

**Lewis & Clark College Professional Mental Health Counseling Program**  
**MHC 549 Clinical Reasoning: Theory and Research to Practice**  
**Syllabus Cover Sheet**

Required Objectives:

Professional Identity Standards (CACREP 2009 Standards)

- 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;

Clinical Mental Health Standards (CACREP 2009 Standards)

- 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 **will not be the only requirements/expectations**. 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
<b>Goal 5 of 6</b>							
Able to gather client data, conceptualize and develop a treatment plan	Practicum	Gathers data, creates conceptualization, and plans treatment to match conceptualization with clear objectives to meet goals Score 3 on all	Gathers data, creates conceptualization, and plans treatment to match conceptualization (Score 2 on both)	Insufficient at one or more of: gathering data, creating conceptualization, or writing treatment plans to match conceptualization:		MHC: 549 Final tx plan OR MHC A580 Client tx plan AND Practicum evaluation Items 31,34	Assessment Chair Review/Referral to BRC or ARC

Professional Identity		Proficient (A)	Benchmark (B)	Emerging (C)	Inadequate/Fail	As evidenced by:	Review and Remediation
<b>Goal 3 of 6</b>							
Demonstrates understanding of philosophy of mental health counseling	Practicum		Writes theoretical orientation summary		Fails to complete assignment	MHC 549/MHCA 580 Theoretical orientation summary	Assessment Chair Review/Referral to BRC or ARC

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

**MHC 549: Clinical Reasoning: Theory and Research to Practice—Spring 2016**

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*Please email me to make appointments for office hours! If I have no appointments scheduled during office hours, I may schedule meetings or other appointments during those times.*

**Readings:**

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 an 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:**

**Class attendance** is expected and required. Any missed class time will be made up by completing extra assignments designed by the instructor. Missing more than ten percent of class time may result in failure to complete the class. This would be 4.5 hours of a 45 hour class (3 credits), 3.0 hours for a 30 hour class (2 credits) or 1.5 hours for a 15 hour class (1 credit.) In case of extreme hardship and also at the discretion of the instructor, a grade of incomplete may be given for an assignment or the entire course. In such cases, the work to be submitted in order to remove the incomplete must be documented appropriately and stated deadlines met. Students are expected to be on time to class and tardiness may be seen as an absence that requires make-up work.

**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, detailed, evidence-based case conceptualizations and treatment plans for 2-3 clients seen in Practicum. Your course text provides a detailed outline of how to write this level of treatment plan. You also must include a bibliography of literature reviewed to develop treatment plan as well with a minimum of three books or peer reviewed articles for each treatment plan.

Case conceptualization/treatment plan will consist of:

- 1-2 page intake summary (single space)
- conceptualization (one paragraph-ish)
- treatment plan with 3 long term goals
- objectives for each goal
- at least 3 references that support your plan (book or peer-reviewed articles)

Treatment Plan One will be revised and must be resubmitted one week after you receive feedback. Treatment Plan Two will be revised and resubmitted after feedback *IF NEEDED* one week after receiving feedback. 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.

**Late Assignments:** You have one week to resubmit treatment plans after receiving them with feedback. Treatment plans resubmitted longer than one week will receive 10 points per day off of the total score.

However, if you do not have at least two clients assigned to you in your practicum, you will be allowed to submit only the first treatment plan and to submit the subsequent treatment plan when you are assigned another client (up to the last day of the semester). These late assignments will be allowed up to the last day of the semester, but again, you will have one week to resubmit the treatment plan (if needed) after receiving feedback. If you resubmit the treatment plan after one week, you will receive 10 points a day off of your score for each late assignment.

*Note: If you have a disability that may impact your academic performance, you may request accommodations by submitting documentation to the Student Support Services Office in the Albany Quadrangle (x7156). After you have submitted documentation and filled out paperwork there for the current semester requesting accommodations, staff in that office will notify me of the accommodations for which you are eligible.*

### **Grading:**

Treatment Plan Scoring:

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 (2<sup>nd</sup> or 3<sup>rd</sup>): 150

Theoretical Orientation Summary 10

Total Points: 160

A = 94-100%

A- = 90-93%

B+ = 87-89%

B = 84-86%

B- = 80-83%

Students scoring below a B- must repeat the course. Students are expected to complete work at an acceptable level of performance to demonstrate competence to perform the tasks required in a treatment setting.

### **Professional Qualities:**

All students must adhere to the ethical standards and the professional qualities of the profession and as indicated by the Professional Qualities Evaluation indicated in the PMHC Handbook.

**Tentative Schedule (Check Moodle for Readings and changes):** Be prepared each week with the following:

Class 1 (February 1): Introductions, Work on Theoretical Orientation Draft, Divide into Theory Groups, Discuss Problem List

Class 2 (February 8): Theoretical Orientation Summary Due, Bring Written Case Summary to class, Bring possible list of 5-10 Problem and Objective Goal statements to work on in class

Class 3 (February 15): Case Formulation/Treatment Plan 1 Draft due in class,

Class 4 (February 22): Revision of Treatment Plan 1 Due, upload to Moodle and to Taskstream -upload first draft with my comments, also upload your revision - 2 documents, Due Written case summary, problem list for Treatment Plan 2,

Class 5 (February 29): Treatment Plan 2 Draft Due

Treatment plan 2 Due (upload to Taskstream when checked off)

March-April: Treatment plan 2 returned to you for revision if needed.

April 29<sup>th</sup>: Last day to upload Treatment Plan #2 to Taskstream

Third plan TBD on individual student basis