

MARQUETTE UNIVERSITY

**DEPARTMENT OF
COUNSELOR EDUCATION AND COUNSELING
PSYCHOLOGY**

**HANDBOOK FOR
COUNSELING PSYCHOLOGY PRACTICUM:
COPS 8965**

A Handbook for Students, Faculty, and Supervisors

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Overview of the Counseling Psychology Ph.D. Program

The Counseling Psychology Ph.D. (COPS) program at Marquette University offers training in the scientific discipline of psychology and in counseling psychology as an area of professional specialization. It is based on an integrated scientist-practitioner approach to training professional psychologists, which emphasizes both scientific inquiry and professional practice. In this approach, the science and practice of health service psychology are viewed as complementary and interdependent, where each informs the other in a synergistic manner. This model was developed from the Boulder Conference on clinical psychology training in 1949 and was subsequently endorsed by Div. 17, Counseling Psychology, of the American Psychological Association (APA) in 1954. The program is broadly based on the Model Training Program in Counseling Psychology that was developed by the Joint Writing Committee of the Council of Counseling Psychology Training Programs (CCPTP) and Division 17, Counseling Psychology, of the American Psychological Association (1998).

The program is accredited by the Commission on Accreditation of the American Psychological Association [Questions related to the program's accredited status should be directed to the Commission on Accreditation, Office of Program Consultation and Accreditation, American Psychological Association, 750 1st Street, NE, Washington, DC 20002; 202/336-5979; apaaccred@apa.org]. The Counseling Psychology Program is a member of the Council of Counseling Psychology Training Programs (CCPTP).

In our program, students acquire a solid foundation of knowledge in the biological, cognitive-affective, cultural, individual, social, and developmental bases of human behavior. Through course work in research design, measurement, statistics, and program evaluation, students develop the skills needed to critically evaluate the research of others, as well as independently conduct their own research. Training in human development, psychopathology, assessment, psychotherapy, consultation, supervision, and ethics, along with practica and internship experiences, provide students the necessary counseling skills to practice as competent and ethical entry-level professional psychologists.

Our program is designed to be comprehensive and developmental. We use a scientist-practitioner model, which includes broad preparation in the diverse areas needed to practice competently as psychological scientists and practitioners in today's health care systems. The training also involves a sequential program of cumulative learning experiences that are graded in complexity. The program is designed to maximize students' preparation for obtaining quality pre-doctoral internships and postdoctoral positions, and seeking psychology licensure. We believe that this model provides the best training for advancing students toward an array of rewarding career goals in colleges and universities, hospitals and health care organizations, university counseling centers, public and private clinics, community agencies, correctional facilities, and other types of institutions.

Our program also emphasizes training in the specialization of counseling psychology. Historically, this specialty has emphasized two perspectives, the first of which involves an emphasis on normal growth and development, improving individuals' quality of life, and focusing on individuals' strengths and resources as opposed to psychological deficits and problems. Donald Super, one of the pioneers in Counseling Psychology, noted that "Counseling Psychologists tend to look for what is right and how to help use it." The ability to diagnose and treat psychopathology is an essential skill in our graduates, but our program also emphasizes the assessment of strengths and resources, as well as the development of resource-focused interventions designed to maximize the healthy and optimal functioning of individuals and groups. In fact, we consider it an ethical obligation to focus on strengths and resources in addition to deficits and problems when conducting assessments and designing treatment plans for clients. Minimizing either one may result in an incomplete conceptualization that is likely to result in less effective interventions and potentially deleterious effects.

Counseling psychology historically has also emphasized understanding individuals in their sociocultural context. Earlier in our history, educational and occupational contexts were emphasized, while more recently individual and cultural diversity have received a great deal of attention. Our program takes a biopsychosocial approach to understanding human behavior and is based on the view that a comprehensive approach such as this results in the most complete understanding of human development and functioning. We believe that a sensitivity to biological, psychological, social, cultural, developmental, and environmental influences on behavior increases students' effectiveness both as practitioners and researchers, as well as the additional roles in which they are likely to engage (e.g., instructor, trainer, supervisor, consultant).

Our Counseling Psychology program at Marquette also exists within the context of the Jesuit educational tradition. This includes assisting students to develop a care and respect for self and others consistent with the Jesuit tradition of *cura personalis* (care for the whole person) and service to others. This tradition emphasizes a care for the whole person and the greater community, which we believe is also consistent with the history and emphasis of counseling psychology. This mission is also consistent with the basic orientation of the Marquette University College of Education, which emphasizes developing in students an interest in and care for knowledge, for one's profession, and for the persons one serves as a professional.

Counseling Psychology Practicum Overview

Our practitioner training is based upon a sequential-developmental model that, in-line with our overall training model, provides a program of cumulative learning experiences. Although the COPS Program does not subscribe to a particular model of supervision, the overarching approach is developmental in nature. That is, students progress from beginning stages of development (initial practica) through advanced practicum and into the pre-doctoral internship, gaining the corresponding requisite knowledge, skills, and dispositions.

Students are assessed throughout their early coursework in regard to "readiness to begin practicum." Once students are approved to enroll in practicum, they gain counseling experience in a variety of community-based sites including university counseling centers, community mental health centers, hospitals, correctional institutions, and schools. Upon completion of their practicum training, students are prepared to begin their predoctoral internship.

Prerequisite Courses/Evaluations for COPS 8965 Counseling Psychology Practicum

All students must complete a minimum of 100 hours of masters-level practicum and 600 hours of masters-level counseling internship (COUN 6965 and COUN 6986 or the equivalent for practicum and internship) prior to beginning COPS 8965.

For full-time post-baccalaureate students, COUN 6965 usually begins in the first year, second semester after completing COUN 6000, and then COUN 6986 usually begins in the second year after they have completed the prerequisite coursework. Students must also take COUN 6120, Group Counseling; and COUN 6040, Multicultural Counseling, either prior to or concurrently with COUN 6986 (i.e., these three courses must be taken before beginning COUN 6986 or during either one of the required two semesters of COUN 6986.)

Evaluation of Readiness to Begin Doctoral-level Practicum:

Students who have completed COUN 6986 within the department or the equivalent of COUN 6986 outside of our department with a grade of "B" or higher are deemed ready to begin doctoral-level practicum.

Note. Practicum sites may require that specific courses be completed prior to beginning the Counseling Psychology Practicum at their particular site. Students should verify prerequisites with prospective site supervisors.

Courses that are likely to be prerequisites for certain sites (particularly testing sites)

COPS 8210 Cognitive Assessment
COPS 8220 Personality Assessment

REQUEST FOR EXCEPTIONS TO PREREQUISITES TO BEGIN PRACTICUM MUST BE MADE IN WRITING AND SUBMITTED TO THE COPS DIRECTOR OF TRAINING FOR REVIEW AND APPROVAL.

Students are required to complete a minimum of 1000 clock hours of Counseling Psychology Practicum (COPS 8965). The standard semester of COPS 8965 practicum is about 300 hours in length (i.e., 20 hours per week times 15 weeks in a semester), so this ordinarily requires a minimum of 4 semesters of COPS 8965* (see below for variable hours options). We recognize that 300 hours/semester for 4 semesters of doctoral practicum = 1200 hours. We encourage students to seek to complete about 300 hours/semester to ensure that they meet the minimum thresholds recommended for internship applications.

The COUN 6986 course (or its equivalent; 600 hours) focuses primarily on intake and intervention skills, while the following four semesters of Counseling Psychology Practicum (COPS 8965) add psychological evaluation responsibilities and more specialized training. Each semester of practicum is supervised by a licensed psychologist and includes a developmentally-oriented curriculum that focuses on increasingly advanced topics as students progress through their clinical training. Emphasis is also placed on obtaining exposure to a variety of client populations and settings so that students are broadly prepared to begin professional practice. A focus on ethics training is also integrated in one of the four required practicum semesters.

Students are evaluated for approval to begin practicum and the pre-doctoral internship by the advisor and the Director of Training (DOT), and both also monitor students' performance in practicum. All practicum and internship placements must be approved by the advisor and DOT before students can begin a placement. All faculty participate in the Annual Student Evaluation each spring (see section on "Student Evaluation" below), which includes practicum-related activities. Before students are allowed to begin practicum, they must also complete the State of Wisconsin caregiver background check requirement, which is typically completed when starting the program. See the *Practicum Handbook* for details on the requirements of this law and how the department handles findings that emerge from the background check. All students must also pass the Internship Readiness Examination before they may apply for the predoctoral internship.

Applying for Practicum

Selection of potential practicum sites is the joint responsibility of the student, the advisor, and the COPS DOT.

Procedures:

- ❑ Meet with your advisor to determine the type of practicum experience you wish to have (also consult with fellow students, Director of Training, etc.):
 - further development in an area of prior experience or interest
 - introductory exposure to a new area of interest
 - exposure to an area where a deficiency exists

- ❑ Review practicum announcements that the Director of Training sends to all doctoral students in the Fall and early Spring.
- ❑ Familiarize yourself with the list of approved practicum sites found on the department's website.
- ❑ Contact sites for information regarding the organization and training opportunities.
- ❑ Contact students who completed practicum at your sites of interest.
- ❑ Decide on a site(s) that meets your professional goals.
- ❑ Prepare for interview at your selected site(s).
 - Prepare your curriculum vitae (CV) and present to site interviewer.
 - Make sure that potential site supervisor has a hard copy of the practicum handbook or has access to the handbook via our website.
 - Present the "Supervision Agreement" to your potential supervisor (Appendix A)
 - Approach the site interview in a professional manner, essentially treating this interview as you would a job interview.
- ❑ Follow-up with site within two weeks of interview.
- ❑ Notify COPS Director of Training (via e-mail) as soon as site is secured. Site is secured when:
 - "Supervision Agreement" is signed by all parties. (Original copy held by CECP)
 - Clinical Affiliation Agreement is signed by all parties (if not already in place).
 - "Consent of Director of Training"* will be granted when the site is secured.

*Consent may be revoked at any time due to various factors including, but not limited to, unsatisfactory completion of prerequisites, student impairment, etc.
- ❑ Register for COPS 8965 Class.
- ❑ Background Check:
 - In accordance with the State of Wisconsin "Caregiver" law, all practicum students must have a criminal background check completed by the MU Public Safety Department.
 - All incoming students will receive a background check form at orientation and be required to complete it. The department pays the fee for the WI background check, but other states may assess fees for which the student will be responsible--see WI website url listed below). Each student needs to complete a "Background Information Disclosure Form." If a student has lived in states other than Wisconsin, we must perform a criminal background check for all states lived in during the past three years (while over 18 years of age).
 - State of Wisconsin website for Caregiver Background Checks:
<http://www.dhfs.state.wi.us/caregiver/index.htm>
- ❑ TB, X-ray, other tests and vaccinations:
 - ❑ Some practicum sites, especially health facilities, may require these for placement.
- ❑ Liability Insurance.
 - Though students' liability insurance is covered by Marquette University under the guidelines put forth in the clinical affiliation agreement, students should seriously consider Individual Professional Liability Insurance. This type of insurance can be obtained through APA student membership and is very reasonably priced.

Counseling Psychology Practicum Requirements

Classes. Attend all practicum class sessions. Actively participate in all group supervision, discussions of issues, and case reviews. Classroom hours are included in the total practicum hours. Additionally, hours leading Multicultural Counseling Small Dialogue Groups or Introduction to Counseling skills groups can count as hours as well.

Colloquia. All COPS 8965 students are required to attend all CECP Colloquia. Topics and schedules will be announced annually.

Variable hours.

The program allows some flexibility regarding when students take practicum and the types of practica they take. These options allow for such experiences as:

- 10-hour testing practicum
- A lighter practicum load during heavier semesters (e.g., later in the program)
- A heavier practicum load during lighter semesters (e.g., when a class is not being offered; when applying for internship and trying to increase hours in a particular area).

All of these experiences must be approved by the Counseling Psychology DOT and must also be approved by the practicum site.

- Total practicum hours for the COPS program remain the same: A minimum of 1000 total Counseling Psychology Practicum hours (does **not** include the 100 hours for COUN 6965 and 600 hours of COUN 6986, or the equivalent). Depending on where students seek to do their internship, they may well seek to accrue more hours.
- For every 10 hours/week of practicum, students need a minimum of ½ hour per week of 1:1 supervision.
- Students can take a maximum of 2 semesters of 10-hour per week practicum to meet the minimum practicum hours for the program. Students may take more semesters of 10-hour per week practicum if they have met the minimum required hours for COPS 8965 (1000 hrs).
- Students may take a 10-hour per week practicum concurrently with a 20-hour per week practicum. Students will need an additional ½ hour of 1:1 supervision. These experiences can be at the same site or different sites. The class requirements remain the same as if in a 20-hour per week practicum only.
- Students may take a 10-hour per week practicum without another concurrent practicum, but students will still need to attend all required classes for all the entire class periods. Students would be expected to be on site for 8-9 hours per week.
- Regardless of hours level, students are expected to attend all the practicum classes for the entire class period.

Practicum Activities. (See Appendix E for definitions of practicum activities)

- **Direct Service** – Refers to face-to-face intervention and assessment experience. Students should only count the time spent in the presence of their client(s) in this category. This includes time spent in direct service (face to face) with clients while conducting individual/group/career/family/couples counseling sessions or assessments. Time spent scoring

and/or report writing, *should not* be included in this category. These types of activities fall under "Support Activities" and should be recorded in their appropriate categories under this heading.

In order to complete their program Counseling Psychology Practicum requirements, students must complete a minimum of 8 integrated psychological assessment reports (such a report includes a history, an interview, and at least two tests from one or more of the following categories: personality assessments [objective and/or projective], intellectual assessment, cognitive assessment, and/or neuropsychological assessment; these are synthesized into a comprehensive report providing an overall picture of the client; adapted from APPIC website), 4 of which must be completed prior to **applying** for internship. These reports may be completed across several practicum sites or at a single site. For example, students could complete all of their assessments and accompanying reports in a single assessment practicum, or the assessments and reports could be more evenly distributed across a number of different practicum experiences. Students must give serious consideration to the type of internship they seek as to whether additional assessment experiences (beyond their required 8 in the program) are warranted. Many internship sites, for instance, expect students to have completed far more than 8 such assessments. The APPIC directory provides information regarding internship sites' expectations for assessments. Upon completion of each assessment report, students should place them into their portfolio. These assessments are in addition to the standard intake procedures. The scope and type of assessments are defined by the site supervisor and should be commensurate with the level of training of the practicum student. Assessments will be reviewed, critiqued, and signed by site supervisors. One copy of each report must be submitted for inclusion in the student's department file; evidence of satisfactory completion of all 8 reports must be included in the student's portfolio.

Minimum Level of Achievement for an Integrative Psychological Report. During the course of the four semesters of practicum class, students must receive a minimal level of achievement (MLA) rating on at least one of your integrative psychological reports. Receiving a satisfactory MLA rating involves achieving an "adequately addressed" rating on each of the six rubric rating categories in the Integrative Psychological Reports Rubric (see Appendix J).

Required number of hours of direct service. Direct service hours need to be between 20% and 35% of the total practicum hours for each semester. Per the newly adopted Council of Counseling Psychology Training Programs Expectations for Internship Eligibility (see Appendix I), trainees are required to have completed "at least 450 face-to-face, program-sanctioned, verified graduate practicum hours of assessment/intervention that includes evidence-based practice and at least 150 hours of supervision by a licensed psychologist or other mental health professional (as appropriate for the jurisdiction). Supervision was delivered according to accepted individual or group models and included observation of the trainee's work" (CCPTP, February 2013). Most of our students take more than the required four semesters of doctoral practicum, and thus these target percentages will still hold. Students who complete only the four semesters of required doctoral practica, however, must adjust these percentages so that they indeed accrue at least 450 face-to-face hours and 150 supervision hours. Hours accrued in Field Placement (i.e., after the required semesters of doctoral practica have been completed) do count toward the 450/150 hours required for internship eligibility.

Support Activities Hours. Support activities hours include time spent gathering information about the client but not in the actual presence of the client (i.e., outside the counseling/therapy hour). Examples of such activities include: writing process/progress notes, reviewing charts, planning interventions, consulting with other professionals about a case, video/audiotape review etc.

Additional Experience Hours. This includes hours in formal consultation and primary

prevention services, such as outreach and psychoeducational activities. Examples include: conducting psychodiagnostic tests or neuropsychological assessments, intake interviews or structured interviews, conducting presentations, or program development or outcome assessments. Time spent attending practicum-related seminars or workshops, or department colloquiums, should also be included here. Also include time spent in your own professional development (i.e., further reading on relevant counseling issues).

Documentation of Practicum Activities/Hours.

Students are expected to maintain a daily hours log of completed activities related to practicum (e.g., client sessions, preparation for counseling, case documentation, preparation for supervision, supervision, administrative duties, etc.). Students should use Time2Track for their hours, as this is the program that is required for the AAPI when applying to internship. These logs must be reviewed and initialed by your site supervisor on a weekly basis. It is also recommended that you keep information regarding, age, race, diagnosis, and activities performed with individual clients.

Students are expected to submit a mid-semester and an end-of-semester summary of practicum hours. These summaries can be printed from Time 2 Track and must be signed by your site supervisor and submitted for retention in the department files. Students must also keep copies of these documents for their permanent personal files.

Field Placement Policy

Field Placement students (i.e., those engaging in clinical activities beyond the required semesters of doctoral practicum) are not required to register for or attend COPS practicum class (unless required for other reasons). They must instead register for Field Placement with the DOT; the DOT will be the instructor of record for the field placement experience.

Field Placement students must ensure that a clinical affiliation agreement is in place, and also a supervision agreement (i.e., students must be supervised in these activities). The university shall provide professional liability and general liability protection for students in approved field placements, as it does for its students in other clinical placements (unless a student is employed by the practicum site, in which case, the practicum site is responsible for providing such coverage). If a student is paid for providing mental health services during practicum/field placement, the student must inform the COPS Director of Training. Remuneration may require review of an affiliation agreement and may have tax or insurance coverage implications.

If students' employment (not related to practicum or field placement) involves the provision of mental health services, or if they are engaged in volunteer activities in which they provide mental health services, those hours can be noted on the internship application under the heading "Non-practicum Clinical Work Experience." These hours, however, are not considered approved practicum/field placement activities and thus would not count toward students' total intervention hours, total assessment hours, or total supervision hours on the internship application. Students in such circumstances need not enroll in COPS practicum or field placement, and these hours can never be considered practicum. In addition, such students are prohibited from describing their provision of these mental health services as part of their required program activities.

Field Placement Evaluation: Students must submit evaluations from their site supervisor at the mid- and endpoints of each semester to the COPS DOT. See Appendix C for the Mid-Semester evaluation and for the end of the semester evaluation, use the full supervisor evaluation in Appendix B. Students must also submit hours logs at mid-semester and end of semester.

Field Placement Concerns: If students encounter questions or concerns related to their clinical placement, they are to first consult with their site supervisor, followed by their advisor if the concern was not resolved. If questions or concerns remain, they should consult with the COPS DOT.

Curricular Practical Training (CPT) for International Students: International students on an F-1 or other visa should familiarize themselves with, and take responsibility for, all requirements related to maintaining their visa status. This information can be found through the Office of International Education. In particular, students need authorization in advance of practical training (e.g., practicum and internship). Curricular Practical Training (CPT) allows for off-campus employment (or an internship that is unpaid but earns credit) for a specific job or internship when the employment/internship is:

- a required part of the official curriculum which you have chosen to complete for your degree
- an integral part of the established curriculum such as the Engineering Co-op Program, an internship for your program listed in the bulletin, or the clinical phase of a health program
- offered by a sponsoring employer who has an agreement with the university to provide these educational experiences for Marquette students.

CPT authorization is not limited in duration, but a student who receives 12 months or more of full-time CPT authorization may not be eligible for Optional Practical Training (OPT) (see details at the [OIE website](#)). Marquette DSOs are authorized to grant permission for curricular practical training if the legal requirements are met. To apply for CPT, complete the application process that is explained on the [OIE website](#) and discuss your application with a DSO.

Recording Policy

Students are required to audio or video-record the majority of their sessions with clients and have these recordings available for use during individual supervision and in practicum courses. Clients must provide consent (or assent, if they are under 18 and their parents/guardians have provided consent) to being taped. The department has an *Informed Consent to Audio- and/or Video-Recording Counseling Sessions* form that must be completed by the practicum student/intern and signed by the client and supervisor before any recording can take place. Students must assure that the recordings are stored in a secure location and will not be shared with anyone outside the context of individual and group supervision. In cases where the agency has a separate recordings form, both the Marquette University and agency forms must be completed.

Practicum Sites

Clinical Affiliation Agreement. The CECP Director of Training will provide each practicum-site training director a Clinical Affiliation Agreement to be signed by the authorized site representative unless a signed agreement is already on file with CECP Department. The Clinical Affiliation Agreement must be signed by all parties prior to the student beginning the practicum.

Student Status.

During the practicum, the student should have a title such as "trainee," "practicum student," or similar designation of trainee status.

Students may receive a stipend from the practicum site for practicum placements, though this is not the norm and will require an adjustment of the clinical affiliation agreement.

Students may secure a practicum placement at a site where they are employed. However, because of potential concerns about multiple-relationships and competing demands, these placements are subject to

special review by the COPS DOT and the Marquette University General Counsel. In these situations, the training activities, including supervision, are subject to more explicit and rigorous guidelines, and adjustments in the Clinical Affiliation Agreement will be required.

Practicum Site Visits. During the practicum, the university supervisor will have at least two meetings with the student and the site supervisor:

Initial site visit. The initial site visit is used for orientation and verification/clarification of the supervisory agreement. This should be accomplished within two weeks of the beginning of practicum. At this visit, it must be verified that the site supervisor has been provided a copy of the course syllabus requirements, a copy of the practicum handbook, and evaluation forms to be completed at the end of each semester; the supervision agreement has been signed by all parties; and the Practicum Learning Agreement (PLA) has been reviewed and signed by all parties. In addition, it must be verified that the student has been provided a comprehensive orientation to the site, including but not limited to policies, philosophy, procedures, protocols, rules, and expectations.

Additional Visit. An additional site visit is typically conducted in the middle or towards the end of a student's placement. This visit is used as a forum for evaluation of the student, the practicum site, and the interface with the CECF Department.

Please note that in cases where students have more than one practicum site, one site may take priority for site visits.

Field Placement Site Visits. Sites visits are not typically conducted during field placement experiences, unless the student requests such a visit by the Director of Training. Typically, these site visits would be conducted in these instances because of a concern with the experience. For further information, students should contact the Director of Training.

Consultation with CECF Department. The university instructor, the COPS Director of Training, and Department Chair are available to both the student and site supervisor as needed. For example, students and supervisors may seek consultation for conflict resolution, concerns regarding inadequate performance, ethical dilemmas, and ways to improve training.

Termination of Student Placement. The practicum site may cancel, by notice in writing to the Department, the practicum or field placement of any student whose performance is unsatisfactory or whose personal characteristics prevent desirable relationships within the site. The site will provide the student and the CECF Department with written justification for the proposed cancellation of a placement. Prior to such cancellation, the site supervisor shall notify the COPS Director of Training and consult with the university supervisor about the proposed termination.

Supervision

Supervision of the practicum student is the joint responsibility of the university and the professional staff of the practicum site.

Supervisor Qualifications: The primary site supervisor must be a licensed psychologist [a maximum 2 semesters of practicum (including masters-level practicum/internship) may be under the site supervision of a licensed mental health professional other than a licensed psychologist. All supervisors must be approved by the DOT]. The site supervisor has the primary responsibility for providing the practicum student with direct 1:1 supervision on a regularly scheduled, weekly basis.

Amount of Individual Supervision: A minimum of 30 minutes per week of 1:1 supervision per 10 hours/week of practicum is required. For example, a 20-hour per week practicum requires 60 minutes per week of 1:1 supervision.

Group Supervision: Includes the time spent in COPS 8965 class focusing on discussion of specific client cases. (Note: COPS 8965 class hours not considered group supervision should be counted as didactic or training hours.). Group supervision at the practicum site is desirable, but not required. Group supervision CANNOT be substituted for the 1:1 supervision requirements.

Observation of sessions: Students are expected to review their sessions with their supervisor via audio-recording or video-recording in compliance with the CECP HIPAA Compliance Policy (See below). If students are precluded from recording sessions due to CECP HIPAA Compliance Policy or the agency policy, then it is expected that the site supervisor will provide in-person observation of a minimum of two sessions per semester. Observation of sessions can count as 1:1 supervision.

New Direct Observation Requirement (APA Standards of Accreditation): APA has adopted new Standards of Accreditation to replace the Guidelines and Principles. Much of these Standards echo the earlier G & P, but there are a few important changes. One of these is that **supervisors must directly observe supervisees performing clinical work.**

What this translates to in actual practice is the following:

- At least once per semester, site supervisors must directly observe our students' clinical work. If a student is at multiple different sites during the same semester, this direct observation must occur at each site.
- The observation can be live or via video-recording; audiotape alone does not meet this requirement.
- Until we hear otherwise, we are assuming that this requirement holds for our Practicum students (those who are completing the 4 required semesters of Practicum) and also for our Field Placement students (those who have completed the required 4 semesters but are still engaged in supervised clinical work).
- The evaluation form that supervisors complete does have an item to document the direct observation of our students.

Practicum Learning Agreement (PLA)

The PLA consists of the following elements and is composed by the student in consultation with the site supervisor:

- ◆ A narrative description (~2-3 typed pages) of perceived professional strengths and growth areas, addressing both intra- and interpersonal components. Include, as well, a statement of your intended future professional goals/practice area(s) and your developing theoretical orientation.
- ◆ A "learning plan" for the semester's practicum that documents learning goals (i.e., what do I want to learn through this practicum, what do I want to get out of this practicum, how do I want to be different as a counselor by the end of the practicum?), corresponding learning activities (what are the specific steps, activities, procedures, experiences that I need to pursue to meet these goals?) and objective/measurable outcome criteria (how will I objectively measure whether or not I meet these goals?). Remember that goals are to be small, concrete, specific, salient (to the student and the practicum site), and attainable.
- ◆ The initial Practicum Learning Agreement must be reviewed, approved, and signed by the student, the site supervisor, and finally by the university supervisor. The initial PLA should be completed within two weeks of the start of the first semester of practicum.

The Practicum Learning Agreement should be revised at the end of the semester. In the revised version, students need to address the degree to which they met their goals, and discuss what helped and hindered meeting them. Students need to discuss unmet goals and what measures will be taken to continue working on them in future practica experiences. Please also discuss current strengths and growth areas, and indicate additional goals for the next semester of practicum. Finally, describe any developments in your emerging theoretical orientation.

Evaluation of Practicum Students

- ◆ Final grades of either S, U, or I will be assigned by the university supervisor in consultation with the site supervisor. Evidence of a student's achievement level will be obtained through conversation with the onsite supervisors, evaluation of practicum performance documented on the supervisors' evaluation of extern form, and behavioral observations by the instructor.
- ◆ Ongoing evaluation of the practicum student must be conducted throughout the practicum. Students will be evaluated based on achievement in regard to the Course Outcomes (knowledge, dispositions, and performance), performance of assignments, growth in their counseling skill levels, and their overall professional growth over the course of the practicum. (Note: Field Placement evaluation is addressed on page 8 above, although these same general principles noted here also apply to field placements).
- ◆ Written evaluations of students will be completed by the site supervisors at mid-term and at the end of the semester. Students will provide site supervisors a copies of Appendix B and C for this purpose. Site supervisors need to review their evaluations with the students. Students and supervisors must sign the evaluation, indicating that the evaluation has been reviewed.
- ◆ Copies of the site supervisor's evaluations and the instructor's evaluation will be given to students, and copies will be placed in students' file, along with any statements students wish to provide regarding their performance in the practicum.
- ◆ Evaluation of Site and Supervision. Each semester students will complete an evaluation of the site and supervision. These evaluations will be turned into the practicum instructor and held in the CECF office. Evaluations will not be shared directly with site supervisors until the practicum placement is completed.
- ◆ In those cases where the student has not evidenced the minimum skill level and professional development to successfully advance to the next level of training, it will be recommended that the student repeat the course and/or abide by departmental directives in accordance with the Department's remediation procedures. Note that ethical and/or legal violations by a student may result in a failing grade for the course and possible dismissal from the program.

Minimal levels of achievement on doctoral practicum evaluations. Students are expected to achieve ratings of at least a "4" or higher for every item of the Practicum Student Evaluation Form by the final semester of practicum. Additionally, no rating can fall below a "2" rating during any semester of practicum. When a student's performance falls below this minimal level of achievement, the department adheres to the following policy:

1. On the Supervisor Evaluation of Student Form, which is completed at midterm and end-of-term for every semester in which a student is engaged in clinical activities, any item rated as a 1 (i.e., far below expectations, needs much improvement, a concern), will trigger a required meeting between the student, the site supervisor, the student's advisor, and possibly also the course instructor. The purpose of the meeting will be to explore the nature of the student's difficulty, and also to discuss what measures can be taken to aid the student's development in the area(s) in which s/he needs to improve.
2. If a student's performance repeatedly falls below minimally accepted thresholds (i.e., several "1 or 2" ratings), the student, the advisor, and the Director of Training are to address the

performance concerns in the annual self- and faculty evaluation. A pattern of such performance might also be cause for the institution of a remediation plan.

3. Similarly, if a student's performance falls below a "4" rating in their final semester of practicum, the student, advisor and Director of Training are to address the performance concerns and determine a plan for raising the student's performance. Such performance could result in a delay in the student's eligibility for internship or considered for dismissal from the program.

CECP HIPAA Compliance Policy

The Department requires all of its students and faculty involved in offering health care services and/or protected health information to familiarize themselves with the requirements of HIPAA (Health Insurance Portability and Accountability Act). This includes all full-time department staff and faculty and all students in counseling and counseling psychology. School counseling students and others whose primary work involves educational rather than health records also need to follow the requirements of FERPA (Family Educational Records and Privacy Act). They will need to be aware of HIPAA requirements, however, because they are likely to handle protected health information from various psychological and medical providers (e.g., school nurses; students' therapists, psychologists, and pediatricians) on a regular basis.

CECP Departmental HIPAA Requirements

1. Complying with agency policies for ensuring HIPAA compliance. The CECP Department does not offer health care services directly to the public because we do not maintain an in-house counseling clinic. Instead, we rely on departments and agencies in other units of the University or off campus for all of our field experiences and practicum training. When offering services to clients in these other departments and agencies, all faculty and students are required to familiarize themselves with and observe the requirements of those agencies with regard to HIPAA compliance.

2. Student work samples submitted for evaluation. We normally ask students who complete practicum and field experiences outside of the department to submit samples of their written clinical work to the faculty for evaluation and grading. All of these materials must be completely deidentified to protect the anonymity of the clients.

According to HIPAA, protected health information is deidentified if all of the following have been removed with regard to the individual client, her or his relatives, employers, or household members of the client (see Chpt. 165.514):

1. Names;
2. All geographic subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code if, according to the current publicly available data from the Bureau of the Census:
 - a. The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people; and
 - b. The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people are changed to 000.
3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of

dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older;

4. Telephone numbers;
5. Fax numbers;
6. Electronic mail addresses;
7. Social security numbers;
8. Medical record numbers;
9. Health plan beneficiary numbers;
10. Account numbers;
11. Certificate/license numbers;
12. Vehicle identifiers and serial numbers, including license plate numbers;
13. Device identifiers and serial numbers;
14. Web Universal Resource Locators (URLs);
15. Internet Protocol address numbers;
16. Biometric identifiers, including finger and voice prints;
17. Full face photographic images and any comparable images; and
18. Any other unique identifying number, characteristic, or code.

3. Video or audio recordings of students' clinical work. Students are required to audio and/or video-record most of their sessions with clients and have these recordings available for use during individual supervision and in practicum/internship courses. Clients must provide consent (or assent, if they are under 18 and their parents/guardians have provided consent) to being taped. The department has an *Informed Consent to Audio- and/or Video-Recording Counseling Sessions* form that must be completed by the practicum student/intern and signed by the client and supervisor before any recording can take place (see Practicum Handbook, Appendix H). Students must assure that the recordings are stored in a secure location and will not be shared with anyone outside the context of individual and group supervision. In cases where the agency has a separate recordings form, both the Marquette University and agency forms must be completed.

4. Supervision of students' clinical work. Our students' clinical work is always supervised by both an on-site supervisor(s) and a department faculty supervisor(s). As a result, students' adult clients must sign an authorization for the disclosure of their health information for the purposes of supervision, and parents or guardians of a minor client must provide such an authorization when the minor is not able to legally provide such an authorization him or herself (see the relevant Wisconsin administrative statutes). Agency forms for this purpose are usually sufficient, but students need to ensure that the informed consent forms that they use with clients note that they are being supervised by both an on-site supervisor and a University supervisor, that their on-site supervisors have access to the client's clinical records and are monitoring the progress of the case, and that the student also participates in a consultation and supervision team comprised of their supervisor(s) and other student counselors and therapists.

5. Emailing or FAXing information to faculty supervisors. When students consult with faculty supervisors regarding their clinical work, they may find it convenient to transmit related case information via email or FAX. Email transmissions are not secure unless they are well encrypted, however. Because the Department does not have the resources for handling encryption, email transmission of client records that are not deidentified to faculty supervisors is not permitted. Because of potential problems with the security of FAXed information (e.g., misdialled phone numbers, someone is not present at the receiver's FAX machine to receive the transmission at the time it occurs), students are also not allowed to FAX protected health information to faculty supervisors.

6. Disciplinary actions for noncompliance with this policy. HIPAA includes significant penalties for violations of its requirements (ranging from administrative actions to fines of up to \$250,000 and 10 years imprisonment). The University enforces compliance with HIPAA requirements for faculty and staff through its Human Resources policies. Student violations of HIPAA compliance requirements will be handled through the departmental policy on the Remediation and Dismissal of Students. Minor violations of these requirements will result in relatively minor disciplinary actions, while serious or multiple minor violations of these requirements can result in dismissal from the program.

APPENDIX A**AGREEMENT BETWEEN**

**DEPARTMENT of COUNSELOR EDUCATION AND COUNSELING PSYCHOLOGY (CECP) at
MARQUETTE UNIVERSITY**

AND**COOPERATING AGENCY:****Address****Telephone**

FOR THE CONDUCT OF A SUPERVISED COUNSELING PSYCHOLOGY PRACTICUM

The above-named agency agrees to provide the facilities, student work opportunity, instruction, and supervision necessary to properly conduct a counseling practicum experience for the student named below and according to the guidelines described in the Department of Counselor Education and Counseling Psychology Handbook for Counseling Practicum (COPS 8965) and the Clinical Affiliation Agreement.

***Please attach a copy of the Primary Supervisor's Vita and License/Certification**

Name of Practicum Student

Inclusive Dates of Practicum

Credits/Semester

Agency Director**Signature****Date**

Supervising Psychologist*Signature****Date**

Supervisor's Printed Name**Practicum Student****Signature****Date**

Director of Training**CECP Marquette University****Signature****Date**

APPENDIX B

PRACTICUM/FIELD PLACEMENT STUDENT EVALUATION FORM

DIRECTIONS: The supervisor completes this form both at midterm and at the end of each semester of practicum and field placement. The completed form is to be submitted by the student to the COPS 8965 Instructor (or DOT, in the case of Field Placement), who will submit it to the CECP office to be filed in the student's practicum file.

Please provide feedback about the performance the supervisee's core competencies important to health service psychology. Where possible, provide narrative comments to support your ratings.

Direct Observations: The Standards of Accreditation by the American Psychological Association (APA) require that supervisors directly observe the supervisee's clinical performance at least once each semester of practicum, although more observations are encouraged. This observation must be performed by the supervisor completing this form, who is legally responsible for clinical cases and the supervision of the student. This form will become part of the student's record for this course and will be used in assigning grades for the practicum.

Please answer each item using the scale provided. Space is provided for specific comments following each area of competency. There is also space at the end of this form for general comments. Please note: Most students would likely begin their first semester of practicum with ratings of a "2." In their final semester of practicum, students should achieve a rating of "4" which indicates they have achieved the "minimal level of achievement" (MLA) for all items that are able to be rated. Achieving this MLA rating is an indication that the student comprehends more complexity in clinical situations, is increasingly demonstrating independence of practice, and is thus ready for internship. See the rating scale below for details on rating evaluation items.

Thank you for your supervision of our student.

Student's Name: _____

Dates of Evaluation: From _____ to _____

Supervisor's Name and Credentials: _____

Practicum Site: _____

Number of directly observed student sessions [Supervisees must be directly observed at least once each semester; review of audio or video recordings is sufficient]:

____ No ____ Yes; please indicate the number of sessions observed: _____

Rating Code for Competency Items for Practicum Students in Training

NA. Not Applicable or not enough information to form a judgment

- 1** = Requires remediation (The student does not appear to fully understand the competency and they need specific remedial work before they are able to advance in this practicum setting).
- 2** = Continued intensive and close supervision is required (Supervision is routine, but intensive supervision is required for the student to be successful in this practicum setting).
- 3** = Requires routine supervision (Student meets the expectations of the professional activity although is learning about the complexity of clinical practice).
- 4** = Less routine supervision is necessary, and the student is demonstrating some independence of practice (Student exceeds expectations and is regularly seeing the complexity of clinical practice; depth of supervision varies as student learns to address and manage more complexity).
- 5** = Approaching independent professional practice (Student demonstrates competency and requires a minimal amount of supervision to be successful).

1. Professional Values, Attitudes, and Behaviors

- a. _____ Behaves in ways that reflect the values and attitudes of health service psychology
- b. _____ Engages in self-reflection to maintain and improve performance and professional effectiveness
- c. _____ Actively seeks and demonstrates openness and responsiveness to feedback and supervision
- d. _____ Appropriately implements supervisor feedback
- e. _____ Responds professionally to increasingly complex situations

Comment:

2. Communication and Interpersonal Skills

- a. _____ Develops and maintains effective relationships with a wide range of individuals (e.g., clients, colleagues, other professionals)
- b. _____ Produces and comprehends oral and written communications that are informative and well-integrated
- c. _____ Demonstrates effective interpersonal skills and the ability to manage difficult communications

Comment:

3. Ethical and Legal Standards

- a. _____ Acts in accordance with the APA Ethical Principles of Psychologists and the Code of Conduct
- b. _____ Acts in accordance with relevant laws, regulations, rules, and policies governing health service psychology
- c. _____ Acts in accordance with relevant professional standards and guidelines
- d. _____ Recognizes ethical dilemmas as they arise and applies ethical decision-making processes to resolve
- e. _____ Conducts self in an ethical manner in all professional activities

Comment:

4. Individual and Cultural Diversity

- a. _____ Acts with understanding of how her/his personal/cultural history, attitudes, and biases may affect her/his understanding and interaction with people different from her-/himself
- b. _____ Demonstrates knowledge of current theoretical and empirical knowledge as it relates to addressing diversity
- c. _____ Demonstrates the ability to integrate awareness and knowledge of individual and cultural differences in clinical work
- d. _____ Shows the ability to articulate an approach to working effectively with diverse individuals and groups

Comment:

5. Assessment

- a. _____ Uses current diagnostic classification systems and considers client strengths and psychopathology
- b. _____ Integrates an understanding of human behavior within its context (e.g., familial, cultural, social, societal)
- c. _____ Applies knowledge of functional and dysfunctional behavior to assessment and diagnostic processes
- d. _____ Selects and applies multiple assessment methods based on empirical literature and knowledge of psychometrics
- e. _____ Interprets assessment results following professional standards while guarding against decision-making bias
- f. _____ Orally communicates assessment findings and implications accurately and with sensitivity
- g. _____ Communicates in writing assessment findings and implications accurately and with sensitivity

Comment:

6. Intervention

- a. _____ Establishes and maintains effective relationships with recipients of psychological services
- b. _____ Develops evidence-based intervention plans specific to service delivery goals
- c. _____ Implements interventions informed by current research, assessment findings, diversity characteristics, and contextual variables
- d. _____ Applies relevant literature to clinical decision-making
- e. _____ Modifies and adapts evidence-based approaches effectively when clear evidence-base is lacking
- f. _____ Evaluates intervention effectiveness and adapts interventions goals and methods based on such evaluation

Comment:

7. Consultation and Interprofessional/Interdisciplinary Skills

- a. _____ Is knowledgeable and respectful of the roles and perspectives of other professions
- b. _____ Demonstrates knowledge of consultation models and practices

Comment:

8. Professional Behavior On-Site

- a. _____ Arrives on time consistently
- b. _____ Uses time effectively
- c. _____ Informs supervisor and makes arrangements for absences
- d. _____ Completes required total number of hours or days on site
- e. _____ Is responsive to site norms about clothing, language, etc.
- f. _____ Reliably and accurately keeps records in a timely manner

Comment:

Overall, what would you identify as this student's areas of strength?

What would you identify as areas in which this student should improve?

Would you recommend that this student be allowed to continue with practicum training? _____ No _____ Yes

Please explain:

Would you like the Director of Training to call you to with regard to this student? _____ No _____ Yes

If yes, please list your telephone number:

Supervisor's Signature/Printed Name: _____ Date: _____

Student's Signature**: _____ Date: _____

**Student's signature acknowledges that the student has reviewed the evaluation but does not necessarily indicate agreement with the evaluation.

APPENDIX C

MID-SEMESTER FIELD PLACEMENT STUDENT EVALUATION FORM

DIRECTIONS: The supervisor completes this form at midterm for field placement. The completed form is to be submitted by the student to the Director of Training who will submit it to the CECF office to be filed in the student's practicum file. Please note, we have simplified this mid-semester form. Since the student has already completed four semesters of practicum, we consider this student to be an advanced and working on advanced clinical skills, and we want to ensure they are continuing to positively progress in their development. When students are completing field placement experiences, they are seeking to gain additional clinical experience to ready themselves for internship application and to ensure their competitiveness for placement.

Please provide feedback about the performance the supervisee's core competencies important to health service psychology as noted below. The responses are predominately narrative, and they do not require numerical ratings.

Direct Observations: The Standards of Accreditation by the American Psychological Association (APA) require that supervisors directly observe the supervisee's clinical performance at least once each semester of field placement, although more observations are encouraged. This observation must be performed by the supervisor completing this form, who is legally responsible for clinical cases and the supervision of the student. This form will become part of the student's record for this course and will be used in assigning grades for the field placement.

Thank you for your supervision of our student.

Student's Name: _____

Dates of Evaluation: From _____ to _____

Supervisor's Name and Credentials: _____

Practicum Site: _____

Number of directly observed student sessions [Supervisees must be directly observed at least once each semester; review of audio or video recordings is sufficient]:

____ No ____ Yes; please indicate the number of sessions observed: _____

Please reference the following eight profession-wide competencies in the items noted below:

- A. Professional Values, Attitudes, and Behaviors
- B. Communication and Interpersonal Skills
- C. Ethical and Legal Standards
- D. Individual and Cultural Diversity
- E. Assessment
- F. Intervention
- G. Consultation and Interprofessional/Interdisciplinary Skills
- H. Professional Behavior On-Site

1. Based on the eight profession-wide competencies noted above, what would you identify as this student's areas of strength?

2. Based on the eight profession-wide competencies noted above, what areas should this student seek to improve?

3. Would you recommend that this student be allowed to continue with practicum training? ____No ____ Yes
Please explain:

4. Would you like the Director of Training to call you to with regard to this student? ____ No ____ Yes

If yes, please list your telephone number:

Supervisor's Signature/Printed Name: _____ Date: _____

Student's Signature**: _____ Date: _____

**Student's signature acknowledges that the student has reviewed the evaluation but does not necessarily indicate agreement with the evaluation.

APPENDIX D

**Marquette University
Department of Counseling and Educational Psychology
Practicum Student Evaluation of Practicum Site**

DIRECTIONS: The student completes this form both at midterm and at the end of the practicum/internship. This form should be turned in to the Director of Training, who will give it to the Department Secretary for use by future students interested in this site.

Name _____
Site _____

Site Supervisor _____ **Dates of Placement** _____

Rate the following questions about your site and experiences using the following scale:

A = Very satisfactory B = Moderately satisfactory C = Satisfactory	D = Moderately unsatisfactory E = Very unsatisfactory F = N/A – Not applicable
---	---

- ___ 1) Amount of on-site supervision
- ___ 2) Quality and usefulness of on-site supervision
- ___ 3) Usefulness and helpfulness of faculty liaison
- ___ 4) Relevance of experience to career goals
- ___ 5) Exposure to and communication of goals
- ___ 6) Exposure to and communication of agency procedures
- ___ 7) Exposure to professional roles and functions
- ___ 8) Exposure to information about community resources
- ___ 9) Rate all applicable experiences that you had at your site
 - ___ Report writing
 - ___ Intake interviewing
 - ___ Administration and interpretation of tests
 - ___ Staff presentations/case conferences
 - ___ Individual counseling
 - ___ Group counseling
 - ___ Family/couple counseling
 - ___ Consultation
 - ___ Career counseling
 - ___ Other
- 10) Overall evaluation of the sight

COMMENTS: On the other side of this sheet include any suggestions for improvements.

APPENDIX E

Documentation of Practicum Hours

I. Overview

- The following guidelines and definitions are drawn from the Association of Postdoctoral and Internship Centers (APPIC) www.appic.org.
- It is very important that all practicum hours are carefully documented. This is especially important for doctoral students, as they will need to provide detailed information concerning their hours when applying for internship. Masters students should also keep detailed practicum records as they may need these records for certification, licensure, or other professional reasons and in case they ever decide to go on to earn their doctoral degree. Hours accumulated while in a terminal master's program should be calculated separately. Ph.D. students admitted to the COPS program post-baccalaureate should document all of their practicum hours as doctoral level.
- When calculating practicum hours, you should do your best to provide an *exact* number of hours accumulated and the number of clients seen, though there will be times when your "best estimate" will be called for.
- Each activity should only be recorded in one section. You may have some experiences that could potentially fall under more than one category, but you must select the *one* category that you feel best captures the experience.
- Keep a separate time sheet for each semester of practicum work. For the few individuals who are at more than one practicum placement during one semester, each site's hours should be recorded separately. (i.e., if you are at Pathfinders *and* the Milwaukee VA during the fall of 2010, you should calculate your hours separately for each of the two sites).
- When calculating "Total hours face-to-face," count each hour of a group, family, or couples session as one practicum hour. For example, a two-hour group session with 12 adults is counted as two hours.
- Make sure to record the specific number and type of assessments administered to clients throughout the entire practicum experience. Also record the amount of time spent providing feedback to clients concerning the assessment results.
- Supervision is divided into one-to-one, group, and peer supervision/consultation. Supervision provided to less advanced students is considered "Supervision of Other Students" and does not fall into the supervision category. Group supervision is considered to be actual hours of group focus on specific cases. Many excellent practicum courses incorporate both didactic and experiential components in the course activity. While the didactic portion is excellent training, it should not be recorded as a supervision activity; it should instead be counted as a support activity. This may necessitate breaking the hours spent in a practicum course into intervention, supervision, and didactic activities by actual course hours. For example, if you present on the "Psychosocial Issues of HIV Infection" using examples of cases, it is a didactic activity. Similarly, Grand Rounds that consist of in-service education on specific topics would not be considered supervision for the purposes of documenting practicum hours, but would be considered a support activity.

Additionally, you should indicate the types of groups you have led or co-led, any experience with Managed Care Providers, and your experience with diverse populations.

II. Helpful Information on Correctly Coding Practicum Hours

- ❖ Class time is usually recorded as either group supervision, didactic training, or other support activities (such as how to record hours, program issues, etc.). For example, class time spent discussing a specific case should be recorded as Group Supervision, while time spent discussing how to formulate a generic treatment plan should be considered Didactic Training.
- ❖ Time spent at your practicum site involved in staff meetings should be divided up similarly to how class time is divided. Time spent presenting a case should be recorded as Group Supervision if your site supervisor is present.
- ❖ If you present a case at your site during a staff meeting, it should be recorded as Group Supervision if your supervisor is present.
- ❖ Readings related to practicum, including assigned practicum class readings, should be counted under Professional Reading.
- ❖ When you are listening to a case presentation in either practicum class or at your practicum site, it counts as Group Supervision.
- ❖ If your reading pertains to a specific client, it may fall under Treatment Planning if applicable. Otherwise, if it is for practicum class assignment or for general information, it should fall under Professional Reading.
- ❖ There is no such thing as consultation with your supervisor. All time spent discussing cases with your supervisor falls under the appropriate supervision category (i.e. 1:1 or group supervision, etc).
- ❖ You need to review your hours documentation at your weekly supervision session. Hard copies of hours need to be turned in at mid-term and end of term (cumulative for the entire semester).

III. Definitions

Assessment – A psychological instrument used to evaluate a client. Various types of assessments are intelligence assessments, such as the WAIS-IV; personality assessments, such as the MMPI-2; career assessments, such as the Strong Interest Inventory; structured assessments, such as the SCID; or AODA assessments, such as the ASI, etc. Make sure to record the specific assessments administered and the number of each administered. Also be sure to record if you scored the instrument, if you interpreted the instrument, if you incorporated it into a report, as well as the time spent giving feedback to a client on her/his assessment results. There are separate sections for each activity on the hours documentation sheet. This category includes any assessment experience, *excluding* practice administrations (for example, you should NOT count administrations that you gave to classmates in an assessment class).

Psychodiagnostic test administration - Include symptom assessment, projectives, personality, objective

measures, achievement, intelligence, and career assessment.

Neuropsychological Assessment - Include intellectual assessment in this category only when it was administered in the context of neuropsychological assessment.

Assessment Feedback – Time spent providing feedback to a client on the results/findings of a psychological test. This does not include time spent scoring, interpreting, or writing reports on the results of an assessment, but rather the actual face-to-face time spent discussing the findings with the client.

Career Counseling – Time spent doing formal Career Counseling with a client, which may include using assessments such as the Strong Interest Inventory, etc. (Formal assessment time should be logged in the assessment categories). This category covers the range of processes and procedures involved in comprehensive career counseling, including education, career exploration, development, and guidance. Helping individuals increase understanding of their abilities, interests, values, and goals is a vital foundation of the career development process. Career counseling may be focused on issues across the lifespan and consider biological, psychological, sociological, and economic factors that influence the importance and nature of work, vocation, and career. Career counseling may be done with children, adolescents, adults, or the elderly.

Consultation – Consultation can be characterized as a helping, problem-solving process involving a helper (the consultant), a helpseeker (the consultee), and another (the client, organization, etc.). This voluntary, triadic relationship involves mutual involvement on the part of both the consultant and consultee in an attempt to solve the current work-related problem in a way that it not only stays solved, but that future problems may be avoided and or more efficiently handled (prevention). (Parsons, 1999, p. 13). In many practicum settings, consultation may take place between the consultant and the student with the aim of improving service to a client, but the client may or may not be present for the consultation. Examples of individuals from whom one may receive consultation are other mental health professionals, medical staff (including psychiatrists), family members, peers, correction agents, etc. Time spent discussing a case with your supervisor is counted as Supervision.

Distinction from supervision: Typically related to consultation is that the consultee has the power or the decision-making ability to decide not to use the consultant's feedback, suggestions, recommendations. A consultant does not usually have evaluative power regarding the student, whereas a supervisor does have evaluative obligations.

Didactic Training - "Didactic" means "intended to teach." Basically, this category is any directed practicum class activity, staffing, in-service, grand rounds, seminars, and conference activities aimed at teaching counseling-related information, skills, theory, etc. It is not supervision or consultation or outside reading or face-to-face client contact. In the APPIC application, these activities fall under "Support Activities."

Direct Service – Refers to face-to-face intervention and assessment experience. Students should only count the time spent in the presence of their client(s) in this category. Time spent scoring and/or report writing, *should not* be included in this category. These types of activities fall under "Support Activities" and should be recorded in their appropriate categories under this heading.

IMPORTANT NOTE: This definition of "direct service" differs from the WI licensure definition, which is more comprehensive and states that direct service is any activity a [student] performs that is directly related to providing psychological services to a client, such as note and report writing, studying test results, case consultation, and reviewing published works relating to the client's needs. We use APPIC's definition of "direct service." See the APPIC application (www.appic.org) for further clarification.

Face-to-Face – Time spent in counseling session with the client. Time spent in direct contact with their clients involved in administration of an assessment (such as administration of the WAIS) should also be included in this category. However, time spent scoring or interpreting the report should not. For the "Total hours face-to-face" columns, count each hour of a group, family, or couples session as one practicum hour. For example, a two-hour group session with 12 adults is counted as two hours. For the "Number of different ..." columns, count a couple, family, or group as one (1) unit. For example, meeting with a group of 12 adults over a ten-week period counts as one (1) group. Groups may be closed or open membership; but, in either case, count the group as one group.

Group Supervision - Actual hours of group focus on specific cases. Didactic portions should *not* be recorded as supervision, but rather as a support activity. This may be *part* of a staffing at your site, or *part* of practicum class, but didactic training should *not* be included in this category. The hours recorded in the group supervision category should be actual hours of group focus on specific cases. Many excellent practicum courses incorporate both didactic and experiential components. While the didactic portion is excellent training, it should not be recorded as a supervision activity; it should instead be included in Support Activities. This may necessitate breaking the hours spent in a practicum course into intervention, supervision, and didactic activities by actual course hours. For example, if you present on the "Psychosocial Issues of HIV Infection" using examples of cases, it is a didactic activity. Similarly, Grand Rounds that consist of in-service education on specific topics would *not* be considered supervision for the purposes of documenting practicum hours, but would be considered a support activity.

Integrated Report – Includes a history, an interview, and at least two of the following: objective and/or projective personality assessments; intellectual, cognitive, and/or neuropsychological assessment. These are synthesized into a comprehensive report providing an overall picture of the client. As long as there are at least 2 assessment tools being integrated, it is an integrated report. The tools may or may not be in the same "category".

Number of Different Groups - A couple, family, or group should be counted as one (1) unit. For example, meeting with a group of 12 adults over a ten-week period counts as one (1) group. Groups may be closed or open membership. (*taken right from APPIC application*).

Outcome Assessment of Programs or Projects - Engaging in research directly applicable to clinical services at your site

Peer Supervision – May be regularly scheduled, face-to-face supervision with peers (i.e., doctoral-level practicum students or masters-level practicum students) with specific intent of overseeing the psychological services rendered by the student. Students should not confuse "Peer Supervision" with "Supervision of Other Students." A site supervisor must be available to consult and supervise the peer-supervision group. Though the site supervisor does not need to be physically in the room with the peer supervision group, ALL decisions regarding cases must be supervised by the site supervisor.

Practicum Class – Time spent while in practicum class will most often be divided into many different categories. It is your job to determine how each class time was spent. For example, time presenting a case would go under Group Supervision. Time spent discussing how hours should be recorded, receiving training on how to construct a treatment plan, or discussing class readings, etc. should be recorded under Didactic Training.

Practicum hour - A practicum hour is a clock hour, not a semester/quarter hour. A 45-50-minute client hour may be counted as one practicum hour. When calculating practicum hours, you should provide the exact number of hours accrued or number of clients seen. Use your best judgment, in consultation with your site supervisor, practicum instructor, and academic training director, in quantifying your practicum experience. You will be asked to report your practicum hours separately for: (1) practicum hours accrued in your doctoral program, and (2) practicum hours accrued as part of a terminal master's experience in a mental health field. Hours accrued while earning a master's degree as part of a doctoral program should be counted as doctoral practicum hours. So, ANY practicum hours that you accrue after you have been

officially accepted into the doctoral program should be counted as "doctoral hours" even if they arise from your experiences in COUN 6986. However, if you completed your COUN 6986 before you were accepted into the doctoral program (that is, in our master's program or you completed COUN 6986-equivalent in a master's program at a different university), then these hours are counted as accrued in a terminal master's program.

Professional Reading – Any reading that is directly related to practicum should be counted in this category. It includes, but is not limited to, time spent reading the practicum class assessments, time spent reading research directly related to a client, or time spent reading a test manual to become familiar with an assessment (time spent scoring an assessment is recorded under Assessment Scoring).

Program Development/Outreach Programming - Actively participating in activities, such as designing a new treatment track for pregnant teens or participating in outreach to college dorms to educate students about sexual assault prevention, etc.

Supervision of Other Students – When a doctoral-level student provides supervision to a master's-level student, or a master's-level student provides supervision to a bachelor's-level student. Supervision provided to less advanced students should be counted in Other Psychological Experience with Students and/or Organizations, *NOT* under supervision. This activity is separate from, but often confused with, Peer Supervision. Peer Supervision occurs when several individuals who are at the same level of training, such as a group of master's students, get together to provide supervision on cases. (See definition of Peer Supervision above).

Supervision 1:1 – Regularly scheduled, face-to-face, individual supervision with specific intent of overseeing the psychological services rendered by the student. "Supervision is an intervention provided by a more senior member of a profession to a more junior member or members of that same profession. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to the client(s) she, he, or they see(s), and serving as a gatekeeper of those who are to enter the particular profession" (Bernard & Goodyear, 1998). The ability to evaluate, take responsibility for client care, and ensure accountability highlight the significant differences between supervision and consultation. The supervisor has these obligations, and the consultant does not. For the doctoral students, their supervisor must be a licensed psychologist with at least three years of licensed experience. For master students, their supervisor must have a master's degree in counseling (or a related degree, such as MSW, Ph.D., or Ed.D.) and at least three years of professional experience. Check with your Director of Training to ensure that your supervisor meets requirements).

Support Activities - Time spent gathering information about the client, but not in the actual presence of the client. For example, time spent on chart review, writing process notes, consulting with other professionals about cases, video/audio tape review, planning interventions, assessment interpretation, report writing, etc. In addition, it includes hours spent at a practicum setting in didactic training (e.g., grand rounds, seminars). This category is further divided into the above-mentioned categories.

Systems Intervention / Organizational Consultation / Performance Improvement - e.g., consulting with management about crisis management following violent outburst by an employee, consulting with teachers and school counselors following the death of a student, or providing training to supervisors who are trying to help their employees adapt to using new technology.

Additional Definitions that are useful when filling out the APPIC Application

Sports Psychology /Performance Enhancement – Work with athletes or even performance enhancement with executives, etc.

Medical / Health – Related Interventions – Various activities such as biofeedback, exercise, pain management etc.

Intake Interview / Structured Interview – Examples include a structured clinical interview for an inpatient unit or admission to a correctional facility.

In order to provide a standardized format for documenting required practicum information within the department, we have created a series of spreadsheets that are consistent with the APPIC requirements for applying for internship. Using these spreadsheets will enable you to meet documentation requirements for your practica courses, and will also save you a great deal of time and effort when it comes time to apply for internship. See CECP website for more information.

APPENDIX F

(Use Agency Letterhead – but only with permission from your site supervisor)

Informed Consent Form for Counseling Practicum

My name is ***(Student's name here)***, and I am a graduate student in the Department of Counselor Education and Counseling Psychology ***(insert name PROGRAM HERE – doctoral program in Counseling Psychology or Masters program in Counseling)*** at Marquette University. I am currently a practicum student at **AGENCY**. My direct supervisor at **AGENCY** is ***(SITE SUPERVISOR'S NAME DEGREE, TITLE, PHONE NUMBER)***. In order to provide the best services to you, I will be discussing your case with my site supervisor on a regular basis. If you have any questions or concerns regarding the services I am providing to you, you are welcome to contact my direct supervisor. I am required to have direct supervision of my counseling services and cannot provide services without this supervision.

I am also required to participate in a practicum class held at Marquette University. This class is taught by Marquette faculty, ***(PRAC INSTRUCTOR'S NAME, Degree, MU Phone Number)***, and only includes advanced graduate students enrolled in my program (typically eight students or fewer). One of the class requirements is for me to present client cases to the class for consultation and educational purposes. If I present any aspects of your case to the class, **No** identifying information (for example, name, employer, city of residence, schools attended etc.) will be presented to the class, and thus your confidentiality will be protected.

I, **Clients Name**, am aware that my counselor **Student's Name** is a graduate student at Marquette University completing a practicum at **AGENCY** and under the direct supervision of **SITE SUPERVISOR'S NAME DEGREE, TITLE, PHONE NUMBER.**

Client Signature/Printed Name

Date

Witness Signature/Printed Name

Date

APPENDIX G

Please find below a statement from MU's Office of General Counsel regarding paid practicum positions. These positions are relatively rare, but it is important, nevertheless, that you receive and are aware of this information. The principles apply, as well, to internships. Neither the CECF department nor Marquette University makes recommendations about specific insurance providers. The APA Insurance Trust is the largest provider of psychology graduate student liability coverage.

Students in Clinical Placement and Professional Service Degree Programs

Claims directed against Marquette University students working in clinical programs and health care capacities when providing services as a representative of a Marquette program and/or with an affiliate as part of an approved degree program will be tendered to the University and Marquette University will provide defense and payment. Universities are considered the legal principal in clinical degree relationships and "Students in Practicum" is an exposure that is recognized by all Universities with medical, health care and clinical programs.

Students pursuing a degree with clinical requirements, even when licensed, are generally not considered to be working as "independent professionals" but as University students representing the University program. Nevertheless, in the event of student in practicum claims, students are most often taken off initial complaints since liability ultimately falls on the supervisor or the principal entity which receives the benefit of the student's work and/or billed the services and was paid by the client/patient. The organization has allowed the student, while representing the University, to perform the services and they cannot avoid being accountable for that decision as a matter of liability. However, there can be gray areas where joint liability can be imposed or an allegation of "failure to teach" implied. In those situations the University is ultimately responsible for the student's action and placement of the student into the clinical environment as it is considered the students are not acting on their own but under the auspices of the University placement. Universities and businesses generally have more financial assets than students, and plaintiff attorneys see benefit in redirecting suits to the principal entities either responsible either for the student placement or the affiliated entity whose staff may have supervised the student, or both.

Problems can arise in defense and payments if the work or services provided are not somehow connected with the University or degree program at the time of injury or damages. For example, if and when a departmental unit chooses to give credit for work experience done previously where there was no connection or any appearance of a student representing MU. Departments may decide to award credit for life situations and work performed in the past or in a personal capacity but would not be responsible for the actions of the individual when working independently. Situations can arise when an individual student may be working as a licensed professional on their own, or for another firm where the independent services are necessary to meet degree requirements but have not been arranged by, or considered representing, the University. In non-MU affiliated situations individuals should carefully consider their service relationship as it relates to legal liability and whether they are the principal in the relationship or acting as an agent.

- Individuals (licensed, degreed professionals) should be sure to understand or clarify:
 - Whether they are working for the benefit of the other organization or if the firm is acting as facilitator for the individual's own practice.
 - Whether the clients/patients are the organization's or considered clients of the individual practitioner. Some arrangements require the professional to act as an independent contractor and do not consider them an employee although they are paid. Individuals should be aware of any type of employment contract or agreement. If they are considered an employee, the employer is responsible for civil liability and claims of clients/patients of their employed agent.

However, entities may require individuals to have insurance as a condition of employment, (When representing MU, we would provide the financial responsibility and "insurance".)

Professional liability insurance may need to be evaluated and purchased by the individual when the student is acting as a defined professional and not representing the University when providing services. This coverage can vary in terms of coverage, conditions, premium and claim management expertise and individuals should work with insurance professionals who can compare and contrast various plans. Not all insurance is equal, and the quality and financial position of the insurer, not just the cost of the premium should be considered. Professional liability coverage is specialty coverage and the expertise of the company in your specific profession and their longevity in this coverage line is important.

APPENDIX H

Marquette University
Department of Counselor Education and Counseling Psychology

Informed Consent to Audio- or Video-Recording Counseling Sessions

Student Counselor Name: _____

Practicum/Internship Site: _____

Site Supervisor Name & Title: _____

Phone: _____

As a graduate student at Marquette University, I am required to be under the direct supervision of qualified clinical supervisors. Audio recordings and video recording the sessions are a significant component of counselor training. However, no recording is ever done unless the client has given permission to do so. Therefore, we use this consent form to obtain your permission to audiotape or video-recordings. Feel free to ask me any questions about the purpose of recordings and use of the recordings.

Your signature below confirms that this form has been explained to you, and that you understand the following:

1. The purpose of recordings is for use in training and supervision. This will allow the above referenced counselor-in-training to consult with his or her assigned supervisor(s) in an individual or group supervision format, who may listen to the tape alone or in the presence of other student counselors in a class or meeting.
2. I can request that the tape recorder or video recorder be turned off at any time and may request that the tape or any portion thereof be erased. I may terminate this permission to tape at any time.
3. The contents of these taped sessions are confidential and the information will not be shared outside the context of individual and group supervision.
4. The recordings will be stored in a secure location and will not be used for any other purpose without my explicit written permission.
5. I have the right to review my recording with my student counselor during a counseling session.
6. The recordings will only be kept until the end of the school term during which they are recorded, at which time they will be destroyed.

Client Signature (or Parent/Guardian if client is under 18 years of age): _____ Date: _____

Client Assent (if client is under 18 years of age): _____ Date: _____

Student Counselor Signature: _____ Date: _____

Site Supervisor's Signature: _____ Date: _____

APPENDIX I

Council of Counseling Psychology Training Programs (CCPTP) Expectations for Internship Eligibility

1. Trainee meets or exceeds foundational and functional competencies as articulated by the program objectives and national guidelines. These include multicultural competencies in working with diverse populations.
2. Trainee successfully completed a pre-dissertation research experience.
3. Trainee passed program's comprehensive or qualifying exams (or equivalent) by internship application.
4. Trainee's dissertation proposal has been accepted at the time of application to internship.
5. Trainee successfully completed all required coursework for the doctoral degree prior to starting the internship (except hours for dissertation and internship).
6. Trainee completed at least 450 face-to-face, program-sanctioned, verified graduate practicum hours* of assessment/intervention that includes evidence-based practice and at least 150 hours of supervision by a licensed psychologist or other mental health professional (as appropriate for the jurisdiction). Supervision was delivered according to accepted individual or group models and included observation of the trainee's work.
7. Trainee has contributed to the scientific knowledge within psychology, as evidenced by:
 - a. Submitting a manuscript for publication (e.g., journal article, book chapter) as an author or co-author,
 - or
 - b. Presenting at least two papers/posters/workshops at local, regional, national, or international professional conferences or meetings.
8. Trainee was enrolled in a program that conducts formal annual evaluations of each student for purposes of monitoring trainees' developing competencies and assuring that only students making satisfactory progress are retained and recommended for doctoral candidacy and entry into the profession. This annual program review of each student utilizes evaluations obtained from different faculty and supervisors and covers the full range of competencies including academic, research, clinical skills, and ethical professional behavior. Trainee has been rated as meeting expectations and possessing the required competencies at the time of applying for internship.

Adopted by CCPTP February 9, 2013

*Per Mark Leach (CCPTP), 6/3/16, includes both master's and doctoral program

Appendix J.

Integrative Psychological Reports Rubric

	Less than Adequately Addressed (0 points)	Adequately Addressed (1 point)	More than Adequately Addressed (2 points)	Total Points
1. Diagnostic accuracy	One or more of the essential elements are missing or fail to show accuracy.	Demonstrated current knowledge of diagnostic classification systems, functional and dysfunctional behaviors, and included consideration of client strengths and psychopathology.	Demonstrated advanced knowledge of diagnostic classification systems, functional and dysfunctional behaviors, and consideration of client strengths and psychopathology.	
2. Integration of DSM-5-TR Information	Missing one or more contextual issues related to understanding human behavior.	Provided a description of human behavior within its context (e.g., affective, cognitive, developmental, family, biological, social, societal and cultural).	Provided an advanced and detailed description of human behavior within its context (e.g., affective, cognitive, developmental, family, biological, social, societal and cultural).	
3. Application of Knowledge to Context	Application of knowledge was missing some aspects of functional and dysfunctional behaviors.	Demonstrated the ability to apply the knowledge of functional and dysfunctional behaviors, including context, to the assessment or diagnostic process.	Demonstrated the ability to apply the knowledge of functional and dysfunctional behaviors, including context, to the assessment or diagnostic process at a very high, detailed level.	
4. Selection of Assessment Method Appropriate to Goals	Some assessments were not appropriate for the case goals.	Selected and applied assessment methods that draw from relevant empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and/or methods appropriate to the identified goals of the assessment as well as relevant diversity characteristics of the client.	Demonstrated a high level of knowledge in the selection and application of assessment methods that draw from relevant empirical literature and that reflect the science of measurement and psychometrics; collect relevant data using multiple sources and/or methods appropriate to the identified goals of the assessment as well as relevant diversity characteristics of the client.	

5. Interpretation of Results	Two to three mistakes were made in the interpretation of results.	Interpretation of assessment results followed current research and professional standards and guidelines to inform case conceptualization, classification, and recommendations; guarded against decision-making biases; distinguished the aspects of assessment that are subjective from those that are objective.	Interpretation of assessment results was highly developed, following current research and professional standards and guidelines to inform case conceptualization, classification, and recommendations; guarded against decision-making biases; distinguished the aspects of assessment that are subjective from those that are objective.	
6. Quality of the Written Report	The report had grammar/spelling errors and/or was ineffective in communicating some information (0 pts.)	The written report documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences; the report had no grammar/spelling errors.	The written report documents the findings and implications of the assessment in a highly accurate and effective manner sensitive to a range of audiences; the report was presented in a very professional way.	

NOTE: Students must achieve an “adequately addressed” rating in all areas to meet the minimal level of achievement.

TOTAL POINTS: /20