## Lewis & Clark College Professional Mental Health Counseling & Professional Mental Health Counseling – Specialization in Addictions MHC 549 Treatment Planning Syllabus Cover Sheet

**Required Objectives:** 

## Professional Counseling Identity (CACREP 2016 Standards)

5a. theories and models of counseling

5h. developmentally relevant counseling treatment or intervention plans

5i. development of measurable outcomes for clients

5n. processes for aiding students in developing a personal model of counseling

8d. development of outcome measures for counseling programs

Entry-Level Specialty: Clinical Mental Health Counseling (CACREP 2016 Standards)

C1b. theories and models related to clinical mental health counseling

C1c. principles, models and documentation formats of biopsychosocial case conceptualization and treatment planning

C2I. legal and ethical considerations specific to clinical mental health counseling

C2d. 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)

C3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management

## Key Required Assignments/Student Learning Outcomes

These assignments are required for the course, but <u>will not be the only</u>

<u>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, conceptualize 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 conceptualizat ion, and plans treatment to match conceptualizat ion) 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	As evidenced by:	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	MHC 549/MHCA 580 Theoretical orientation summary	Assessment Chair Review/Referr al to BRC or ARC

Research and Assessment		Proficient (A)	Benchmark (B)	Emerging (C)	Inadequate/F ail	As evidenced by:	Review and Remediation
Goal 5 of 7						5	
Develops and Utilizes measureable outcomes with clients supported by research literature	Practicum Year	Develops measureable outcomes/go als, supported by the literature and within the therapists theoretical orientation	Develops measureable outcomes/go als supported by literature.	Outcomes/ goals are not measureabl e and/or are not supported by literature	Unable to develop a tx plan	MHC549 or MHCA58 2 Treatment Plan 2	Assessment Chair Review/Refe rral to BRC or ARC

## Lewis & Clark Graduate School of Education and Counseling

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#### MHC 549: Treatment Planning

**FALL 2019** 

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## **REQUIRED TEXTS**

Ingram, B. L. (2011). *Clinical case formulations: Matching the integrative treatment plan to the client.* (2<sup>nd</sup> ed.). Wiley: New Jersey.

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders (5<sup>th</sup> ed.)*. American Psychiatric Association: Washington, DC.

American Counseling Association (2014). ACA Code of Ethics. Alexandria, VA.

#### **COURSE 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. Students will learn how to use 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).

## **OBJECTIVES (ALSO REFER TO COVER SHEET)**

The student will:

- 1. Demonstrate ability to gather client data, diagnose, conceptualize and develop treatment plan.
- 2. Demonstrate the ability to develop measurable outcomes with clients supported by research literature and best practices.
- 3. Demonstrate ability to provide clear and concise clinical writing.

#### **CPSY DEPARTMENT ATTENDANCE POLICY**

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 (i.e., 1.5 hours for a 15 hour class; 1 credit) may result in failure to complete the class. 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.

#### WORKSHOP SESSIONS

Workshops are meeting times with a few students (2-4 students) and the instructor to get more in depth questions and feedback pertaining to your treatment plans. Students will sign up for an available time to meet with the instructor. Please come prepared for this meeting (client file, draft(s) of treatment plans) and be ready to work. The use of peer support is also used to help encourage greater reflection and to problem solve challenges in the current treatment plan formulation.

#### ADDITIONAL REQUIRED AND RECOMMENDED READINGS

Additional articles, chapters, and other materials will be used during the course. These materials will be made available electronically or via hard copy handout(s) throughout the semester.

#### **Required Readings:**

- Adams, N., & Grieder, D. M. (2014). Treatment planning for person-centered care: Shared decision making for whole health (2<sup>nd</sup> ed.). Academic Press: California. Chapter 3: Understanding needs: The integrating summary.
- Greenleaf, A. T., & Williams, J. M. (2009). Supporting social justice advocacy: A paradigm shift towards an ecological perspective. *Journal of Social Action in Counseling and Psychology, 2,* 1-14.
- Harrel, S. P., (2000). A multidimensional conceptualization of racism-related stress: Implications for the wellbeing of people of color. *American Journal of Orthopsychiatry*, 70, 42-57.
- Hays, P. (1996). Addressing the complexities of culture and gender in counseling. *Journal of Counseling & Development, 74,* 332-338.
- Leah, R. L., Holland, S. J. F., & McGinn, L. K. (2012). Treatment plans and interventions for depression and anxiety disorders (2<sup>nd</sup> Edition). Chapter 2: Depression. New York: Guilford.
- Maruish, M. E. (2002). *Essentials of treatment planning. Chapter 5: Developing a treatment plan.* New York: John Wiley & Sons.
- Scott, J., Boylan, J. C., & Jungers, C. M. (2015). Practicum and internship textbook and resource guide for counseling and psychotherapy (5<sup>th</sup> edition). Chapter 4: Assessment and case conceptualization. Chapter 5: Goal setting, treatment planning, and treatment modalities. New York: Routledge.

#### **EVALUATION**

## Treatment Plans (150 points each x 2 = 300 points)

Students will be required to submit complete case conceptualizations and treatment plans for 2 clients seen in Practicum. You will find the format for the treatment plans on Moodle. Case conceptualization & treatment plan write ups will consist of:

- Intake Summary
- Conceptualization
- Treatment Plan

Due Dates for Case Conceptualization & Treatment Plans

- Plan I (10/28)
- Plan II (12/2)

## Confidentiality & Ethics

This course assignment is utilizing client information from your experience as a practicum trainee at the Lewis & Clark Community Counseling Center. For this reason, all case conceptualization/treatment plans will be turned into a designated folder in a counseling center's secure workroom. Additionally, students are required to de-identify client information in the write-up for added protection of confidentiality. All treatment plan work should only be stored on the clinic server or your Ironkey. When printing, you should do so in a secure location, never send a document to a computer lab printer when you are not immediately present to pick it up. No treatment plans should have identifying information on them. Use initials or pseudonyms for client names, and be general when describing details that could identify someone.

## Theoretical Orientation Paper (20 points)

Counselors ability to formulate coherent treatment plans must also have a coherent theoretical framework from which the treatment plans are formed. In this paper you will extrapolate on what your theoretical orientation as (to date), how you understand how problems emerge in peoples lives, what are the obstacles to change, and what role you play as a counselor in the change process. This paper is to be a brief primer that sets the stage in case conceptualizations done in the treatment plans. DUE: 10/28 with the first treatment plan.

#### SUMMARY OF POINTS

Treatment Plan I	150 points
Treatment Plan II	150 points
T. O. Paper	20 points
TOTAL	320 points

#### LATE ASSIGNMENT POLICY

Assignments will lose 5% per week they are late. This applies to all of the above expectations.

## **COURSE GRADING SCALE**

 $90-100\% = A \quad 80-89\% = B \quad 70-79\% = C \leq 69\% = F$ 

COURS	COURSE STRUCTURE AND SCHEDULE						
Week	CACREP	Course Topic	Readings				
	Standards						
9/23	5a	Introduction	<ul> <li>Chapters 1-3</li> </ul>				
	5h	-Gathering, Organizing & Presenting	<ul> <li>Hays</li> </ul>				
	c1b	Client Data	-				
	c1c	-Conducting Intake Interviews					
	c2l	-Exploring the Biopsychsocial Model					
	c3a	-Threading					
		Data $\rightarrow$ Theory $\rightarrow$ Intervention					
10/7	5h	Defining Problems/Concerns &	<ul> <li>Adams et al Chapter 3</li> </ul>				
,	c2l	Targets of Treatment	<ul> <li>Maruish Chapter 5</li> </ul>				
	c3a	-Articulating client	<ul> <li>Scott et al Chapter 4</li> </ul>				
		problems/issues/concerns					
		-Setting Treatment Goals					
		-Creating Measurable Goals					
		-Understanding and Articulating					
		Objectives					
		-Connecting Interventions back to					
		Problem					
11/04	5h	Case Conceptualization &	-Chapters 4 -7				
	c2l	Choosing Treatments	-Harrel				
	c3a	-Integrating Data into a Coherent	-Scott et al Chapter 5				
		Conceptualization	-Greenleaf & Williams				
		-Developing Clinical Intentionality	-Leah				
		-Client Collaboration					
	5h	Workshops					
	5i	-Come prepared with drafts of					
	c3a	Treatment Plan 2					
		-Work through improvements					