhaustive description of activities.

#### **A Codes: Direct Hours**

CACREP defined direct service as “the supervised use of counseling, consultation, or related professional skills with actual clients (can be individuals, couples, families, or groups) for the purpose of fostering social, cognitive, behavioral, and/or affective change. These activities must involve interaction with others and may include: (1) assessment, (2) counseling, (3) psycho-educational activities, and (4) consultation. The following would not be considered direct service: (1) observing others providing counseling or related services, (2) record keeping, (3) administrative duties, (4) clinical and/or administrative supervision.” *\*In addition to individual counseling skills, CACREP requires that during either the practicum or internship, students must lead or co-lead a counseling or psychoeducational group.*

##### **A.1 – Intake/Interview**

##### **A.2 – Individual Counseling**

##### **A.3 – Group Counseling**

##### **A.4 – Testing/Assessment**

##### **A.5 – Family or Couples Counseling**

##### **A.6 – Psycho-educational Lessons (School Counseling)**

**A.7 – Other (Specify).** This code is to be used by the counselor when a direct service is provided that is not captured by the above codes. Phone counseling should not be occurring unless the student is at an approved site that requires phone counseling, such as a suicide hotline. Phone contact is limited to 10% of required direct hours. Practicum students may not clock more than 4 direct hours from phone contact and Internship students no more than 12 hours.

## **B Codes: Indirect Hours**

Indirect client hours include any other hours spent at your site including: staffing, consultation, processing, maintaining case notes, research, preparation for clients, and observations. You may collect indirect hours doing research outside of your site; however, these hours must be in excess of the minimum 10 hour weekly on-site requirement for practicum and the minimum 20 hour weekly on-site requirement for internship. You may not collect indirect hours at home instead of going to your site.

### **B.1 – Research**

### **B.2 – Correspondence/Report/Case Notes**

### **B.3 – Staffing/Meeting**

### **B.4 – Observation of Clinician or Service**

### **B.5 – In-service Training (Site)**

### **B.6 – Conference/Workshop**

### **B.7 – Case Consultation**

### **B.8 – Case Management**

### **B.9 – Case Preparation**

**B.10 – Other (Specify).** This code is used to include any other training or educational activities not captured in the above codes.

## **C Codes: Indirect Hours—Supervision**

This area includes the various types of supervision that students receive. Students are required to receive one hour of individual supervision with their site supervisor each week, four hours (two hours) of individual supervision with their faculty supervisor each semester, and an hour and a half of university group supervision each week. Group supervision at a site is optional as some sites may or may not offer this type of supervision.

### **C.1 – Site—Individual Supervision**

### **C.2 – Faculty—Individual Supervision**

### **C.3 – Site—Group Supervision**

### **C.4 – University Group Supervision.**

## WEEKLY CLINICAL LOGS INSTRUCTIONS

Logs are to be completed on a daily basis. On a weekly basis you will have your site supervisor sign off on the logs. Then they are to be submitted on a weekly basis to your faculty supervisor for final signatures. Before requesting the faculty supervisor's signature, the log must be complete with all totals typed and entered and signatures/dates of the student and the on-site supervisor.

1. The top of each log requires you to fill in a response to "Week of." This is used to help all parties involved to track more easily missing sheets, dates, weekends, holiday, etc. Please note that due to the differing nature of each site and each student's recording style, the amount of information or days that fit on one page will vary.
2. Log forms have a page number \_\_\_\_\_ at the top of each page. This is another way to help keep logs in order at all times and provides an easy way to indicate that a full copied set is turned in at the end of the semester.
3. When recording time, it is required that you record both the time of day, and in parentheses next to the activity code, the number of hours the activity took. This will 1) make it easier to calculate daily totals and 2) also help you track your time throughout the day. So, for example, if you conducted an intake from 9:30 am – 10:30 am, you would record this time and indicate that it is A.1 (1) (See sample log).
4. Log direct and indirect hours in 15 minute increments: .25 (15 minutes), .50 (30 minutes), .75 (45 minutes), 1 (60 minutes), etc.

5. The comment section is best kept brief while at the same time including enough detail to jog your memory. So again, if you were conducting an individual counseling session, your comment might note that you spent the hour discussing job-search issues by noting: A.2 – job-search issues. Do NOT put on the comment line the definition of the code assigned. Thus, for an A.3 you would not put “group Tx” as a comment but something like “anger management” or “community rules”; and for an A.5 not “family conference” but perhaps “nursing home options.” (See sample log).

If a site supervisor is on a planned vacation or out for an emergency, the acting site supervisor, who has appropriate credentials, may sign in leu of the approved site supervisor for the weekly log.

If a student has been approved for dual sites, students must submit a weekly log for each site with the appropriate site supervisor signatures on each log. Site supervisors cannot approve hours that are not accrued at their own site.

## CLINICAL EXPERIENCE LOGS: MID-TERM AND FINAL

Students will submit an excel spreadsheet capturing all direct, indirect, and supervision hours at mid-semester and end-of-semester. The site supervisor will initial by each week and sign and date the bottom of the excel spreadsheet, and the faculty supervisor will sign the clinical experience log as well.

If a student has been approved for dual sites, students must submit a clinical experience log for each site with the appropriate site supervisor signatures on each log at mid-term and final. Site supervisors cannot approve hours that are not accrued at their own site. Students at dual sites will submit an additional cover sheet that totals all hours acquired.

## LICENSURE CONSIDERATIONS

For Clinical Rehabilitation Counseling Track: The Louisiana LRC Board of Examiners does not define a direct hour, yet requires the completion of the following core areas for licensure: Counseling and Interviewing, Foundations and Philosophy of Rehabilitation, Client Assessment, Occupational Information and Job Analysis, Job Development and Placement, Disability Insurance Compensation Systems, Forensic Rehabilitation Applications, Cost Containment and Resources Acquisition, Planning Service Delivery, Participants and Service Applications within Disability Insurance Systems, Service Delivery, Concepts of Tests and Measurement, Rehabilitation Service Programs, Interviewing and Communication Principles, Differential Diagnosis and exposure to Various Disabilities and Medical Aspects, Development of Life Care Plans, and weekly face-to-face supervision. If students are considering other states, they are encouraged to seek out the requirements for that state.

For Clinical Mental Health Counseling Track: The Louisiana LPC Board of Examiners approves hours of students graduating from a CACREP-accredited program. For licensure, the Louisiana LPC Board of Examiners defines a direct hour as an individual directly providing a mental health service with a client face-to-face. If students are considering other states, they are encouraged to seek out the requirements for that state.

Considerations for School Counseling: Students may be eligible to work upon graduation in a private school; however students are ineligible to obtain certification for the Counselor K-12 (Counselor in a School Setting) in Louisiana since LSUHSC does not have a specialized CACREP track in school counseling. Students may be eligible for the Mental Health Professional Counselor status in schools, however should seek guidance from the LA Department of Education for further information. If students are considering other states, they are encouraged to seek out the requirements for that state.

## Client Case Presentations

Case Presentations will be utilized in individual and group supervision. Students should refer to the course syllabus for specific instructions per the faculty supervisor. The client consent form should be completed and on file with the site. For case presentations, students are required to provide the faculty supervisor with the signed recording

verification form and upload their recording through the LSUHSC Health FileS (File Sharing Solution). Please be sure to disguise information so that the client's identity will be properly protected. APA formatting should be utilized for headers, references, etc.

#### SUGGESTED CASE PRESENTATION OUTLINE

- Overview of the Session
- Background Information on the Client
- Diagnostic Assessment & Impression
- Theoretical Framework
- Treatment Plan: Future Goals and Interventions
- Observations About Self
- Verbatim
- Consultation Questions
- References



## Sample Weekly Log

<b>Name:</b> Jane Doe				<b>Week of:</b> October 7-11, 2017		<b>Log Page #:</b> 12	
<b>Site:</b> Family Services				<b>Semester and Fieldwork Classification:</b> Fall 2017, Practicum			
Date	Time	A Codes DIRECT	B Codes INDIRECT	C Codes SUPERVISION	Comments with Client's Initials		
10/7/2008	9-10:30a	A3 (1.5)			current stressors at home: DH, BC, VK, GP, MT		
10/7/2008	10:30-11:30		B2 (1)		case notes for 9am group: DH, BC, VK, GP, MT		
10/7/2008	11:30-12:30				LUNCH		
10/7/2008	12:30-1		B1 (.5)		prep next group w/ co-facilitator		
10/7/2008	1-2:30	A3 (1.5)			relapse prevention: RS, LU, FW, ST		
10/7/2008	2:30-3:30			C1 (1)	improving confidence w/ clients		
10/7/2008	3:30-5		B4 (1.5)		agency policy changes overview		
10/7/2008	5-5:30		B2 (.5)		case notes for 1 pm group: RS, LU, FW, ST		
10/8/2008	9-10:30a	A3 (1.5)			working on AA Step 6: DH, BC, VK, GP, MT		
10/8/2008	10:30-11:15		B2 (.75)		case notes for 9am group: DH, BC, VK, GP, MT		
10/8/2008	11:15-12:30	A1 (1.25)			job interview role plays: VK		
<b>Current Page Total Hrs:</b>		<b>5.75</b>	<b>4.25</b>	<b>1</b>	<b>Student Signature &amp; Date:</b>		
<b>Previous Page Cumulative Hrs:</b>		<b>24.25</b>	<b>35.00</b>	<b>12.5</b>	<b>Site Supervisor Signature &amp; Date:</b>		
<b>Cumulative Total Hours:</b>		<b>30</b>	<b>39.25</b>	<b>13.5</b>	<b>Faculty Supervisor Signature &amp; Date:</b>		
<i>Activity Code Key: A.1 Intake/Interview, A.2 Individual Counseling, A.3 Group Counseling, A.4 Testing/Assessment, A.5 Family / Couples Counseling, A.6 Psycho-educational, A.7 Other (Specify); B.1 Research, B.2 Correspondence/Reports, B.3 Staffing/Meeting, B.4 Training/Observation, B.5 In-Service (Site), B.6 Conference/Workshop, B.7 Case Consultation, B.8 Case Management, B.9 Case Preparation, B.10 Other (Specify); C.1 Individual Site Supervision, C.2 Individual Faculty Supervision, C.3 Group Site Supervision, C.4 Group University Supervision</i>							

# Mid-Term and Final Clinical Experience Log (Excel Document)



Department of Clinical Rehab & Counseling  
 Clinical Experience Log: Practicum, Internship I, or Internship II (circle one)  
 Student Name: \_\_\_\_\_

School of Allied Health Professions

Semester: \_\_\_\_\_  
 Faculty Supervisor: \_\_\_\_\_

Site Name: \_\_\_\_\_  
 Site Supervisor: \_\_\_\_\_

Week of Date	Weekly Direct Contact Hours by Type							Ttl DC Hours	Supv Hours				Ttl Supv Hours	Other Indirect Hours										Ttl ID Hours	Week	SUPV	
	A.1	A.2	A.3	A.4	A.5	A.6	A.7	Total	C.1	C.2	C.3	C.4	Total	B.1	B.2	B.3	B.4	B.5	B.6	B.7	B.8	B.9	B.10	Total	Total	initial	
1								0.00					0.00												0.00	0.00	
2								0.00					0.00												0.00	0.00	
3								0.00					0.00												0.00	0.00	
4								0.00					0.00												0.00	0.00	
5								0.00					0.00												0.00	0.00	
6								0.00					0.00												0.00	0.00	
7								0.00					0.00												0.00	0.00	
8								0.00					0.00												0.00	0.00	
9								0.00					0.00												0.00	0.00	
10								0.00					0.00												0.00	0.00	
11								0.00					0.00												0.00	0.00	
12								0.00					0.00												0.00	0.00	
13								0.00					0.00												0.00	0.00	
14								0.00					0.00												0.00	0.00	
15								0.00					0.00												0.00	0.00	
16								0.00					0.00												0.00	0.00	
17								0.00					0.00												0.00	0.00	
18								0.00					0.00												0.00	0.00	
sem tot	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Student's Signature/Date: \_\_\_\_\_

Faculty Signature/ Date: \_\_\_\_\_

Site Supervisor/ Date: \_\_\_\_\_

# Client Consent Form

## Permission and Consent to Record Counseling Session

Louisiana State University Health Sciences—New Orleans Department of Clinical Rehabilitation and Counseling requires graduate students enrolled in Practicum and Internship courses to perform services of a professional counselor under supervision by the student’s placement site and the university. All counselor-in-training graduate students meet weekly with a site supervisor provided by the agency, with the faculty supervisor at the university, and with other counselor-in-training graduate students in the classroom setting. Audio/Video-taping the student-client’s counseling session is necessary for both supervisory purposes and in-class learning discussions about the counseling experience.

I, \_\_\_\_\_ (*client or guardian’s name*), hereby give consent to my assigned counselor, \_\_\_\_\_ (*counselor-in-training’s name*), who is a graduate student at Louisiana State University Health Sciences Center—New Orleans, in the Department of Clinical Rehabilitation and Counseling to audio record and/or video record counseling sessions.

- I understand that this counselor-in-training is receiving supervision from the below listed site supervisor and faculty supervisor.
- I understand that the recordings will only be used for educational and training purposes, and that recordings of part of recordings may be heard by the site supervisor, faculty supervisor, or other counselors-in-training as part of the counselor training process and field coursework requirements.
- I understand that the refusal to sign this form will not affect my eligibility for receiving services at this site.

## AUTHORITY FOR CLIENT PARTICIPATION AND RECORDING

Having read the above background information, the undersigned hereby give their consent to enter into a counseling relationship through LSUHSC—New Orleans Clinical Rehabilitation and Counseling Practicum and Internship program and allow the counselor-in-training to record counseling sessions for educational and training purposes.

_____	_____	_____
Client Name	Client Signature	Date

_____	_____	_____
Counselor-in-Training Name	Counselor-in-Training Signature	Date

_____	_____	_____
Site Supervisor Name	Site Supervisor Signature	Date

_____	_____	_____
Faculty Supervisor Name	Faculty Supervisor Signature	Date

*If the client is under the age of 18, a parent/guardian signature is required:*

_____	_____	_____
Parent/Guardian Name	Parent/Guardian Signature	Date

## Recording Verification Form

Because client confidentiality is of the utmost ethical and legal importance to use, we do not maintain client identification in our students' records—including consent forms with a client's signature. Client authorization for recording and class related supervision such as case consultation for student professional development purposes is maintained only in the agency file.

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

Site Name: \_\_\_\_\_

Client Code/Pseudonym: \_\_\_\_\_

Date of Presentation/Supervision: \_\_\_\_\_

This form is to verify that the student has obtained consent from the client to present a recording to the site supervisor, the faculty supervisor, or the practicum/internship class for supervision and consultation. By signing this form, you are verifying that there is an authorization on file at your agency. If you have questions, please contact either the faculty supervisor or the placement coordinators of the program.

Site Supervisor Name: \_\_\_\_\_

Site Supervisor Signature & Date: \_\_\_\_\_

## Live Supervision Verification Form

At times, students may be unable to audio/video record counseling sessions. If a student is not permitted by the client or agency to record, the following verification form must be submitted by the supervisor who provided live supervision during the student intern's counseling session.

Counselor-in-Training Name: \_\_\_\_\_

Client Code/Pseudonym: \_\_\_\_\_

Date of Counseling Session: \_\_\_\_\_

Length of Session with Start/Stop Times: \_\_\_\_\_

Session Number: \_\_\_\_\_

Live Supervision Evaluator: \_\_\_\_\_

Please identify one or two strengths observed in the session:

---

---

Please identify one or two things the counselor can consider or do to further improve his/her skills:

---

---

As the client, I would have felt:

---

---

Recommendations, considerations, skills, or interventions for next session:

---

---

*\*In addition, please complete the rating scale for counseling skills, theory-based skills, professionalism, and skills to be cautious of as new clinicians.*

Live Supervision Verification and Feedback Form Continued

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

*Counseling Skills; Theory-based Skills, Professionalism Level of Effectiveness Scale:*

1: Strongly Ineffective 2: Ineffective 3: Neutral 4: Effective 5: Highly Effective

*Skills to be Cautious of as New Clinicians Level of Effectiveness Scale:*

1: Highly Effective 2: Effective 3: Neutral 4: Ineffective 5: Strongly Ineffective

Counseling Skills	Level of Effectiveness
Level of eye contact seemed comfortable/ appropriate	
Body position conveyed interest and attention	
Distance between counselor and client seemed comfortable	
Counselor’s body language was relaxed, comfortable, or matched client appropriately	
Allowed for periods of effective silence	
Voice tone was calm, concerned	
Client talked more than counselor	
Counselor used more open –ended questions	
Minimal, appropriate usage of closed-ended questions	
Reflected ability to be genuine/ authentic	
Able to communicate unconditional positive regard (caring, respect, acceptance)	
Able to use invitational skills effectively (minimal encouragers, attentive listening)	
Able to use reflection skills effectively (content, feeling, paraphrasing, summarizing)	
Able to verbally follow client and request clarification if needed	
Culturally appropriate counseling skills utilized	
Pace of session	
Observing or discussing themes/patterns	
Theory-based Skills	
Use of techniques based on theoretical orientation	
Managing a session from a theoretical lens	
Professionalism	
Open to feedback from supervisor	
Timely, appropriate, managed boundaries	
Skills to Be Cautious of as New Clinician	Level of Ineffectiveness
Providing sympathy instead of empathy	
Self-disclosure	
Providing advice to clients instead of promoting insight	
Interrogating the client; too many “why” questions	
Lengthy descriptive statements	
Third-person counseling	
Having your own agenda and not allowing space for the client	
Poor balance of reflections, questions, restatements	

\_\_\_\_\_  
Supervisor Signature and Date

\_\_\_\_\_  
Student Signature and Date

# Faculty Supervisor Site Visit Form

## Student Information

<b>Name:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Date:</b>	
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

## Ratings

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
The site supervisor gave the faculty supervisor a tour of the agency, including the student intern’s work space or office location.	<input type="checkbox"/>				
The services of the site were discussed and the site supervisor provided information regarding the student intern’s case-load.	<input type="checkbox"/>				
The site supervisor reviewed student evaluations and we discussed areas of strength and areas of opportunity for the counseling student intern.	<input type="checkbox"/>				
The site supervisor encouraged and supported the counseling student intern in developing counseling theory and discovering techniques to implement with clients.	<input type="checkbox"/>				
The site supervisor demonstrated and modeled appropriate professional and counseling techniques.	<input type="checkbox"/>				
The site supervisor challenged the counseling student intern appropriately and helped the counseling student intern to grow personally and professionally.	<input type="checkbox"/>				
The site supervisor was genuine, congruent, empathetic, and honest.	<input type="checkbox"/>				
The site provided relevant experiences related to the career and counseling goals, as well as opportunities to fulfill fieldwork requirements of the counseling student intern.	<input type="checkbox"/>				
The site provided administrative support and appropriate support by site supervisor and other clinicians.	<input type="checkbox"/>				
The site provided the counseling student intern with a variety of opportunities related to counseling skills and techniques, including group counseling.	<input type="checkbox"/>				
The site provided accessible office space for counseling interns.	<input type="checkbox"/>				

## Evaluation

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST A MINIMUM OF 3 STRENGTHS OF THE SITE:

PLEASE LIST A MINIMUM OF 3 AREAS OF OPPORTUNITIES FOR THE SITE TO BETTER SUPPORT STUDENTS:

Faculty Signature		Date	
-------------------	--	------	--

## Safety Policies and Procedures

**S**tudents are expected to practice in a manner that minimizes risks to patients/clients, self, and others. Students who put safety of clients at risk may be removed from the clinical affiliation and receive a grade of “Fail” for the course. In addition, students who put their own safety at risk may be removed from the clinical affiliation and receive a grade “Fail” for the affiliation.

Safety at risk may include, but is not limited by:

- Failure to observe health, safety, and emergency regulations
- Failure to follow HIPPA standards regarding client information
- Failure to maintain a safe work environment
- Failure to observe client treatment contraindications or precautions
- Failure to recognize, monitor, and/or adjust treatments according to client responses
- Failure to use appropriate assistance of others
- Failure to use appropriate techniques for safe handling for clients
- Failure to maintain safety for self (body mechanics, environment, etc.)

If the student demonstrates safety concerns in the affiliation, the site supervisor should write an accurate and clear statement regarding the safety concerns. The site supervisor should notify the faculty supervisor as soon as possible. The faculty supervisor will determine if the safety concerns warrant one of the following a) a written remediation plan to help the student adhere to safety standards or b) immediate removal from the clinical affiliation and a grade of “Fail” for the course.

*Note: The University is not responsible for the student’s safety during travel to and from the clinical affiliation.*

## Student Conduct

During the academic and clinical portions of the program, all LSUHSC - New Orleans Clinical Rehabilitation and Counseling students are required to abide by LSUHSC – New Orleans School of Allied Health Professions “Policy and Procedures Related to Student Conduct” (see link to document below). Students are provided this document at new student orientation. All students are expected to review this document and must sign a form stating that they have done so. <https://alliedhealth.lsuhs.edu/admin/docs/professionalconduct.pdf>

## Campus Assistance Program (CAP)

Offers problem assessment, short-term counseling, and community referral information, as well as a 24-hour crisis line for students and their immediate family members. CAP services are free of charge and confidential. For the crisis line or to make an appointment call (504) 568-8888.

## Substance Abuse

All students at LSUHSC – New Orleans are required to adhere to Chancellor’s Memorandum 23 (CM-23)-LSU Health Sciences Center New Orleans Drug Free Workplace and Workforce. Please see the link below to CM-23 document. Students are required to complete annual compliance training annually in the following to areas:

- The Drug-Free Workplace Policy & Drug Testing Program
- Drug Free Schools and Communities Students are also subject to the substance abuse policies set forth by their External Clinical Practicum site. <http://www.lsuhscc.edu/administration/cm/cm-23.pdf>

## Student Health Services

The Louisiana State University Student Health Clinic offers a variety of health services. Physicians in the Student Health Clinic are board certified. For more information on student health insurance, please see <http://www.lsuhscc.edu/orgs/studenthealth/insurance>. Nurse only appointments may be scheduled for immunizations by calling (504) 412-1366. For additional information, see the Student Health Handbook.

## Office of Compliance

As part of enrollment at LSUHSC - New Orleans, students are required to complete training in accordance with federal and state laws and regulations in the following areas: Code of Conduct, HIPAA Privacy, HIPAA Security, Quarterly Safety Meetings, Security and Confidentiality, FERPA, The Breach Notification Rule, Compliance Update, Bloodborne Pathogens, The Drug-Free Workplace Policy & Drug Testing Program, Drug Free Schools and Communities.

## Emergency Disaster Plan

All students are required to abide by the policies and procedures of the clinical sites and university policies to which they are assigned. Emergency plans are reviewed as part of a student’s orientation to the facility.

If the university should close for an unforeseen reason (weather, etc.) with short notice, students are to communicate with their site supervisor the status of the school closure by forwarding the closure notification email from the Chancellor to the site supervisor as soon as possible. Students are only allowed at their site if the fieldwork site is open and there is written communication stating the student needs to be on-site from the site supervisor submitted to the faculty supervisor and the practicum and internship coordinator in advance.

## At-Risk/ Crisis Incidences, Illness, and Injury

All students should report any of these instances to their site supervisor and faculty supervisor as soon as possible. Students are required to abide by the policies and procedures of the clinical sites to which they are assigned. These policies and procedures are reviewed as part of a student’s orientation to the facility.

## Assignment of Grades and Evaluations

**P**racticum and internship courses are graded Pass/Fail, based on the student's demonstration of professionalism, participation on-site and in the group supervision seminar, and careful completion of all assignments, including obtaining the minimum amount of direct and indirect hours required, as outlined in the course syllabus. Grades are based on participation in class activities, assignments, site supervisor's evaluations (mid-term and final), faculty supervisor's evaluations (midterm and final), as well as the ability to show competencies in counseling skills, openness to the supervision process, and displaying developmental growth over the course of the semester. Please be assured that any identified deficiencies will be discussed with you as soon as they are identified. The midterm evaluations are an effective tool for judging student progress. Students may freely discuss progress with their site supervisor and/or faculty supervisor whenever there are questions or concerns.

At mid-term, if a student receives any score below a 2—At-Level (therefore receives a 0—Not evident and/or 1—Below level) in one or more areas of the ratings section or has concerning remarks in the evaluation section on the student's mid-term site supervisor and/or faculty supervisor evaluations a remediation plan will be developed in order to best support the student for his/her overall successful completion of the course. The remediation meeting will include the student and the faculty supervisor, and address the deficient area(s) highlighted from the supervisor evaluation(s). If the remediation plan is not successfully completed and/or passed successfully by a date before the final evaluation(s), the student will receive a non-passing grade in the course.

Additionally, if a student receives on their final evaluation any score below a 2—At-Level (therefore receives a 0—Not evident and/or 1—Below level) in one or more areas of the ratings section or has concerning remarks in the evaluation section on the student's final site supervisor and/or faculty supervisor evaluations the student will receive a non-passing grade in the course and a remediation plan will be developed.

### Gate-Keeping

The CRC faculty and site supervisors are guided by the code of ethics of the ACA, CRCC, and other professional counseling associations, as well as the university, school, and department policies of LSUHSC—New Orleans. Providing due process for students is important in the implementation of remediation procedures.

### Evaluations

Students in practicum and internship will complete formal self-evaluations on their skills and knowledge, as well as students will receive formal evaluations from site supervisors and faculty supervisors at mid-term and final. Evaluations will be turned in to the faculty supervisor based on the outlined mid-term and final dates provided on a course syllabus.



Department of Clinical Rehabilitation & Counseling

MID-TERM CLINICAL MENTAL HEALTH COUNSELING STUDENT EVALUATION BY SITE SUPERVISOR

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course:</b> (circle)	Practicum Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
Understands and follows the agency’s policies and procedures, including documentation.	<input type="checkbox"/>				
Is able to establish rapport with clients and create appropriate goals for counseling sessions.	<input type="checkbox"/>				
Is prepared for supervision, is open to constructive feedback from site supervisor, and implements feedback into practice.	<input type="checkbox"/>				
Shows professionalism on-site and with clients, staff members, and other stakeholders.	<input type="checkbox"/>				
Demonstrates effective communication skills including setting appropriate boundaries, understanding content and context, responding to feelings, establishing empathy, and being mindful of self-disclosure.	<input type="checkbox"/>				
Can identify and discuss a primary counseling theoretical orientation and be able to conceptualize clients through such lens.	<input type="checkbox"/>				
Can identify and implement appropriate techniques based on theoretical orientation to utilize with clients in session and treatment planning.	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical relationships.	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT’S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

*By signing this form, you confirm that you have discussed this review in detail with your site supervisor.*

Student Signature		Date	
Site Supervisor Signature		Date	



Department of Clinical Rehabilitation & Counseling

MID-TERM CLINICAL MENTAL HEALTH COUNSELING STUDENT SELF-EVALUATION

**Student Information**

Name & Date:		Semester:	
Site Name:		Course:	Practicum Internship I
Site Supervisor:		Faculty Supervisor:	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N –No opportunity to observe
Understands and follows the course syllabus and the P-I Handbook.	<input type="checkbox"/>				
Understands and follows the agency’s policies and procedures.	<input type="checkbox"/>				
Is able to establish rapport with clients and create appropriate goals for counseling.	<input type="checkbox"/>				
Student is on-time, prepared for class, and contributes to the group.	<input type="checkbox"/>				
Shows professionalism on-site and with clients, staff members, and others.	<input type="checkbox"/>				
Student is open to constructive feedback from peers, site supervisor, faculty supervisor, and implements feedback into practice. Additionally, student provides appropriate feedback to peers and faculty supervisor.	<input type="checkbox"/>				
Weekly clinical logs and clinical experience logs are typed, free from error, signed by self and site supervisor, and turned in on time.	<input type="checkbox"/>				
Demonstrates effective communication skills including setting appropriate boundaries, understanding content and context, responding to feelings, establishing empathy, and being mindful of self-disclosure.	<input type="checkbox"/>				
Identify a primary counseling theoretical orientation and conceptualize clients.	<input type="checkbox"/>				
Can identify and implement appropriate techniques based on theoretical orientation to utilize with clients in session and treatment planning.	<input type="checkbox"/>				
Reflection papers meet course requirements and address the topic in a thorough and thoughtful manner. APA guidelines followed.	<input type="checkbox"/>				
Case presentations meet course requirements. Video/audio is prepped at the beginning of class. Appropriate handouts are made for peers. Confidentiality guidelines are followed.	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical relationships.	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST A MINIMUM OF 3 STRENGTHS REGARDING YOUR COUNSELING SKILLS:

PLEASE LIST A MINIMUM OF 3 AREAS OF OPPORTUNITIES FOR YOU TO FURTHER DEVELOP AS A CLINICIAN:

Student Signature:		Date:	
--------------------	--	-------	--



Department of Clinical Rehabilitation & Counseling

MID-TERM CLINICAL REHABILITATION COUNSELING STUDENT EVALUATION BY SITE SUPERVISOR

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course:</b> (circle)	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N –No opportunity to observe
Understands and follows the agency’s policies and procedures.	<input type="checkbox"/>				
Is able to establish rapport with clients and create appropriate goals based on agency standards.	<input type="checkbox"/>				
Is prepared for supervision, is open to constructive feedback from site supervisor, and implements feedback into practice.	<input type="checkbox"/>				
Shows professionalism on-site and with clients, staff members, and others	<input type="checkbox"/>				
Demonstrates effective communication skills including setting appropriate boundaries, understanding content and context, responding to feelings, establishing empathy, and being mindful of self-disclosure.	<input type="checkbox"/>				
Can identify a primary counseling theoretical orientation and conceptualize clients.	<input type="checkbox"/>				
Demonstrates knowledge of agency assessments and is able to provide appropriate services based on assessments.	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical relationships.	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT’S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

*By signing this form, you confirm that you have discussed this review in detail with your site supervisor.*

Student Signature		Date	
Site Supervisor Signature		Date	



**MID-TERM CLINICAL REHABILITATION COUNSELING  
STUDENT SELF-EVALUATION**

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course:</b>	Practicum Internship I
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N - No opportunity to observe
Understands and follows the course syllabus and the P-I Handbook.	<input type="checkbox"/>				
Understands and follows the agency's policies and procedures.	<input type="checkbox"/>				
Is able to establish rapport with clients and create appropriate goals based on agency standards.	<input type="checkbox"/>				
Student is on-time, prepared for class, and contributes to the group.	<input type="checkbox"/>				
Shows professionalism on-site and with clients, staff members, and others.	<input type="checkbox"/>				
Student is open to constructive feedback from peers, site supervisor, faculty supervisor, and implements feedback into practice. Additionally, student provides appropriate feedback to peers and faculty supervisor.	<input type="checkbox"/>				
Weekly clinical logs and clinical experience logs are typed, free from error, signed by self and site supervisor, and turned in on time.	<input type="checkbox"/>				
Demonstrates effective communication skills including setting appropriate boundaries, understanding content and context, responding to feelings, establishing empathy, and being mindful of self-disclosure.	<input type="checkbox"/>				
Can identify a primary counseling theoretical orientation and conceptualize clients.	<input type="checkbox"/>				
Demonstrates knowledge of agency assessments and is able to provide appropriate services based on assessments.	<input type="checkbox"/>				
Reflection papers meet course requirements and address the topic in a thorough and thoughtful manner. APA guidelines followed.	<input type="checkbox"/>				
Case presentations meet course requirements. Video/audio is prepped at the beginning of class. Appropriate handouts are made for peers. Confidentiality guidelines are followed.	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity in relationships.	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST A MINIMUM OF 3 STRENGTHS REGARDING YOUR COUNSELING SKILLS:

PLEASE LIST A MINIMUM OF 3 AREAS OF OPPORTUNITIES FOR YOU TO FURTHER DEVELOP AS A CLINICIAN:

Student Signature:		Date:	
--------------------	--	-------	--



Department of Clinical Rehabilitation & Counseling

**MID-TERM EVALUATION  
STUDENT EVALUATION BY FACULTY SUPERVISOR**

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course:</b> (circle)	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N –No opportunity to observe
Understands and follows the course syllabus and the Practicum and Internship Handbook.	<input type="checkbox"/>				
Student is able to establish appropriate relationships with peers and set appropriate boundaries.	<input type="checkbox"/>				
Student is on-time, prepared for class, and contributes to the group.	<input type="checkbox"/>				
Student is open to constructive feedback from peers and faculty supervisor, and implements feedback into practice. Additionally, student provides appropriate feedback to peers and faculty supervisor.	<input type="checkbox"/>				
Weekly clinical logs and clinical experience logs are typed, free from error, signed by self and site supervisor, and turned in on time.	<input type="checkbox"/>				
Demonstrates effective communication skills including setting appropriate boundaries, understanding content and context, responding to feelings, establishing empathy, and being mindful of self-disclosure.	<input type="checkbox"/>				
Can identify and discuss a primary counseling theoretical orientation and be able to conceptualize clients through such lens.	<input type="checkbox"/>				
Reflection papers meet course requirements and address the topic in a thorough and thoughtful manner. APA guidelines followed.	<input type="checkbox"/>				
Case presentation meets course requirements. Video/audio is prepped at the beginning of class. Appropriate handouts are made for peers. Confidentiality guidelines are followed	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity in relationships.	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT’S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

*By signing this form, you confirm that you have discussed this review in detail with your faculty supervisor.*

Student Signature		Date	
Faculty Supervisor Signature		Date	



**FINAL—CLINICAL MENTAL HEALTH COUNSELING  
STUDENT EVALUATION BY SITE SUPERVISOR**

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course: (circle)</b>	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
<b>Clinical Skills</b>					
Demonstrates ability to establish rapport and relationships so that a working alliance can be created with clients.	<input type="checkbox"/>				
Demonstrates confidence or comfort with the counseling process.	<input type="checkbox"/>				
Demonstrates group facilitation skills.	<input type="checkbox"/>				
Demonstrates effective attending skills and relationship building overall.	<input type="checkbox"/>				
A. Effective non-verbal communication—body language, tone of voice, facial expressions, eye-contact.	<input type="checkbox"/>				
B. Creates appropriate structure—setting and maintaining appropriate boundaries,	<input type="checkbox"/>				
C. Attends to the client, demonstrates interest, and uses active listening skills to follow the client with understanding in all aspects of communication.	<input type="checkbox"/>				
D. Nonjudgmental attitude—respect, warmth, empathy, congruent verbal and nonverbal language.	<input type="checkbox"/>				
E. Self-disclosure—does not impose own values on the client, does not lecture, moralize, or give advice in sessions to clients.	<input type="checkbox"/>				
F. Observations and use of silence—counselor pays attention to verbal and nonverbal cues of client, interactions between counselor and client	<input type="checkbox"/>				
G. Transitions in session—opening, closing are smooth, effortless; uses timing effectively in session; terminates clients successfully	<input type="checkbox"/>				
Demonstrates effective information gathering, questioning skills, case conceptualization, and counseling plans overall.	<input type="checkbox"/>				
A. Appropriate use of open and closed-ended questions.	<input type="checkbox"/>				
B. Vocabulary—appropriate developmentally, culturally.	<input type="checkbox"/>				
C. Assessment—able to identify client issues, themes, diagnosis, and is able to use and interpret assessment data.	<input type="checkbox"/>				
D. Assess threats of harm to self or others appropriately.	<input type="checkbox"/>				
E. Counseling plans—agreed upon goals, effective treatment plans, use research and theory to formulate, culturally appropriate, measureable outcomes for goals.	<input type="checkbox"/>				
F. Individualizes intervention strategies for each client, taking into account the	<input type="checkbox"/>				
G. Case notes—clearly written, follow agency policy, timely-manner	<input type="checkbox"/>				
Demonstrates empathetic skills overall.	<input type="checkbox"/>				
A. Reflection of Content—paraphrase essence of what client stated.	<input type="checkbox"/>				
B. Reflection of Context—understanding the uniqueness or underlying meanings; ability to help client explore to gain deeper understanding.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N –No opportunity to observe
C. Reflection of Feeling—explicit and implicit.	<input type="checkbox"/>				
D. Summarizing—integrate and reflect content, thoughts, feelings, and meaning.	<input type="checkbox"/>				
E. Genuineness and intentional in responses.	<input type="checkbox"/>				
<b>Professional Responsibilities &amp; Professionalism</b>					
Appropriately utilizes agency resources, as well as respects and follows the agency’s policies and procedures.	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				
Demonstrates emotional stability, good judgement, and acts in a mature manner at the site.	<input type="checkbox"/>				
Demonstrates professional attitude with clients, peers, colleagues, staff, and supervisor(s).	<input type="checkbox"/>				
Learns quickly and demonstrates flexibility, imagination, resourcefulness, and problem-solving abilities.	<input type="checkbox"/>				
Is reliable and dependable at the site and with the site supervisor.	<input type="checkbox"/>				
Maintains appropriate personal appearance and dress code for the agency.	<input type="checkbox"/>				
Maintains client confidentiality when working with individuals, couples, families, and groups.	<input type="checkbox"/>				
Engages in positive working relationship with staff.	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
Communicates in an open, clear, comfortable, and professional manner.	<input type="checkbox"/>				
Advocates for policies, programs, and/or services that are equitable and responsive to the unique needs of clients seeking assistance.	<input type="checkbox"/>				
<b>CACREP Clinical Mental Health Counseling Contextual Dimensions Standards</b>					
Theories and models related to clinical mental health counseling.	<input type="checkbox"/>				
Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.	<input type="checkbox"/>				
Psychological tests and assessments specific to clinical mental health counseling.	<input type="checkbox"/>				
Roles and settings of clinical mental health counselors	<input type="checkbox"/>				
Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	<input type="checkbox"/>				
Mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	<input type="checkbox"/>				
Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).	<input type="checkbox"/>				
Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders.	<input type="checkbox"/>				
Impact of crisis and trauma on individuals with mental health diagnoses.	<input type="checkbox"/>				
Impact of biological and neurological mechanisms on mental health.	<input type="checkbox"/>				
Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation classifications, indications, and contraindications of commonly prescribed.	<input type="checkbox"/>				
Legislation and government policy relevant to clinical mental health counseling.	<input type="checkbox"/>				
Cultural factors relevant to clinical mental health counseling.	<input type="checkbox"/>				
Professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling.	<input type="checkbox"/>				
Legal and ethical considerations specific to clinical mental health counseling.	<input type="checkbox"/>				
Record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
<b>Supervision</b>					
Demonstrates self-awareness related to one’s strengths, challenges, worldviews, values, and biases, and how they impact work with clients.	<input type="checkbox"/>				
Is on-time for supervision meetings and completes tasks assigned by site supervisor in a timely manner.	<input type="checkbox"/>				
Demonstrates openness to professional opinion of site supervisor overall.	<input type="checkbox"/>				
A. Professionalism and Preparation for supervision—readiness as evidenced by having an agenda for supervision and having prepared a submission of tapes, paperwork, and evaluations to discuss.	<input type="checkbox"/>				
B. Use of feedback—counselor is open to feedback, seeks feedback, and is willing to implement suggestions.	<input type="checkbox"/>				
C. Conceptualization—counselor can analyze and conceptualize the client using a theory and developing appropriate goals and convey that information in	<input type="checkbox"/>				
D. Vulnerability—demonstrates willingness to share with supervisor counselor’s own reactions about clients, supervision, and factors that may influence counseling	<input type="checkbox"/>				
<b>Summary</b>					
A. Overall performance of counselor.	<input type="checkbox"/>				
B. Potential as a clinical mental health counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT’S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

*By signing this form, you confirm that you have discussed this review in detail with your site supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.*

Student Signature		Date	
Site Supervisor Signature		Date	



Department of Clinical Rehabilitation & Counseling

**FINAL—CLINICAL MENTAL HEALTH COUNSELING STUDENT SELF EVALUATION**

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course: (circle)</b>	Practicum Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
<b>Clinical Skills</b>					
Demonstrates ability to establish rapport and relationships so that a working alliance can be created with clients.	<input type="checkbox"/>				
Demonstrates confidence or comfort with the counseling process.	<input type="checkbox"/>				
Demonstrates group facilitation skills.	<input type="checkbox"/>				
Demonstrates effective attending skills and relationship building overall.	<input type="checkbox"/>				
A. Effective non-verbal communication—body language, tone of voice, facial expressions, eye-contact.	<input type="checkbox"/>				
B. Creates appropriate structure—setting and maintaining appropriate boundaries, time limits	<input type="checkbox"/>				
C. Attends to the client, demonstrates interest, and uses active listening skills to follow the client with understanding in all aspects of communication.	<input type="checkbox"/>				
D. Nonjudgmental attitude—respect, warmth, empathy, congruent verbal	<input type="checkbox"/>				
E. Self-disclosure—does not impose own values on the client, does not lecture, moralize, or give advice in sessions to clients.	<input type="checkbox"/>				
F. Observations and use of silence—counselor pays attention to verbal and nonverbal cues of client. interactions between counselor and client	<input type="checkbox"/>				
G. Transitions in session—opening, closing are smooth, effortless; uses timing effectively in session; terminates clients successfully	<input type="checkbox"/>				
Demonstrates effective information gathering, questioning skills, case conceptualization, and counseling plans overall.	<input type="checkbox"/>				
A. Appropriate use of open and closed-ended questions.	<input type="checkbox"/>				
B. Vocabulary—appropriate developmentally, culturally.	<input type="checkbox"/>				
C. Assessment—able to identify client issues, themes, diagnosis, and is able to use and interpret assessment data.	<input type="checkbox"/>				
D. Assess threats of harm to self or others appropriately.	<input type="checkbox"/>				
E. Counseling plans—agreed upon goals, effective treatment plans, use research and theory to formulate, culturally appropriate, measureable outcomes for goals.	<input type="checkbox"/>				
F. Individualizes intervention strategies for each client taking into account the client's	<input type="checkbox"/>				
G. Case notes—clearly written, follow agency policy, timely-manner	<input type="checkbox"/>				
Demonstrates empathetic skills overall.	<input type="checkbox"/>				
A. Reflection of Content—paraphrase essence of what client stated.	<input type="checkbox"/>				
B. Reflection of Context—understanding the uniqueness or underlying meanings; ability to help client explore to gain deeper understanding.	<input type="checkbox"/>				
C. Reflection of Feeling—explicit and implicit.	<input type="checkbox"/>				
D. Summarizing—integrate and reflect content, thoughts, feelings, and meaning.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
E. Genuineness and intentional in responses.	<input type="checkbox"/>				
<b>Professional and Classroom Responsibilities and Professionalism</b>					
Appropriately utilizes agency resources, as well as respects and follows the agency's policies and procedures.	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				
Demonstrates emotional stability, good judgement, and acts in a mature manner at the site.	<input type="checkbox"/>				
Demonstrates professional attitude with clients, peers, colleagues, staff, and supervisor(s).	<input type="checkbox"/>				
Learns quickly and demonstrates flexibility, imagination, resourcefulness, and problem-solving abilities.	<input type="checkbox"/>				
Is reliable and dependable to the site, site supervisor, university group, and faculty	<input type="checkbox"/>				
Maintains appropriate personal appearance and dress code for the agency.	<input type="checkbox"/>				
Maintains client confidentiality when working with individuals, couples, families, and groups.	<input type="checkbox"/>				
Engages in positive working relationship with staff.	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
Communicates in an open, clear, comfortable, and professional manner.	<input type="checkbox"/>				
Understands and follows the course syllabus and the Practicum and Internship Handbook.	<input type="checkbox"/>				
Student is on-time, prepared for class, and contributes to the group in a meaningful manner.	<input type="checkbox"/>				
Weekly clinical logs and clinical experience logs are typed, free from error, signed by self and site supervisor, and turned in on time.	<input type="checkbox"/>				
Reflection papers meet course requirements and address the topic in a thorough and thoughtful manner. APA guidelines followed.	<input type="checkbox"/>				
Case presentation meets course requirements. Video/audio is prepped at the beginning of class. Appropriate handouts are made for peers. Confidentiality guidelines are followed.	<input type="checkbox"/>				
Student can conduct a thorough analysis of a clinical session through transcription utilizing insightful and critical commentary, identification of skills, and rephrasing of original counselor phrases.	<input type="checkbox"/>				
Student can analyze and conceptualize a client's case and connect the case to the student's chosen theory and apply the theory to fully understand the case and develop appropriate client goals.	<input type="checkbox"/>				
<b>CACREP Clinical Mental Health Counseling Contextual Dimensions Standards</b>					
Theories and models related to clinical mental health counseling.	<input type="checkbox"/>				
Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.	<input type="checkbox"/>				
Psychological tests and assessments specific to clinical mental health counseling.	<input type="checkbox"/>				
Roles and settings of clinical mental health counselors	<input type="checkbox"/>				
Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	<input type="checkbox"/>				
Mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	<input type="checkbox"/>				
Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).	<input type="checkbox"/>				
Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders.	<input type="checkbox"/>				
Impact of crisis and trauma on individuals with mental health diagnoses.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
Impact of biological and neurological mechanisms on mental health.	<input type="checkbox"/>				
Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation classifications, indications, and contraindications of commonly prescribed.	<input type="checkbox"/>				
Legislation and government policy relevant to clinical mental health counseling.	<input type="checkbox"/>				
Cultural factors relevant to clinical mental health counseling.	<input type="checkbox"/>				
Professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling.	<input type="checkbox"/>				
Legal and ethical considerations specific to clinical mental health counseling.	<input type="checkbox"/>				
Record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling.	<input type="checkbox"/>				
<b>Supervision, Self-Evaluation, and Constructive Feedback</b>					
Demonstrates self-awareness related to one's strengths, challenges, worldviews, values, and biases, and how they impact work with clients.	<input type="checkbox"/>				
Is on-time for supervision meetings and completes tasks assigned by site supervisor in a timely manner.	<input type="checkbox"/>				
Demonstrates openness to professional opinion of site supervisor overall.	<input type="checkbox"/>				
A. Professionalism and Preparation for supervision—readiness as evidenced by having an agenda for supervision and having prepared a submission of tapes, paperwork, and evaluations to discuss.	<input type="checkbox"/>				
B. Use of feedback—counselor is open to feedback, seeks feedback, and is willing to implement suggestions.	<input type="checkbox"/>				
C. Conceptualization—counselor can analyze and conceptualize the client using a theory and developing appropriate goals and convey that information in	<input type="checkbox"/>				
D. Vulnerability—demonstrates willingness to share with supervisor counselor's own reactions about clients, supervision, and factors that may influence counseling	<input type="checkbox"/>				
Student is open to constructive feedback, critique, and suggestions from peers and faculty supervisor, and implements feedback into practice.	<input type="checkbox"/>				
Student provides appropriate constructive feedback, critique, and suggestions to peers and faculty supervisor.	<input type="checkbox"/>				
Demonstrates willingness to share with faculty supervisor and/or group supervision, one's own reactions about clients, supervisors, and factors that influence counseling	<input type="checkbox"/>				
Student has awareness and self-reflection skills which include a narrative and insightful critical analysis of skills, dynamics of sessions, countertransference issues, and overall	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
<b>Summary</b>					
A. Overall performance of counselor.	<input type="checkbox"/>				
B. Potential as a clinical mental health counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT'S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

Student Signature		Date	
-------------------	--	------	--



Department of Clinical Rehabilitation & Counseling

FINAL—CLINICAL REHABILITATION COUNSELING STUDENT EVALUATION BY SITE SUPERVISOR

Student Information

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course: (circle)</b>	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

Ratings

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
<b>Clinical Skills</b>					
Demonstrates ability to establish rapport and relationships so that a working alliance can be created with clients.	<input type="checkbox"/>				
Demonstrates confidence or comfort with the counseling process.	<input type="checkbox"/>				
Demonstrates group facilitation skills.	<input type="checkbox"/>				
Demonstrates effective attending skills and relationship building overall.	<input type="checkbox"/>				
A. Effective non-verbal communication—body language, tone of voice, facial expressions, eye-contact.	<input type="checkbox"/>				
B. Creates appropriate structure—setting and maintaining appropriate boundaries,	<input type="checkbox"/>				
C. Attends to the client, demonstrates interest, and uses active listening skills to follow the client with understanding in all aspects of communication.	<input type="checkbox"/>				
D. Nonjudgmental attitude—respect, warmth, empathy, congruent verbal and nonverbal language.	<input type="checkbox"/>				
E. Self-disclosure—does not impose own values on the client, does not lecture, moralize, or give advice in sessions to clients.	<input type="checkbox"/>				
F. Observations and use of silence—counselor pays attention to verbal and nonverbal cues of client. interactions between counselor and client. and allows	<input type="checkbox"/>				
G. Transitions in session—opening, closing are smooth, effortless; uses timing effectively in session; terminates clients successfully	<input type="checkbox"/>				
Demonstrates effective information gathering, questioning skills, case conceptualization, and counseling plans overall.	<input type="checkbox"/>				
A. Appropriate use of open and closed-ended questions.	<input type="checkbox"/>				
B. Vocabulary—appropriate developmentally, culturally.	<input type="checkbox"/>				
C. Assessment—able to identify client issues, themes, diagnosis, and is able to use and interpret assessment data.	<input type="checkbox"/>				
D. Assess threats of harm to self or others appropriately.	<input type="checkbox"/>				
E. Counseling plans—agreed upon goals, effective treatment plans, use research and theory to formulate, culturally appropriate, measureable outcomes for goals.	<input type="checkbox"/>				
F. Individualizes intervention strategies for each client taking into account the client's	<input type="checkbox"/>				
G. Case notes—clearly written, follow agency policy, timely-manner	<input type="checkbox"/>				
Demonstrates empathetic skills overall.	<input type="checkbox"/>				
A. Reflection of Content—paraphrase essence of what client stated.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N –No opportunity to observe
B. Reflection of Context—understanding the uniqueness or underlying meanings; ability to help client explore to gain deeper understanding.	<input type="checkbox"/>				
C. Reflection of Feeling—explicit and implicit.	<input type="checkbox"/>				
D. Summarizing—integrate and reflect content, thoughts, feelings, and meaning.	<input type="checkbox"/>				
E. Genuineness and intentional in responses.	<input type="checkbox"/>				
<b>Professional Responsibilities &amp; Professionalism</b>					
Appropriately utilizes agency resources, as well as respects and follows the agency's policies and procedures.	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity in relationships.	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				
Demonstrates emotional stability, good judgement, and acts in a mature manner	<input type="checkbox"/>				
Demonstrates professional attitude with clients, peers, colleagues, staff, supervisor(s).	<input type="checkbox"/>				
Learns quickly and demonstrates flexibility, imagination, resourcefulness, and problem-solving abilities.	<input type="checkbox"/>				
Is reliable and dependable to the site and the site supervisor.	<input type="checkbox"/>				
Maintains appropriate personal appearance and dress code for the agency.	<input type="checkbox"/>				
Maintains client confidentiality when working with individuals, couples, families, and groups.	<input type="checkbox"/>				
Engages in positive working relationship with staff.	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
Communicates in an open, clear, comfortable, and professional manner.	<input type="checkbox"/>				
Advocates for policies, programs, and/or services that are equitable and responsive to the unique needs of clients seeking assistance.	<input type="checkbox"/>				
Applies knowledge of public mental health and rehabilitation policies and regulatory processes to improve service delivery opportunities in rehabilitation counseling.	<input type="checkbox"/>				
<b>CACREP Clinical Rehabilitation Counseling Contextual Dimensions Standards</b>					
Roles and settings of rehabilitation counselors.	<input type="checkbox"/>				
Relationships between clinical rehabilitation counselors and medical and allied health professionals, including interdisciplinary treatment teams.	<input type="checkbox"/>				
Rehabilitation service delivery systems, including housing, independent living, case management, public benefits programs, educational programs, and public/proprietary vocational rehabilitation programs.	<input type="checkbox"/>				
Rehabilitation counseling services within the continuum of care, such as inpatient, outpatient, partial hospitalization and aftercare, and the rehabilitation counseling services networks.	<input type="checkbox"/>				
Operation of an emergency management system within rehabilitation agencies and in the community in relation to accommodating individuals with disabilities.	<input type="checkbox"/>				
Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).	<input type="checkbox"/>				
Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders.	<input type="checkbox"/>				
Impact of crisis and trauma on individuals with disabilities.	<input type="checkbox"/>				
Impact of biological and neurological mechanisms on disability.	<input type="checkbox"/>				
Effects of co-occurring disabilities on the client and family.	<input type="checkbox"/>				
Effects of discrimination, such as handicapism, ableism, and power, privilege, and oppression on clients' life and career development.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N –No opportunity to observe
Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation.	<input type="checkbox"/>				
Effects of the onset, progression, and expected duration of disability on clients' holistic functioning (i.e., physical, spiritual, sexual, vocational, social, relational, and recreational).	<input type="checkbox"/>				
Transferable skills, functional assessments, and work-related supports for achieving and maintaining meaningful employment for people with disabilities.	<input type="checkbox"/>				
Role of family, social networks, and community in the provision of services for and treatment of people with disabilities.	<input type="checkbox"/>				
Environmental, attitudinal, and individual barriers for people with disabilities.	<input type="checkbox"/>				
Assistive technology to reduce or eliminate barriers and functional limitations.	<input type="checkbox"/>				
Legislation and government policy relevant to rehabilitation counseling.	<input type="checkbox"/>				
Cultural factors relevant to rehabilitation counseling.	<input type="checkbox"/>				
Professional issues that affect rehabilitation counselors, including independent provider status, expert witness status, forensic rehabilitation, and access to and practice privileges within managed care systems.	<input type="checkbox"/>				
Record keeping, third party reimbursement, and other practice and management issues in rehabilitation counseling.	<input type="checkbox"/>				
Professional organizations, preparation standards, and credentials relevant to the practice of clinical rehabilitation counseling.	<input type="checkbox"/>				
Legal and ethical considerations specific to clinical rehabilitation counseling.	<input type="checkbox"/>				
Medical, functional, and environmental aspects of disability—medical terminology and diagnosis; knowledge of physical, psychiatric, cognitive, sensory, and developmental disabilities; assistive technology; environmental implications for disability; classification and	<input type="checkbox"/>				
Rehabilitation services, case management, and related services—vocational rehabilitation; caseload management; independent living; school-to-work transitions; disability management; forensic rehabilitation and vocational expert practices; substance abuse treatment; psychiatric rehabilitation; wellness and illness prevention; community resources; service coordination; life care planning; insurance programs and social security; programs	<input type="checkbox"/>				
<b>Supervision</b>					
Demonstrates self-awareness related to one's strengths, challenges, worldviews, values, and biases, and how they impact work with clients.	<input type="checkbox"/>				
Is on-time for supervision meetings and completes tasks assigned by site supervisor in a timely manner.	<input type="checkbox"/>				
Demonstrates openness to professional opinion of site supervisor overall.	<input type="checkbox"/>				
A. Professionalism and Preparation for supervision—readiness as evidenced by having an agenda for supervision and having prepared a submission of tapes, paperwork, and evaluations to discuss.	<input type="checkbox"/>				
B. Use of feedback—counselor is open to feedback, seeks feedback, and is willing to implement suggestions.	<input type="checkbox"/>				
C. Conceptualization—counselor can analyze and conceptualize the client using a theory and developing appropriate goals and convey that information in	<input type="checkbox"/>				
D. Vulnerability—demonstrates willingness to share with supervisor counselor's own reactions about clients, supervision, and factors that may influence counseling	<input type="checkbox"/>				
<b>Summary</b>					
A. Overall performance of counselor.	<input type="checkbox"/>				
B. Potential as a rehabilitation counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT'S STRENGTHS:

---

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

---

**Verification of Review**

*By signing this form, you confirm that you have discussed this review in detail with your site supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.*

Student Signature		Date	
Site Supervisor Signature		Date	



Department of Clinical Rehabilitation & Counseling

FINAL—CLINICAL REHABILITATION COUNSELING STUDENT SELF EVALUATION

Student Information

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course: (circle)</b>	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

Ratings

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
<b>Clinical Skills</b>					
Demonstrates ability to establish rapport and relationships so that a working alliance can be created with clients.	<input type="checkbox"/>				
Demonstrates confidence or comfort with the counseling process.	<input type="checkbox"/>				
Demonstrates group facilitation skills.	<input type="checkbox"/>				
Demonstrates effective attending skills and relationship building overall.	<input type="checkbox"/>				
A. Effective non-verbal communication—body language, tone of voice, facial expressions, eye-contact.	<input type="checkbox"/>				
B. Creates appropriate structure—setting and maintaining appropriate boundaries, time limits.	<input type="checkbox"/>				
C. Attends to the client, demonstrates interest, and uses active listening skills to follow the client with understanding in all aspects of communication.	<input type="checkbox"/>				
D. Nonjudgmental attitude—respect, warmth, empathy, congruent verbal and nonverbal language.	<input type="checkbox"/>				
E. Self-disclosure—does not impose own values on the client, does not lecture, moralize, or give advice in sessions to clients.	<input type="checkbox"/>				
F. Observations and use of silence—counselor pays attention to verbal and nonverbal cues of client. interactions between counselor and client. and allows	<input type="checkbox"/>				
G. Transitions in session—opening, closing are smooth, effortless; uses timing effectively in session; terminates clients successfully	<input type="checkbox"/>				
Demonstrates effective information gathering, questioning skills, case conceptualization, and counseling plans overall.	<input type="checkbox"/>				
A. Appropriate use of open and closed-ended questions.	<input type="checkbox"/>				
B. Vocabulary—appropriate developmentally, culturally.	<input type="checkbox"/>				
C. Assessment—able to identify client issues, themes, diagnosis, and is able to use and interpret assessment data.	<input type="checkbox"/>				
D. Assess threats of harm to self or others appropriately.	<input type="checkbox"/>				
E. Counseling plans—agreed upon goals, effective treatment plans, use research and theory to formulate, culturally appropriate, measureable outcomes for goals.	<input type="checkbox"/>				
F. Individualizes intervention strategies for each client taking into account the client's culture	<input type="checkbox"/>				
G. Case notes—clearly written, follow agency policy, timely-manner	<input type="checkbox"/>				
Demonstrates empathetic skills overall.	<input type="checkbox"/>				
A. Reflection of Content—paraphrase essence of what client stated	<input type="checkbox"/>				
B. Reflection of Context—understanding the uniqueness or underlying meanings; ability to help client explore to gain deeper understanding.	<input type="checkbox"/>				
C. Reflection of Feeling—explicit and implicit.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
D. Summarizing—integrate and reflect content, thoughts, feelings, and meaning.	<input type="checkbox"/>				
E. Genuineness and intentional in responses.	<input type="checkbox"/>				
<b>Professional and Classroom Responsibilities &amp; Professionalism</b>					
Appropriately utilizes agency resources, as well as respects and follows the agency's policies and procedures.	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				
Demonstrates emotional stability, good judgement, and acts in a mature manner at the site.	<input type="checkbox"/>				
Demonstrates professional attitude with clients, peers, colleagues, staff, and supervisor(s).	<input type="checkbox"/>				
Learns quickly and demonstrates flexibility, imagination, resourcefulness, and problem-solving abilities.	<input type="checkbox"/>				
Is reliable and dependable to the site, site supervisor, the university group, and faculty	<input type="checkbox"/>				
Maintains appropriate personal appearance and dress code for the agency.	<input type="checkbox"/>				
Maintains client confidentiality when working with individuals, couples, families, and groups.	<input type="checkbox"/>				
Engages in positive working relationship with staff.	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
Communicates in an open, clear, comfortable, and professional manner.	<input type="checkbox"/>				
Advocates for policies, programs, and/or services that are equitable and responsive to the unique needs of clients seeking assistance.	<input type="checkbox"/>				
Applies knowledge of public mental health and rehabilitation policies and regulatory processes to improve service delivery opportunities in rehabilitation counseling.	<input type="checkbox"/>				
Understands and follows the course syllabus and the Practicum and Internship Handbook.	<input type="checkbox"/>				
Student is on-time, prepared for class, and contributes to the group in a meaningful manner.	<input type="checkbox"/>				
Weekly clinical logs and clinical experience logs are typed, free from error, signed by self and site supervisor, and turned in on time.	<input type="checkbox"/>				
Reflection papers meet course requirements and address the topic in a thorough and thoughtful manner. APA guidelines followed.	<input type="checkbox"/>				
Case presentation meets course requirements. Video/audio is prepped at the beginning of class. Appropriate handouts are made for peers. Confidentiality guidelines are followed.	<input type="checkbox"/>				
Student can conduct a thorough analysis of a clinical session through transcription utilizing insightful and critical commentary, identification of skills, and rephrasing of original	<input type="checkbox"/>				
Student can analyze and conceptualize a client's case and connect the case to the student's chosen theory and apply the theory to fully understand the case and develop	<input type="checkbox"/>				
<b>CACREP Clinical Rehabilitation Counseling Contextual Dimensions Standards</b>					
Roles and settings of rehabilitation counselors.	<input type="checkbox"/>				
Relationships between clinical rehabilitation counselors and medical and allied health professionals, including interdisciplinary treatment teams.	<input type="checkbox"/>				
Rehabilitation service delivery systems, including housing, independent living, case management, public benefits programs, educational programs, and public/proprietary vocational rehabilitation programs.	<input type="checkbox"/>				
Rehabilitation counseling services within the continuum of care, such as inpatient, outpatient, partial hospitalization and aftercare, and the rehabilitation counseling services networks.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
Operation of an emergency management system within rehabilitation agencies and in the community in relation to accommodating individuals with disabilities.	<input type="checkbox"/>				
Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).	<input type="checkbox"/>				
Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders.	<input type="checkbox"/>				
Impact of crisis and trauma on individuals with disabilities.	<input type="checkbox"/>				
Impact of biological and neurological mechanisms on disability.	<input type="checkbox"/>				
Effects of co-occurring disabilities on the client and family.	<input type="checkbox"/>				
Effects of discrimination, such as handicapism, ableism, and power, privilege, and oppression on clients' life and career development.	<input type="checkbox"/>				
Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation.	<input type="checkbox"/>				
Effects of the onset, progression, and expected duration of disability on clients' holistic functioning (i.e., physical, spiritual, sexual, vocational, social, relational, and recreational).	<input type="checkbox"/>				
Transferable skills, functional assessments, and work-related supports for achieving and maintaining meaningful employment for people with disabilities.	<input type="checkbox"/>				
Role of family, social networks, and community in the provision of services for and treatment of people with disabilities.	<input type="checkbox"/>				
Environmental, attitudinal, and individual barriers for people with disabilities.	<input type="checkbox"/>				
Assistive technology to reduce or eliminate barriers and functional limitations.	<input type="checkbox"/>				
Legislation and government policy relevant to rehabilitation counseling.	<input type="checkbox"/>				
Cultural factors relevant to rehabilitation counseling.	<input type="checkbox"/>				
Professional issues that affect rehabilitation counselors, including independent provider status, expert witness status, forensic rehabilitation, and access to and practice privileges within managed care systems.	<input type="checkbox"/>				
Record keeping, third party reimbursement, and other practice and management issues in rehabilitation counseling.	<input type="checkbox"/>				
Professional organizations, preparation standards, and credentials relevant to the practice of clinical rehabilitation counseling.	<input type="checkbox"/>				
Legal and ethical considerations specific to clinical rehabilitation counseling.	<input type="checkbox"/>				
Medical, functional, and environmental aspects of disability—medical terminology and diagnosis; knowledge of physical, psychiatric, cognitive, sensory, and developmental disabilities; assistive technology; environmental implications for disability; classification and evaluation of function.	<input type="checkbox"/>				
Rehabilitation services, case management, and related services—vocational rehabilitation; caseload management; independent living; school-to-work transitions; disability management; forensic rehabilitation and vocational expert practices; substance abuse treatment; psychiatric rehabilitation; wellness and illness prevention; community resources; service coordination; life care planning; insurance programs and social security; programs	<input type="checkbox"/>				
<b>Supervision, Self-Evaluation, &amp; Constructive Feedback</b>					
Demonstrates self-awareness related to one's strengths, challenges, worldviews, values, and biases, and how they impact work with clients.	<input type="checkbox"/>				
Is on-time for supervision meetings and completes tasks assigned by site supervisor in a timely manner	<input type="checkbox"/>				
Demonstrates openness to professional opinion of site supervisor overall.	<input type="checkbox"/>				
A. Professionalism and Preparation for supervision—readiness as evidenced by having an agenda for supervision and having prepared a submission of tapes, paperwork, and evaluations to discuss.	<input type="checkbox"/>				
B. Use of feedback—counselor is open to feedback, seeks feedback, and is willing to implement suggestions.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
C. Conceptualization—counselor can analyze and conceptualize the client using a theory and developing appropriate goals and convey that information in	<input type="checkbox"/>				
D. Vulnerability—demonstrates willingness to share with supervisor counselor’s own reactions about clients, supervision, and factors that may influence counseling	<input type="checkbox"/>				
Student is open to constructive feedback, critique, and suggestions from peers and faculty supervisor, and implements feedback into practice.	<input type="checkbox"/>				
Student provides appropriate constructive feedback, critique, and suggestions to peers and faculty supervisor.	<input type="checkbox"/>				
Demonstrates willingness to share with faculty supervisor and/or group supervision, one’s own reactions about clients, supervisors, and factors that influence counseling	<input type="checkbox"/>				
Student has awareness and self-reflection skills which include a narrative and insightful critical analysis of skills, dynamics of sessions, countertransference issues, and overall	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
<b>Summary</b>					
A. Overall performance of counselor.	<input type="checkbox"/>				
B. Potential as a rehabilitation counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT’S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

Student Signature		Date	



Department of Clinical Rehabilitation & Counseling

FINAL EVALUATION  
STUDENT EVALUATION BY FACULTY SUPERVISOR

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course: (circle)</b>	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
<b>Clinical Skills</b>					
Student demonstrates confidence or comfort with the counseling process.	<input type="checkbox"/>				
Can identify and discuss a primary counseling theoretical orientation and be able to conceptualize clients through such lens.	<input type="checkbox"/>				
Demonstrated the ability to understand clients' worldview as evidenced by attending skills and accurate reflections.	<input type="checkbox"/>				
Attending skills and relationship building skills are demonstrated: non-verbal, active listening, respect, empathy, nonjudgmental attitude, authenticity, congruent, cultural competency, observations, use of silence, open/closing session, reflecting, paraphrasing, and minimal	<input type="checkbox"/>				
Information gathering and questioning skills are demonstrated: closed vs. open ended questions, appropriate vocabulary, assessment skills, identify themes, formulate diagnostic impressions,	<input type="checkbox"/>				
Demonstrates effective communication skills including setting appropriate boundaries, understanding content and context, responding to feelings, establishing empathy, and being	<input type="checkbox"/>				
Demonstrates empathetic skills—reflection of feeling, summarizing, genuineness and intentional in responses.	<input type="checkbox"/>				
<b>Professionalism &amp; Classroom Responsibilities</b>					
Understands and follows the course syllabus and the Practicum and Internship Handbook.	<input type="checkbox"/>				
Student is on-time, prepared for class, and contributes to the group in a meaningful manner.	<input type="checkbox"/>				
Weekly clinical logs and clinical experience logs are typed, free from error, signed by self and site supervisor, and turned in on time.	<input type="checkbox"/>				
Reflection papers meet course requirements and address the topic in a thorough and thoughtful manner. APA guidelines followed.	<input type="checkbox"/>				
Case presentation meets course requirements. Video/audio is prepped at the beginning of class. Appropriate handouts are made for peers. Confidentiality guidelines are followed.	<input type="checkbox"/>				
Demonstrates cultural competencies and is aware of diversity as related to clinical relationships.	<input type="checkbox"/>				
Advocates for professional needs in an appropriate manner and demonstrates a desire to professionally develop as a counselor.	<input type="checkbox"/>				
Demonstrates knowledge of ethical standards, and implements ethical decision making and resolution procedures when needed (such as consultation, evidenced-based research, etc.).	<input type="checkbox"/>				
Student can conduct a thorough analysis of a clinical session through transcription utilizing insightful and critical commentary, identification of skills, and rephrasing of original counselor	<input type="checkbox"/>				
Student can analyze and conceptualize a client's case and connect the case to the student's chosen theory and apply the theory to fully understand the case and develop appropriate client	<input type="checkbox"/>				
Demonstrates emotional stability, good judgement, and acts in a mature manner at the site.	<input type="checkbox"/>				
Demonstrates professional attitude with clients, peers, colleagues, staff, and supervisor(s).	<input type="checkbox"/>				
Learns quickly and demonstrates flexibility, imagination, resourcefulness, and problem-solving	<input type="checkbox"/>				
Is reliable and dependable to the university group and the faculty supervisor.	<input type="checkbox"/>				
Maintains appropriate personal appearance and dress code for the classroom.	<input type="checkbox"/>				

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
Maintains client confidentiality and adheres to minimal disclosure.	<input type="checkbox"/>				
<b>Constructive Feedback &amp; Self-Evaluation</b>					
Student is open to constructive feedback, critique, and suggestions from peers and faculty supervisor, and implements feedback into practice.	<input type="checkbox"/>				
Student provides appropriate constructive feedback, critique, and suggestions to peers and faculty supervisor.	<input type="checkbox"/>				
Demonstrates willingness to share with faculty supervisor and/or group supervision, one's own reactions about clients, supervisors, and factors that influence counseling effectiveness.	<input type="checkbox"/>				
Demonstrates awareness of one's strengths, challenges, worldview, values, and biases, and how they impact working with clients.	<input type="checkbox"/>				
Student has awareness and self-reflection skills which include a narrative and insightful critical analysis of skills, dynamics of sessions, countertransference issues, and overall clinical approach.	<input type="checkbox"/>				
Recognizes own competencies and skills and shares them with peers and supervisors.	<input type="checkbox"/>				
Recognizes own deficiencies and works to overcome them.	<input type="checkbox"/>				
<b>Supervision</b>					
Is on-time for supervision meetings and completes tasks assigned by faculty supervisor in a timely	<input type="checkbox"/>				
Demonstrates openness to professional opinion of site supervisor overall.	<input type="checkbox"/>				
E. Professionalism and Preparation for supervision—readiness as evidenced by having an agenda for supervision and having prepared a submission of tapes, paperwork, and	<input type="checkbox"/>				
F. Use of feedback—counselor is open to feedback, seeks feedback, and is willing to implement suggestions.	<input type="checkbox"/>				
G. Conceptualization—counselor can analyze and conceptualize the client using a theory and developing appropriate goals and convey that information in supervision.	<input type="checkbox"/>				
H. Vulnerability—demonstrates willingness to share with supervisor counselor's own reactions about clients, supervision, and factors that may influence counseling	<input type="checkbox"/>				
<b>Summary</b>					
C. Overall performance of counselor.	<input type="checkbox"/>				
D. Potential as a rehabilitation or clinical mental health counselor.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST OBSERVATIONS OF STUDENT'S STRENGTHS:

PLEASE LIST AREAS OF OPPORTUNITIES FOR STUDENT TO FURTHER DEVELOP AS A CLINICIAN:

**Verification of Review**

By signing this form, you confirm that you have discussed this review in detail with your site supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.

Student Signature		Date	
Faculty Supervisor Signature		Date	



Department of Clinical Rehabilitation & Counseling

**FINAL EVALUATION  
STUDENT EVALUATION OF FACULTY SUPERVISOR**

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course:</b> (circle)	Practicum    Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
My supervisor explained his/her role as a supervisor and made me feel at ease with the supervisory process.	<input type="checkbox"/>				
My supervisor gave me feedback about my role as a clinician that was accurate and that I could use in practice.	<input type="checkbox"/>				
My supervisor reviewed my mid-term and final evaluations with me in supervision and we discussed areas of strength and areas of opportunity.	<input type="checkbox"/>				
My supervisor was approachable and helped me to clarify issues (client, professional, etc.) that I had on-site.	<input type="checkbox"/>				
My supervisor encouraged and supported me in developing my counseling theory and discovering techniques to implement with clients.	<input type="checkbox"/>				
My supervisor demonstrated and modeled appropriate professional and counseling techniques.	<input type="checkbox"/>				
Supervision with my faculty supervisor challenged me appropriately and helped me to grow personally and professionally.	<input type="checkbox"/>				
My supervisor was genuine, congruent, empathetic, and honest.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST STRENGTHS OF FACULTY SUPERVISOR AND/OR GROUP/INDIVIDUAL UNIVERSITY SUPERVISION:

PLEASE LIST AREAS OF OPPORTUNITIES FOR THE FACULTY SUPERVISOR AND/OR GROUP/INDIVIDUAL UNIVERSITY SUPERVISION:

Student Signature		Date	
-------------------	--	------	--



Department of Clinical Rehabilitation & Counseling

**FINAL EVALUATION  
STUDENT EVALUATION OF SITE & SITE SUPERVISOR**

**Student Information**

<b>Name &amp; Date:</b>		<b>Semester:</b>	
<b>Site Name:</b>		<b>Course:</b> (circle)	Practicum Internship I Internship II
<b>Site Supervisor:</b>		<b>Faculty Supervisor:</b>	

**Ratings**

	0 = Not evident	1 = Below-level	2 = At-level	3 = Exceeds	N – No opportunity to observe
My supervisor explained his/her role as a supervisor and made me feel at ease with the supervisory process.	<input type="checkbox"/>				
My supervisor gave me feedback about my role as a clinician that was accurate and that I could use in practice.	<input type="checkbox"/>				
My supervisor reviewed my mid-term and final evaluations with me in supervision and we discussed areas of strength and areas of opportunity.	<input type="checkbox"/>				
My supervisor was approachable and helped me to clarify issues (client, professional, etc.) that I had on-site.	<input type="checkbox"/>				
My supervisor encouraged and supported me in developing my counseling theory and discovering techniques to implement with clients.	<input type="checkbox"/>				
My supervisor demonstrated and modeled appropriate professional and counseling techniques.	<input type="checkbox"/>				
Supervision with my site supervisor challenged me appropriately and helped me to grow personally and professionally.	<input type="checkbox"/>				
My supervisor was genuine, congruent, empathetic, and honest.	<input type="checkbox"/>				
The site provided relevant experiences related to my career and counseling goals, as well as opportunities to fulfill fieldwork requirements.	<input type="checkbox"/>				
The site provided administrative support and appropriate support by site supervisor and other clinicians.	<input type="checkbox"/>				
The site provided me with a variety of opportunities related to counseling skills and techniques.	<input type="checkbox"/>				
The site provided accessible office space for counseling interns.	<input type="checkbox"/>				

**Evaluation**

PLEASE COMMENT ON ANY OF THE ABOVE, ESPECIALLY AREAS NOT ABLE TO OBSERVE OR AREAS WITH A 0 OR 1 RATING:

PLEASE LIST A MINIMUM OF 3 STRENGTHS OF THE SITE:

PLEASE LIST A MINIMUM OF 3 AREAS OF OPPORTUNITIES FOR THE SITE TO BETTER SUPPORT STUDENTS:

Student Signature		Date	
-------------------	--	------	--



## Tips for Success

**T**o promote a successful fieldwork experience, the following guidelines are recommended for students and supervisors.

### Students

In addition to developing clinical competencies, an important part of the fieldwork experience is the development of professional behaviors. The following qualities have been determined essential to the position of counselors-in-training and reflect the expectations for acceptable performance.

1. Responsibility - demonstrates independent initiative and readily assumes responsibility; demonstrates consistent dependability and reliability in fulfilling responsibilities; is conscientious in meeting responsibilities, demonstrating attention to routine responsibilities.
  - a) Ask questions when in doubt after researching, unless urgent.
  - b) Be punctual and prepared.
  - c) Recognize and act on personal responsibility for learning during the fieldwork experience (e.g., finding answers to questions, providing feedback to supervisor, utilizing opportunities for observational learning experiences, i.e., other therapists, disciplines).
  - d) Take initiative.
2. Organizational Skills - is punctual in fulfilling responsibilities and requirements of the position, including adhering to schedules, meeting deadlines, etc.
3. Flexibility - effectively adjusts to changes in schedules, policies, and procedures; is able to adjust priorities according to needs of the clients, program, department, and others.
  - a) Develop an attitude of flexibility - expect changes to occur.
  - b) Utilize time effectively.
  - c) Help out and offer assistance to others.
4. Interpersonal Skills - is able to establish effective interpersonal relationships with clients and their families, supervisors, staff members, students, and members of other disciplines; is sensitive to and considerate of others; is able to work and relate effectively with a wide range of diagnoses and disabilities (clients), socioeconomic, age, and ethnic groups (clients, their families, and other personnel).
  - a) Maintain professional relationship with supervisor and others.
  - b) Regard feedback as a learning tool.
  - c) Be aware of how your behavior affects others.
  - d) Consider timing of questions (e.g., when approaching staff).

- e) Respect personal space and time of others.
- f) Explore situations before responding - make informed interpretations and decisions.

5. Communication Skills - shows effective, appropriate (timing content, and method) communication with intra- and extra-departmental personnel at all levels; oral and written professional communication should reflect the standards established for the department; communication at all levels should be appropriate in timing, open and direct; important for staff to independently initiate communication whenever the need and to maintain consistent feedback to appropriate personnel; discretion and confidentiality; open lines of communication should be maintained with the chief occupational therapist and supervisor at all times.

- a) Expect and respect differences in professional opinions. Open-mindedness allows opportunity to explore different theories and techniques of management.
- b) Be aware of nonverbal behavior, tone of voice, etc., and the effect these can have upon your relationships with others.
- c) Take time to organize your thoughts and make notes before reporting or contacting others.
- d) Follow established guidelines and documentation standards for note writing.

6. Concern for Professional Development - is receptive to guidance and regards constructive feedback as a learning tool; actively assesses, recognizes, and expresses personal needs for further professional development; demonstrates interest and actively participates in continuing education activities; is willing to share professional knowledge and experience with others.

- a) Assume responsibility for learning.
- b) Be resourceful in finding answers to your questions.
- c) Actively seek learning experiences.
- d) Realize that as a counselor-in-training you have valuable information and experiences to share with others. Be willing to share information.

7. Problem-Solving Abilities - demonstrates effective problem-solving skills in approach to client treatment, and overall functioning within department; readily identifies and communicates problems impacting upon client care and department functioning to appropriate individuals; maintains an open, objective attitude in assessing and confronting problem situations; appropriately acts upon decisions and maintains communication and effective follow-up and feedback.

- a) Be resourceful. Use common sense and think things through before asking someone else for the answer.
- b) Utilize resources to help find answers to questions and suggestions for client treatment.
- c) Utilize student manual.
- d) Recognize and act on need to contact other disciplines.
- e) Make yourself aware of material resources available at your site.

8. Remember that you are a representative of the department and the profession.

Through personal demonstration of professional attitudes and appearance, support and contribute to the professional image of the department.

## Supervisors

Anderson (1988) discussed three types of supervision. The three types, by their nature, require students to progressively function at an increasingly higher level. Note: Some beginning students may be able to function at higher levels, at least with some clients. Clinicians should be encouraged to function at as high a level as possible, but not expected to function at a higher level than their experience can support.

### **Direct Active Style of Supervision.**

Stated very simplistically, this style involves an exchange in which the supervisor tells the student what to do and the student does it; the supervisor then provides feedback on student performance, gives another directive and the cycle repeats. This style is appropriate when time constraints and/or quality of client care demands it. This style is very time-efficient; however, it does not promote independent thought on the part of the clinician and, therefore, is not the best for higher-level students.

**Collaborative Style of Supervision**

This style places more responsibility on the clinician for independent thought. The clinician is expected to come to supervisor/clinician meetings having already done problem-solving and ready to make suggestions concerning client care. The supervisor may need to ask questions that lead the clinician to think in the right direction; however, considerable opportunity is provided for the student to state his/her thoughts before the supervisor discusses relevant factors in the situation.

**Consultative Style of Supervision**

In this style, the clinician and supervisor relate more as colleagues. The clinician is responsible for problem-solving and decision-making “as if” he/she were a licensed and certified professional. The supervisor, as much as is reasonable, refrains from intervening in order to see if the clinician will recognize those situations in which he/she needs to consult.

**LSUHSC Department of Clinical Rehabilitation & Counseling  
Practicum (REHAB 6641), Internship (REHAB 6643), & Internship II (REHAB 6645)**

**P/I Manual Acknowledgement Statement and Informed Consent:**

The Clinical Rehabilitation and Counseling Program at Louisiana State University Health Sciences—New Orleans is charged with the task of preparing individuals to become clinical rehabilitation counselors and/or clinical mental health counselors in a variety of settings and to assume positions of leadership in the field. In order to fulfill these responsibilities, faculty and supervisors continuously evaluate students based on their academic abilities, clinical skills, and professional competence. Additionally, student progress in the program may be interrupted for failure to comply with ethical standards, or when interpersonal or professional competence interferes with education and training requirements for self or others. In order to ensure proper training and client care, a P/I student must be able to demonstrate professional character, the ability to communicate well and convey warmth, genuineness, respect, and empathy in interactions with others, including clients, classmates, staff, and faculty. Counseling students are expected to be able to demonstrate the ability to accept and integrate feedback, be aware of their impact on others, accept personal responsibility for their actions, express emotions appropriately, resolve conflicts, and demonstrate professional judgement in decision-making. As a counselor-in-training in the LSUHSC—New Orleans Clinical Rehabilitation and Counseling Program, I am required to acknowledge my participation by affirming the following statements:

1. I have read through and consent to comply with all policies and procedures as outlined in this *Practicum & Internship Handbook*.
2. I understand that it is my responsibility to seek advising from the placement coordinator and/or my faculty supervisor should an issue or question arise with regard to my ability or commitment to comply with the policies and procedures stated herein.
3. I agree to abide by the professional ethical codes and state/ federal laws and will practice my counseling in accordance with these standards. Any breach of these ethics or any unethical behavior on my part will result in my removal from P/I, a failing grade, and documentation of such behavior will become part of my permanent record.
4. I agree to adhere to the administrative policies, rules, standards, and practices of the P/I site and the university.
5. I understand that I am responsible for keeping my P/I supervisor(s) informed regarding my P/I experiences.
6. I agree to participate in the ongoing evaluations, including self-evaluations, as described in the manual.

My signature below indicates that I have read and thoroughly understand the Practicum and Internship Handbook and I agree to abide by the stated standards.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date