Lewis & Clark College Professional Mental Health Counseling Program MHC 549

Clinical Reasoning: Theory and Research to Practice Syllabus Cover Sheet and Syllabus

Required Objectives:

<u>Professional Identity Standards (CACREP 2009 Standards)</u>

- 1e. counseling supervision models, practices, and processes;
- 2d. individual, couple, family, group, and community strategies for working with and advocating for diverse populations, including multicultural competencies;
- 5d. counseling theories that provide the student with models to conceptualize client presentation and that help the student select appropriate counseling interventions. Students will be exposed to models of counseling that are consistent with current professional research and practice in the field so they begin to develop a personal model of counseling;

<u>Clinical Mental Health Standards (CACREP 2009 Standards)</u>

- A2. Understands ethical and legal considerations specifically related to the practice of clinical mental health counseling. (2001-A4)
- A5. Understands a variety of models and theories related to clinical mental health counseling, including the methods, models, and principles of clinical supervision.
- C7. Knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.
- D2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.
- F3. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.
- G1. Knows the principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans.
- H2. Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management.
- J1. Applies relevant research findings to inform the practice of clinical mental health counseling.
- J2. Develops measurable outcomes for clinical mental health counseling programs, interventions, and treatments.

Key Required Assignments/Student Learning Outcomes

These assignments are required for the course, but <u>will not be the only requirements/expectations</u>. The chart below lists the assignment, method of submission, and benchmark score/grade. These assignments are set up for upload to Taskstream and/or instructor provides rating for assignment. See syllabus for details.

Theory and Research into Practice		Proficient (A)	Benchmark (B)	Emerging (C)	Inadequate /Fail	As evidenced by:	Evaluation and Remediation
Goal 5 of 6							
Able to gather client data, conceptualiz e and develop a treatment plan	Practicum	Gathers data, creates conceptualizati on, and plans treatment to match conceptualizati on with clear objectives to meet goals Score 3 on all	Gathers data, creates conceptualiza tion, and plans treatment to match conceptualiza tion) Score 2 on both	Insufficient at one or more of: gathering data, creating conceptualiz ation, or writing treatment plans to match conceptualiz ation:		MHC: 549 Final tx plan OR MHC A580 Client tx plan AND Practicum evaluation Items 31,34	Assessment Chair Review/Refer ral to BRC or ARC

Professional Identity		Proficient (A)	Benchmark (B)	Emerging (C)	Inadequat e/Fail		Review and Remediation
Goal 3 of 6							
Demonstrates understanding of philosophy of mental health counseling	Practicum		Writes theoretical orientation summary		Fails to complete assignme nt	Theoretical	Assessment Chair Review/Referr al to BRC or ARC

Research and Assessment		Proficient (A)	Benchmark (B)	Emerging (C)	Inadequate/ Fail	As evidenced by:	Review and Remediation
Goal 5 of 7							
Develops and Utilizes measureable outcomes with clients supported by research literature	Practicum Year	Develops measureabl e outcomes/g oals, supported by the literature and within the therapists theoretical orientation	Develops measureabl e outcomes/g oals supported by literature.	Outcomes/ goals are not measureab le and/or are not supported by literature	Unable to develop a tx plan	MHC549 or MHCA582 Treatment Plan 2	Assessment Chair Review/Refe rral to BRC or ARC

Lewis and Clark College Graduate School of Education Department of Counseling Psychology

CPSY 549: Clinical Reasoning: Theory and Research to Practice
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Readings:

Required:

Ingram, B. L. (2011). *Clinical Case Formulations: Matching the Integrative Treatment Plan to the Client* (2nd ed.). Wiley.

American Psychiatric Association (2000). Diagnostic and statistical manual of mental disorders (Fifth Edition). Washington, DC: Author.

Articles/Chapters posted on Moodle as assigned. (See weekly schedule)

Catalog Description:

This course assists students in developing critical thinking, case conceptualization, and treatment planning skills. As a co-requisite to Practicum II, students develop their abilities to gather data, conceptualize from their emerging theoretical perspectives, and plan treatment. Uses as ecological, social justice framework to view the client in context, apply evidence based practice with cultural sensitivity, and plan interventions across multiple systems (individual, family, and community).

Course Requirements:

READINGS: Complete assigned readings ON TIME and be prepared to ask questions, discuss material, and APPLY the material during in-class assigned work.

Treatment Plans: Students will be required to turn in complete case conceptualizations and treatment plans for two to three (2-3) clients seen in Practicum. Case conceptualization/treatment plan will consist of a 1-2 page intake summary (single space), conceptualization (one paragraph-ish), and treatment plan with 3 long term goals, and objectives for each goal.

Text provides detailed outline, also see documents on Moodle page. <u>Include bibliography of literature reviewed to develop treatment plan, minimum 3 books or peer reviewed articles.</u> These must be from <u>published books or peer reviewed journals</u>. <u>If you choose to use a website, you must also use the form and instructions listed on Moodle to evaluate the website.</u>

Treatment plan one (1) will be revised and resubmitted after feedback. Treatment plan two (2) will be revised and resubmitted after feedback *IF NEEDED*. A third treatment plan will be assigned if competence is not demonstrated with completion of two plans. Failure to demonstrate skills on the third treatment plan will result in course failure. Competence is defined as a minimum of 120 pts on the final treatment plan (80%). See Ingram (2010) Appendix 1 page 314 for detailed evaluation list.

Theoretical Orientation: Write a one to two paragraph summary of your theoretical orientation (one page max, prefer one small paragraph). Think about how you will describe yourself in an internship or job interview.

Attendance: No more than one absence is acceptable. More than one absence may lead to a failure to complete requirements for credit.

LATE ASSIGNMENT POLICY: Late assignments will lose 5% per week they are late. This applies to all of the above expectations.

Grading: Final course grade is made up of total points earned, with a minimum requirement of 80% or above on the final treatment plan. Total points are calculated to determine final grade. However, the final (2nd or 3rd treatment plan) must demonstrate competence for a passing grade in the course.

<u>Points</u>

Treatment Plan Scoring Each plan: 25 pts summary, 25 points conceptualization, 25 pts problem/goal statements 25 pts treatment plan, 25 points conceptualization/treatment plan link, 25 points bibliography)

Final Treatment Plan (2nd or 3rd): 150

Theoretical Orientation Summary 10

Total Points: 160

A = 90-100%

B = 80-89%

F= 79% or below

Students are expected to complete work at an acceptable level of performance to demonstrate competence to perform the tasks required in a treatment setting.

PARTICIPATION IN THE LEARNING COMMUNITY

Students are required to attend and actively participate in all scheduled class meetings. This includes being on time, being prepared, following through on group projects, and otherwise engaging with colleagues as fellow professionals. Becoming a counselor/therapist involves looking closely at ourselves, our values, beliefs, and biases. This can be a very personal, and sometimes emotional, process. Treating colleagues with respect, listening deeply to their experiences, and being open to diverse world views encourages a collaborative milieu of care in which we can all challenge ourselves and each other to critically examine and develop our skills and perspectives. In order to prepare for each class, students should carefully read and study all assigned materials to be ready to discuss and apply the content of readings. Class discussion and interaction with colleagues are fundamental to the process of learning to be a therapist and all sessions include necessary information. Therefore, if you must miss a class, fellow students and the instructor may ask you to contribute to learning community in another way. If you must be absent or late, please email the instructor at least several hours prior to class.

Students with Disabilities

The Student Support Services Office, located in the Templeton Student Center, is a resource for students with disabilities. A variety of services are available through this office according to the particular needs of each student. Students interested in such services may contact Student Support Services at 503-768-

7191. This contact is the necessary first step for receiving appropriate accommodations and support services. Please inform me if you need accommodations in class.

Schedule and Readings are posted in Moodle, please check weekly. Be prepared each week with the following:

Class 2: November 11: Written case summary, List of 5-10 Problem and Goal statements

Class 3 November 18: Case Formulation/Treatment Plan 1 Draft due in class,

Final first draft due my office or clinic Friday Nov 20, 9:00 a.m. Treatment plan 1 returned to you by Nov 25, 5pm

Class 4: Dec 2: Revision of Treatment Plan 1 Due, upload to Taskstream – scan first draft with my comments and upload, also upload your revision – 2 documents, Due Written case summary, problem list for Treatment Plan 2,

Class 5: Dec 9: Treatment Plan 2 Draft Due, Theoretical Orientation Summary due

No Class: Dec 11, 9 a.m. Treatment plan 2 Due, upload to Taskstream

December 14-18: Treatment plan 2 returned to you for revision if needed.

Third plan TBD on individual student basis