NORTHWESTERN COLLEGE

COUNSELING PROGRAM

Comprehensive Assessment Plan

Clinical Mental Health Counseling Program

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Contents

Introduction 5
Program Mission 5
Data Collection Procedure 6
Table 1. Data Collection 6
Liability Insurance Verification and Documentation 8
Individual Student Assessment 8
Key Performance Indicators (KPIs) 8
Individual Student Minimum Expectations 10
Program-Level Benchmarks 10
Systematic Assessment Process 11
Structural Framework of Assessment 11
Program Learning Objectives (PLOs) and Student Learning Outcomes (SLOs) 12
Program Learning Objectives (PLOs) 12
PLO 1: Professional Identity and Dispositions 12
PLO 2: Clinical Competence 12
PLO 3: Advocacy and Spiritual Integration 12
Student Learning Outcomes (SLOs) 13
SLO 1: Professional Counseling Orientation and Ethical Practice (3.A) 13
SLO 2: Social and Cultural Diversity (3.B) 13
SLO 3: Human Growth and Development (3.C) 13
SLO 4: Career Development (3.D) 13
SLO 5: Counseling and Helping Relationships (3.E) 13
SLO 6: Group Counseling and Group Work (3.F) 13
SLO 7: Assessment and Testing (3.G) 14
SLO 8: Research and Program Evaluation (3.H) 14
SLO 9: Clinical Mental Health Counseling Practice (5.C) 14
SLO 10: Professional Dispositions (2.C) 14
SLO 11: Advocacy and Spiritual Integration (3.B / 5.C) 14
KPI System and Benchmarks 14
Program-Wide KPI Benchmarks 15
Course-Based KPI Assessments 15
CCS-R Counseling Skills Evaluations 16

CCS-R Professional Dispositions Evaluations 16
Professional Counseling Performance Evaluation (PCPE) 16
CPCE Performance 16
Disposition Assessment System 16
Assessment Instruments 17
Developmental Assessment Progression 17
Disposition Benchmarks 17
Remediation Triggers 18
Process for Addressing Unmet Minimum Thresholds 18
Formal Remediation Process 19
Data Collection Procedures 20
Process for Longitudinal Assessment Review and Multi-Year Trend Analysis 21
Faculty Calibration and Inter-Rater Reliability Process 23
Annual Faculty Calibration Process 23
Ongoing Calibration and Reliability Procedures 23
Academic Quality Indicators (AQIs) 24
Annual Evaluation Cycle 25
1. Ongoing Data Collection 25
2. Data Aggregation and Organization (May–June) 25
3. Annual Data Analysis and Faculty Review (Faculty Retreat) 25
4. Program Improvement and Action Planning (August–September) 25
5. Annual Reporting and Public Disclosure (October) 26
6. Ongoing Monitoring and Follow-Up 26
Data Analysis and Use 26
Multi-Year Trend Analysis 26
1. Longitudinal Data Aggregation 27
Community Partner Engagement and Advisory Board 28
Advisory Board Documentation 29
Advisory Board Procedures 30
Public Disclosure 33
Summary 34
KPI Performance Indicators 34
Key Performance Indicators for the Eight Core Areas Chart 35

Appendix A: Master Curriculum Alignment Table 46
PROFESSIONAL ORIENTATION (3.A) 46
SOCIAL & CULTURAL DIVERSITY (3.B) 48
HUMAN GROWTH & DEVELOPMENT (3.C) 50
CAREER DEVELOPMENT (3.D) 53
COUNSELING RELATIONSHIPS (3.E) 54
GROUP WORK (3.F) 57
ASSESSMENT (3.G) 58
RESEARCH & PROGRAM EVALUATION (3.H) 60
CMHC SPECIALTY (5.C) 61

Introduction

Northwestern College is home to the Clinical Mental Health Counseling (CMHC) Master of Arts program within the Counseling Department, established in 2022. The program is delivered in a hybrid format with asynchronous and synchronous coursework, and fully synchronous clinical training. Students participate in an annual virtual residency experience.

The CMHC Program maintains a **comprehensive, systematic assessment plan** to ensure continuous program improvement and alignment with **CACREP 2024 Standards (2.D.1–2.D.8)**.

Program Mission



The Model: Counselor as the Hands and Feet of Jesus
Counseling Program Mission Statement: The Counseling Program at Northwestern College is a Christ-centered community dedicated to the development of outstanding counselors who are called to serve Christ and in diverse, multicultural, and global society with marginalized populations. Students integrate a biblical perspective with culturally sensitive and ethical clinical skills so they can courageously and faithfully provide compassionate care in pursuing God's work of restoration and healing in the world.

Data Collection Procedure

The following table is a list of the data that is collected for evaluation purposes at all levels of evaluation along with the collection schedule, procedures for collecting data, and the location of data after collection.

Table 1. Data Collection

Data Collected	When Data is Collected and Used	Procedure for Collecting Data	Where Data is Kept	When Shared with Student
KPI Assignments	During specified courses for student assessment. Data pulled annually for analysis at faculty retreat.	Rubrics in BB, Program Director and GPS Curriculum Instructor "mine" data	Data stored in BB and in Departmental One Drive	If a student scores below the established minimum student expectation for the KPI or demonstrates related academic, clinical, or dispositional concern, the instructor initiates the program's review and remediation process.
CPCE Scores (Content Score; All students)	Each semester CPCE taken. Data pulled annually for analysis at faculty retreat.	CPCE website via secure login, Clinical Coordinator collects	Clinical Coordinator; CPCE database	Clinical Coordinator lets student know if pass or fail via email.
Formal Assessment: Competency Review utilizing the PCPE (Professional Skills & Dispositions Section) **COUN 505** Professional Orientation (All Sections), **COUN 530** Group Counseling, **CMHC 610** Practicum*, **CMHC 615** Internship I*	Data pulled annually for analysis at faculty summer retreat.	Completed at faculty meetings	Confidential Student Files	If there is a concern, the student is notified and a meeting is scheduled.

Data Collected	When Data is Collected and Used	Procedure for Collecting Data	Where Data is Kept	When Shared with Student
Summer Virtual Residency * PCPE is formally collected at those additional clinical points for developmental review.				
Supervisor Evaluation of Students	Midterm and end of all practicum and internships. Data pulled annually for analysis at faculty retreat.	CCS-R sent to Supervisor via Tevera; available to supervisor, faculty, and Clinical Coordinator; Clinical Coordinator creates report	In Tevera	End of semester meeting in practicum and internships
Student Evaluations of Supervisors	Midterm and end of all practicum and internships. Data pulled annually for analysis at faculty retreat.	Eval available to students in Tevera, available to supervisor, faculty, and Clinical Coordinator; Clinical Coordinator creates report	In Tevera	End of semester meeting in practicum and internships
Graduate Survey	6 months after graduation. Data pulled annually for analysis at faculty retreat.	Survey emailed, completed via Qualtrics. Response rate (n respondents / n eligible graduates) documented annually alongside outcomes data.	In Qualtrics, and with Program Director	NA
Alumni/Employers/Community Partners Survey	Annually. Data pulled annually for analysis at	Survey emailed, completed via Qualtrics	In Qualtrics, and with Program Director	NA

Data Collected	When Data is Collected and Used	Procedure for Collecting Data	Where Data is Kept	When Shared with Student
	faculty summer retreat.			

The Program Director, in consultation with core faculty, is responsible for final decisions regarding curriculum changes and program policies.

Liability Insurance Verification and Documentation

The program revised its documentation procedures to strengthen verification and monitoring of student liability insurance coverage. Proof of liability insurance is now collected, downloaded, and maintained in students' confidential files. This allows the Program Director to conduct timely quarterly audits to ensure all students engaged in practicum and internship experiences maintain continuous and current liability insurance coverage, consistent with program and CACREP requirements.

Individual Student Assessment

The Clinical Mental Health Counseling (CMHC) Program faculty systematically assess each student's progress throughout the program to ensure the acquisition of professional knowledge, counseling skills, clinical competencies, and professional dispositions aligned with the CACREP 2024 Foundational Counseling Curriculum Standards (Section 3: 3.A–3.H), Academic Quality Standards related to professional dispositions (2.C), Professional Practice Standards (Section 4), and Clinical Mental Health Counseling Specialty Standards (5.C).

Student assessment is continuous, developmental, and systematic and occurs across the curriculum through clearly defined Key Performance Indicators (KPIs), minimum performance expectations, multiple assessment methods, and multiple points of evaluation embedded throughout academic coursework and clinical field experiences.

Key Performance Indicators (KPIs)

Key Performance Indicators (KPIs) are direct measures of student learning identified by program faculty to evaluate student knowledge, counseling skills, clinical competence, and professional dispositions related to Program Learning Objectives (PLOs) and Student Learning Outcomes (SLOs). KPIs are embedded systematically throughout the required curriculum and are used to assess student competency development across the CACREP 2024 Foundational Counseling Curriculum Standards (Section 3: 3.A–3.H), Academic Quality Standards related to professional dispositions (2.C), and Clinical Mental Health Counseling Specialty Standards (5.C). KPIs are evaluated using multiple measures and multiple points of assessment across coursework, clinical experiences, professional disposition reviews, and program evaluation processes.

Each KPI is aligned with a designated PLO and SLO and includes:

- A CACREP-aligned competency area
- Clearly defined assessment measures
- Developmental assessment points
- Program benchmarks
- Minimum student performance expectations

KPIs are embedded across all foundational curriculum areas and specialty practice standards, including:

- Professional Counseling Orientation and Ethical Practice (3.A)
- Social and Cultural Diversity (3.B)
- Human Growth and Development (3.C)
- Career Development (3.D)
- Counseling and Helping Relationships (3.E)
- Group Counseling and Group Work (3.F)
- Assessment and Testing (3.G)
- Research and Program Evaluation (3.H)
- Clinical Mental Health Counseling Specialty Standards (5.C)

In addition, the program utilizes KPI measures related to professional dispositions and student development consistent with CACREP Standard 2.C.2.

Each KPI is evaluated across developmental levels within the curriculum:

- Introduced (I): foundational exposure and initial skill development
- Reinforced (R): continued application, integration, and skill refinement
- Assessed (A): demonstration of competency at program completion

KPIs are measured using multiple assessment methods and multiple points of evaluation throughout the program, including:

- Course assignments and scholarly papers
- Case conceptualizations
- Skills demonstrations and recorded counseling sessions
- Presentations and projects
- Comprehensive examinations (e.g., CPCE)
- Clinical performance evaluations (e.g., CCS-R)
- Professional disposition evaluations (e.g., PCPE)
- Practicum and internship field evaluations
- Program-specific clinical assessment measures

This systematic assessment structure ensures that student learning and professional competency are evaluated developmentally across academic coursework, clinical training experiences, and professional practice expectations over time.

Individual Student Minimum Expectations

Students must meet established minimum performance thresholds for each KPI to demonstrate competency development and satisfactory progression throughout the program. Minimum expectations include:

- Course-Based KPIs: Minimum score of 80%
- Clinical Performance KPIs (CCS-R):
  - Counseling Skills: Minimum ≥ 42/60
  - Professional Dispositions: Minimum ≥ 40/55
- Professional Disposition Evaluations (PCPE): Satisfactory rating across identified professional disposition domains
- CPCE Performance: Minimum Student Expectation: Raw score of 80 or higher on the CPCE.

Failure to meet minimum performance expectations initiates the program's systematic student retention, remediation, and support process consistent with CACREP 2024 Standard 2.C.2 regarding student development, retention, remediation, and progression.

The remediation process may include:

- Faculty review of student performance
- Development of a formal remediation plan
- Additional skill development activities or supervision
- Ongoing monitoring of student progress
- Determination regarding progression, continuation, or dismissal from the program

Program-Level Benchmarks

In addition to individual student expectations, the program establishes aggregate KPI benchmarks to evaluate student learning outcomes, program effectiveness, and academic quality indicators as part of the Comprehensive Assessment Plan and annual program evaluation process.

Program-level benchmarks include:

- 80% of students meeting or exceeding established KPI competency thresholds
- 80% of students scoring at or above 85% on course-based KPI assessments
- 80% of students meeting established CCS-R benchmarks:
  - Counseling Skills ≥ 45/60
  - Professional Dispositions ≥ 44/55
- CPCE performance raw score of 80 or higher on the CPCE.

Program-level KPI data are reviewed annually by program faculty as part of the systematic comprehensive evaluation process to inform curriculum review, student support processes, program improvement, and continuous quality enhancement.

Systematic Assessment Process

Student progress is systematically and developmentally monitored throughout the program using multiple measures and multiple points of assessment embedded across academic coursework and clinical field experiences, consistent with CACREP 2024 standards for comprehensive assessment and evaluation.

Multiple assessment data sources include:

- Blackboard rubric scores and course-based KPI assessments
- CCS-R evaluations during practicum and internship
- Professional disposition evaluations (PCPE)
- CPCE scores
- Field placement evaluations
- Faculty review of KPI performance and student progress

Students receive ongoing structured feedback through:

- Assignment grading and rubric evaluation
- Clinical supervision and evaluation meetings
- Faculty advising and progress review
- Formal remediation and support processes when necessary

This comprehensive assessment system ensures that students demonstrate the professional knowledge, counseling skills, clinical competencies, and professional dispositions necessary for competent and ethical clinical mental health counseling practice.

Structural Framework of Assessment

The Clinical Mental Health Counseling (CMHC) Program utilizes a systematic, developmental, and outcomes-based assessment framework to evaluate student learning, professional dispositions, clinical competency development, and overall program effectiveness consistent with CACREP 2024 Academic Quality, Foundational Counseling Curriculum, Professional Practice, and Clinical Mental Health Counseling specialty standards.

The assessment framework is designed to:

- Evaluate student competency development across academic coursework and clinical training experiences
- Measure achievement of Program Learning Objectives (PLOs) and Student Learning Outcomes (SLOs)
- Assess professional knowledge, counseling skills, clinical competencies, and professional dispositions
- Support student development, retention, remediation, and progression processes
- Monitor Academic Quality Indicators (AQIs)
- Inform continuous program improvement and data-informed decision-making

The program utilizes:

- Program Learning Objectives (PLOs)
- Student Learning Outcomes (SLOs)
- Key Performance Indicators (KPIs)
- Professional disposition assessments
- Academic Quality Indicators (AQIs)
- Multiple assessment measures and developmental evaluation points

Assessment processes are embedded systematically throughout the curriculum using multiple measures and multiple points of evaluation across coursework, practicum, internship, and professional review processes.

The program utilizes a developmental assessment progression model:

- Introduced (I): foundational exposure and initial competency development
- Reinforced (R): continued application, integration, and skill refinement
- Assessed (A): demonstration of competency at program completion

Assessment data are collected, analyzed, and reviewed annually through the Comprehensive Assessment Plan and annual program evaluation process to support continuous quality improvement consistent with CACREP 2024 standards.

Program Learning Objectives (PLOs) and Student Learning Outcomes (SLOs)

Program Learning Objectives (PLOs)

The CMHC Program has established Program Learning Objectives (PLOs) that reflect the program mission, CACREP 2024 standards, and expectations for professional counselor preparation.

PLO 1: Professional Identity and Dispositions

Students will demonstrate a developing professional counseling identity characterized by ethical practice, self-awareness, accountability, professionalism, and the professional dispositions necessary for competent and responsible clinical mental health counseling practice.

PLO 2: Clinical Competence

Students will demonstrate the professional knowledge, counseling skills, clinical competencies, assessment abilities, diagnostic reasoning, and treatment planning skills necessary to provide ethical, culturally responsive, and evidence-based clinical mental health counseling services across diverse populations and practice settings.

PLO 3: Advocacy and Spiritual Integration

Students will demonstrate the ability to integrate advocacy, multicultural responsiveness, spirituality, and wellness into counseling practice and case conceptualization while supporting client autonomy, ethical practice, and holistic care across diverse populations and systemic contexts.

Student Learning Outcomes (SLOs)

The Clinical Mental Health Counseling (CMHC) Program defines the following Student Learning Outcomes (SLOs), aligned with the CACREP 2024 Foundational Counseling Curriculum Standards (Section 3: 3.A–3.H), Academic Quality Standards related to professional dispositions (2.C), Professional Practice Standards (Section 4), and Clinical Mental Health Counseling Specialty Standards (5.C). Each SLO represents a measurable student competency assessed through designated Key Performance Indicators (KPIs) embedded systematically throughout the curriculum and across developmental points within the program.

SLO 1: Professional Counseling Orientation and Ethical Practice (3.A)

Students will apply ethical decision-making models, professional counseling identity, and the ACA Code of Ethics to clinical counseling scenarios, demonstrating professional judgment, ethical responsibility, and professional counselor identity.

SLO 2: Social and Cultural Diversity (3.B)

Students will demonstrate culturally responsive counseling practices that reflect awareness, knowledge, and skills when working with diverse populations across multiple contexts.

SLO 3: Human Growth and Development (3.C)

Students will apply theories of human growth and development across the lifespan to case conceptualization, treatment planning, and counseling interventions.

SLO 4: Career Development (3.D)

Students will apply career development theories, assessments, and interventions to support clients' vocational, educational, and life-role development across the lifespan.

SLO 5: Counseling and Helping Relationships (3.E)

Students will demonstrate effective counseling microskills, therapeutic interventions, case conceptualization, and relationship-building techniques across counseling settings and client populations.

SLO 6: Group Counseling and Group Work (3.F)

Students will apply group counseling theories and demonstrate ethical and culturally responsive facilitation skills in the development and leadership of group counseling experiences.

SLO 7: Assessment and Testing (3.G)

Students will select, administer, interpret, and integrate counseling assessments to inform diagnosis, case conceptualization, and treatment planning, including the use of structured interviewing, symptom checklists, personality and psychological testing, and behavioral observation.

SLO 8: Research and Program Evaluation (3.H)

Students will evaluate research and apply evidence-based practices, statistical concepts, and program evaluation methods to counseling practice and program improvement.

SLO 9: Clinical Mental Health Counseling Practice (5.C)

Students will apply diagnostic criteria, clinical judgment, treatment planning, crisis intervention, and evidence-based practices consistent with professional clinical mental health counseling practice.

SLO 10: Professional Dispositions (2.C)

Students will demonstrate professional dispositions including ethical behavior, self-awareness, accountability, cultural humility, professionalism, and professional conduct across academic and clinical settings.

SLO 11: Advocacy and Spiritual Integration (3.B / 5.C)

Students will demonstrate advocacy skills, community engagement practices, and the ability to ethically integrate spirituality as a dimension of human diversity in counseling while supporting client autonomy, multicultural responsiveness, equity, access, and holistic care across diverse populations and practice settings.

KPI System and Benchmarks

(Chart showing KPI's on page 34.)

The CMHC Program utilizes Key Performance Indicators (KPIs) as direct measures of student learning to systematically evaluate student competency development across the CACREP 2024 Foundational Counseling Curriculum Standards (Section 3: 3.A–3.H), Academic Quality Standards related to professional dispositions (2.C), Professional Practice Standards (Section 4), and Clinical Mental Health Counseling Specialty Standards (5.C).

KPIs are aligned with designated Program Learning Objectives (PLOs), Student Learning Outcomes (SLOs), CACREP standards, and assessment measures and are embedded systematically throughout the curriculum across developmental assessment points.

Each KPI includes:

- CACREP standard alignment
- Assessment measure
- Developmental assessment point
- Program benchmark expectation
- Minimum student performance expectation
- Review and evaluation process

KPIs are assessed using multiple measures and multiple points of evaluation across:

- Academic coursework
- Skills-based learning experiences
- Practicum
- Internship
- Professional disposition assessment processes
- Clinical evaluations
- Comprehensive assessment procedures

The program utilizes the following developmental assessment structure:

- Introduced (I): foundational exposure and initial competency development
- Reinforced (R): continued application and skill refinement
- Assessed (A): demonstration of competency at program completion

Representative KPI standards are identified within each curricular area; however, Appendix A demonstrates where CACREP 2024 standards are taught, reinforced, and assessed throughout the curriculum using course assignments, clinical evaluations, professional disposition assessments, and program outcome measures.

Program faculty review KPI data annually as part of the Comprehensive Assessment Plan and annual program evaluation process to:

- Evaluate student learning outcomes
- Assess professional competency development
- Monitor academic quality indicators
- Identify longitudinal trends
- Inform curriculum revision and program improvement
- Support student remediation, retention, and progression decisions
- Evaluate effectiveness of program modifications

Program-Wide KPI Benchmarks

Course-Based KPI Assessments

- Program Benchmark: 80% of students score ≥ 85%
- Minimum Student Expectation: ≥ 80%

CCS-R Counseling Skills Evaluations

- Program Benchmark: 80% of students score ≥ 45/60
- Minimum Student Expectation: ≥ 42/60

CCS-R Professional Dispositions Evaluations

- Program Benchmark: 80% of students score ≥ 44/55
- Minimum Student Expectation: ≥ 40/55

Professional Counseling Performance Evaluation (PCPE)

- Program Benchmark: 80% of students meet or exceed expectations
- Minimum Student Expectation: No "Does Not Meet Expectations" ratings

CPCE Performance

The CPCE is used as both an individual student progression measure and a program-level external validation measure. For individual student progression, students are expected to earn a raw score of 80 or higher on the CPCE. For program evaluation purposes, faculty review aggregate CPCE performance annually, including the extent to which student scores fall within one standard deviation of the national mean, to evaluate curricular effectiveness and inform continuous program improvement.

CPCE performance serves as an external validation measure used alongside course-embedded KPIs to evaluate program-level student knowledge acquisition and curricular effectiveness.

- Program Benchmark: 80% of students score within one standard deviation of the national mean
- Minimum Student Expectation: CPCE performance expectations are established as a raw score of 80 or higher.

AQIs are reviewed in conjunction with KPI, PLO, and SLO assessment data to evaluate the extent to which the program is achieving its stated mission, objectives, and student learning outcomes.

Disposition Assessment System

The CMHC Program utilizes a systematic, developmental, and multi-point disposition assessment system to evaluate students' professional dispositions, ethical behavior, interpersonal effectiveness, self-awareness, accountability, professionalism, and readiness for clinical practice consistent with CACREP 2024 Academic Quality Standards related to student development, retention, remediation, and progression (2.C).

Professional dispositions are assessed systematically across multiple points in time and across academic and clinical settings to support ongoing student development and evaluation of professional competence.

Assessment Instruments

The program utilizes multiple measures to assess professional dispositions and counseling competency, including:

- Professional Counseling Performance Evaluation (PCPE)
- Counseling Competencies Scale–Revised (CCS-R)
- Faculty evaluations and professional review processes
- Practicum and internship supervisor evaluations
- Clinical performance reviews and field placement evaluations

Developmental Assessment Progression

Disposition assessment occurs developmentally throughout the curriculum using the following progression model:

- Introduced (I): foundational awareness and initial professional development
- Reinforced (R): continued application, reflection, and skill refinement
- Assessed (A): demonstration of professional competence and readiness for clinical practice

Disposition assessment occurs at multiple developmental points across coursework and clinical experiences, including:

- COUN 505 Professional Orientation
- COUN 530 Group Counseling
- Virtual Residency
- Practicum
- Internship I and Internship II

Disposition Benchmarks

Professional Counseling Performance Evaluation (PCPE)

Professional disposition evaluation conducted across multiple points in time consistent with CACREP Standard 2.C.2.

- Program Benchmark: 80% of students meet or exceed expectations
- Minimum Student Expectation: No “Does Not Meet Expectations” ratings

Counseling Competencies Scale–Revised (CCS-R)

Clinical competency and professional disposition assessment conducted during clinical training experiences.

- Program Benchmark: 80% of students meet or exceed established program benchmarks
  - Counseling Skills: ≥45/60
  - Professional Dispositions: ≥44/55
- Minimum Student Expectations:
  - Counseling Skills: ≥42/60
  - Professional Dispositions: ≥40/55

Remediation Triggers

The program initiates formal review and remediation procedures when concerns arise regarding professional dispositions, counseling competency, ethical conduct, or professional functioning. Triggers for remediation may include:

- PCPE ratings below expectations
- CCS-R scores below established minimum thresholds
- Faculty concerns regarding professional behavior or student functioning
- Site supervisor concerns
- Ethical or professional conduct concerns
- Repeated or patterned concerns across courses, clinical experiences, or evaluations

Process for Addressing Unmet Minimum Thresholds

When program benchmarks or minimum student performance thresholds are not met for any KPI, professional disposition assessment, or Academic Quality Indicator (AQI), the CMHC Program follows a systematic, data-informed continuous improvement process consistent with CACREP 2024 Academic Quality and Comprehensive Assessment standards.

1. Identification of Deficit

Program faculty review KPI, AQI, disposition, and assessment data annually as part of the Comprehensive Assessment Plan and annual program evaluation process. Any KPI, AQI, or assessment outcome falling below established benchmarks or minimum thresholds is identified for formal review.

2. Root Cause Analysis

Faculty analyze contributing factors related to:

- Curriculum alignment
- Course content and sequencing
- Instructional methods
- Assessment design and rubric alignment
- Student preparedness and support needs

- Clinical training experiences
- Cohort or contextual variables
- Faculty calibration and evaluation consistency

3. Action Plan Development

Program faculty develop a targeted action plan that may include:

- Curriculum revision
- Modification of assignments, rubrics, or KPI measures
- Enhanced instructional strategies
- Additional student academic or clinical supports
- Faculty training or calibration activities
- Revision of remediation or advising procedures
- Adjustments to clinical training experiences

4. Implementation of Changes

Approved program modifications are implemented during the subsequent academic cycle and documented in:

- Faculty meeting minutes
- Annual Program Evaluation Reports
- Comprehensive Assessment Plan updates
- Curriculum committee documentation

5. Follow-Up Monitoring

Subsequent assessment data are reviewed to evaluate the effectiveness of implemented interventions and determine whether program benchmarks and minimum thresholds are achieved. If benchmarks continue to not be met, additional review and program modifications are implemented.

This process ensures systematic, documented, and data-informed continuous program improvement.

Formal Remediation Process

The CMHC Program maintains a formal student remediation and support process consistent with CACREP 2024 Academic Quality Standards related to student development, retention, remediation, and progression.

Remediation Process

1. Identification of concern through:
    - KPI performance

- PCPE evaluations
- CCS-R evaluations
- Faculty review
- Supervisor evaluations
- Ethical or professional conduct concerns

2. Referral to the Student Support and Remediation Committee
3. Committee review of relevant student performance data and supporting documentation
4. Development of a formal written remediation plan that includes:
    - Measurable remediation goals
    - Required interventions or corrective actions
    - Timeline for completion
    - Methods for reassessment and evaluation
5. Ongoing monitoring and evaluation of student progress
6. Final determination regarding:
    - Continued progression in the program
    - Additional remediation requirements
    - Clinical placement restrictions
    - Dismissal recommendation when warranted

Policies and procedures related to student remediation, retention, progression, and dismissal are documented in the CMHC Student Handbook.

Data Collection Procedures

Data Type	Collection Method	Storage
Course-Based KPI Assignments	Blackboard rubric evaluations	Blackboard and secure OneDrive assessment files
CPCE Scores	CPCE testing portal and official score reports	Program assessment files maintained by the Clinical Coordinator
Professional Counseling Performance Evaluation (PCPE)	Faculty evaluation and professional review process	Secure student assessment files
Counseling Competencies Scale–Revised (CCS-R)	ELC (Tevera) clinical evaluations	ELC (Tevera) clinical management system
Academic Quality Indicator (AQI) Surveys	Qualtrics survey platform	Program assessment files maintained by the Program Director
Practicum and Internship Field Placement Evaluations	Clinical tracking and supervisor evaluations	ELC (Tevera) clinical management system
Program Evaluation and Outcome Data	Faculty review and annual assessment processes	Comprehensive Assessment Plan records and Annual Program Evaluation files

Assessment data are reviewed systematically by program faculty during annual program evaluation and Comprehensive Assessment Plan review processes to monitor student progression, evaluate program benchmarks, identify trends, and support continuous program improvement.

Process for Longitudinal Assessment Review and Multi-Year Trend Analysis

Consistent with CACREP 2024 Standards related to continuous program evaluation and assessment, the CMHC Program engages in systematic longitudinal review of assessment data to identify patterns, evaluate program effectiveness, and guide data-informed program improvement.

1. Annual Aggregation of Assessment Data
   At the conclusion of each academic year, program faculty aggregate and review assessment data collected across the Comprehensive Assessment Plan, including:
   • Key Performance Indicator (KPI) results
   • Academic Quality Indicators (AQIs)
   • Professional disposition assessments (PCPE, CCS-R)
   • CPCE results
   • Field placement evaluations
   • Student retention and completion data
   • Licensure and employment outcomes
   • Student, alumni, site supervisor, and employer survey feedback

Program data are compiled into the Annual Program Evaluation Report and reviewed by core faculty.

2. Longitudinal Multi-Year Trend Analysis
   Program faculty conduct longitudinal review of assessment data using rolling multi-year comparisons to identify patterns in:
   • Student learning outcomes
   • Clinical competency development
   • Professional disposition trends
   • Program retention and completion
   • Licensure performance
   • Stakeholder feedback
   • Field placement quality
   • Curriculum effectiveness

Trend analysis includes review of at least three years of available program data when available. Faculty compare annual benchmark attainment, identify recurring strengths or concerns, evaluate changes over time, and determine whether interventions resulted in measurable improvement.

3. Faculty Retreat and Annual Program Review
   Assessment findings are formally reviewed during the annual faculty assessment retreat and program evaluation meetings. Faculty examine:

- Benchmark attainment
- Areas of strength
- Areas requiring improvement
- Curriculum alignment
- Instructional effectiveness
- Assessment validity and rubric alignment
- Student support needs
- Clinical training outcomes

Faculty discussions are documented in meeting minutes and Annual Program Evaluation Reports.

4. Data-Informed Program Improvement
   When assessment patterns or trends indicate a need for improvement, program faculty develop and implement action plans that may include:
   - Curriculum revision
   - Course sequencing adjustments
   - Modification of assignments or rubrics
   - Faculty calibration activities
   - Changes to advising or remediation procedures
   - Enhancement of student support resources
   - Clinical training modifications

Program modifications are documented through faculty meeting minutes, curriculum committee records, syllabus revisions, and Comprehensive Assessment Plan updates.

5. Follow-Up Review and Continuous Improvement
   Subsequent assessment cycles are used to evaluate the effectiveness of implemented changes. Faculty review whether modifications resulted in improvement in student outcomes, benchmark attainment, or program effectiveness. Continuous assessment and longitudinal monitoring ensure the program maintains ongoing alignment with CACREP 2024 Standards and supports systematic continuous improvement.sre

Student Feedback Process

Students receive ongoing and systematic feedback regarding academic, clinical, and professional performance through multiple evaluation processes, including:

- Blackboard rubric evaluations and assignment feedback
- Tevera clinical evaluations
- Practicum and internship supervision meetings
- Faculty advising and performance review meetings
- Professional disposition evaluations
- Remediation and support processes when warranted

These processes ensure students receive timely, developmental, and structured feedback regarding professional knowledge, counseling competencies, clinical skills, and professional dispositions.

Faculty Calibration and Inter-Rater Reliability Process

The CMHC Program utilizes a systematic faculty calibration and inter-rater reliability process to promote consistency, fairness, and reliability in student assessment procedures across coursework, clinical evaluations, KPI assessment measures, and professional disposition evaluations.

Annual Faculty Calibration Process

Program faculty participate in formal annual calibration activities during the faculty retreat and annual assessment review process. Calibration activities include:

- Review of KPI rubrics and assessment measures
- Review of Professional Counseling Performance Evaluation (PCPE) criteria
- Review of Counseling Competencies Scale–Revised (CCS-R) scoring procedures
- Evaluation of sample student assignments and clinical performance materials
- Comparison and discussion of scoring decisions
- Alignment of faculty expectations regarding competency benchmarks and performance standards
- Documentation of calibration decisions and assessment modifications in faculty meeting minutes

Ongoing Calibration and Reliability Procedures

To support consistency across evaluators and assessment settings, the program also conducts:

- Mid-year faculty assessment review meetings
- New faculty onboarding and assessment training
- Clinical supervisor orientation and evaluation review processes
- Ongoing review of rubric anchors and scoring expectations
- Faculty discussions regarding student competency expectations and remediation standards

Faculty utilize shared rubrics, scoring anchors, competency benchmarks, and evaluation criteria to promote consistency and reliability across academic and clinical assessment processes.

These procedures support systematic, equitable, and reliable evaluation of student learning, counseling competency, clinical performance, and professional dispositions across the program.

Academic Quality Indicators (AQIs)

The CMHC Program utilizes Academic Quality Indicators (AQIs) to evaluate overall program effectiveness, student achievement, program outcomes, and continuous quality improvement consistent with CACREP 2024 Academic Quality Standards (2.D–2.E). AQIs are program-level indicators and are not used as direct measures of individual student competency.

AQIs are reviewed in conjunction with KPI, PLO, and SLO assessment data to evaluate the extent to which the program is achieving its stated mission, objectives, and student learning outcomes. AQI data are reviewed annually as part of the Comprehensive Assessment Plan and systematic program evaluation process to evaluate program effectiveness, identify trends, and guide data-informed program improvement efforts.

Academic Quality Indicator (AQI)	Program Benchmark	Trigger for Program Review/Action
CPCE/NCE Pass Rate	≥ 80%	< 80%
Program Completion Rate (within 150% of expected program length)	≥ 80%	< 80%
Employment Rate in Counseling or Related Field Within Six Months of Graduation*	≥ 70%	< 70%
Doctoral Program Admission Rate*	≥ 10%	< 10%
Practicum Placement Rate	≥ 90%	< 90%
Internship Placement Rate	≥ 90%	< 90%
Professional Disposition Benchmarks (PCPE/CCS-R Aggregate Outcomes)	≥ 80% meet expectations	< 80%
Diverse Learning Community and Student Support Indicators	Annual review demonstrates adequate student access, support, and representation across program processes	Identified equity gaps, declining support outcomes, or stakeholder concerns

*Employment and doctoral admission data are collected annually through graduate surveys and program follow-up procedures and are reported separately consistent with CACREP 2024 Academic Quality reporting expectations.

Survey response rates are reviewed annually and reported alongside program outcome data to support interpretation of findings, representativeness of stakeholder feedback, and continuous program evaluation processes.

Annual Evaluation Cycle

The CMHC Program follows a systematic annual evaluation cycle to support ongoing assessment, continuous quality improvement, and compliance with CACREP 2024 Comprehensive Assessment and Academic Quality standards.

1. Ongoing Data Collection

Assessment data are collected continuously throughout the academic year and include:

- KPI assessment data
- PCPE evaluations
- CCS-R evaluations
- CPCE data
- AQI outcome data
- Practicum and internship evaluations
- Student, site supervisor, alumni, and employer surveys

2. Data Aggregation and Organization (May–June)

Program assessment data are compiled and organized within the secure Program Assessment Master File and institutional assessment storage systems for annual review and longitudinal analysis.

3. Annual Data Analysis and Faculty Review (Faculty Retreat)

Program faculty conduct systematic review and analysis of:

- KPI outcomes
- AQI outcomes
- Professional disposition data
- Clinical training outcomes
- Survey and stakeholder feedback
- Trend analysis across cohorts and assessment cycles

4. Program Improvement and Action Planning (August–September)

Based on annual assessment findings, faculty develop and implement program modifications that may include:

- Curriculum revisions
- Assignment or rubric modifications
- Clinical training enhancements
- Student support interventions
- Faculty development and calibration activities

- Policy or procedural revisions

5. Annual Reporting and Public Disclosure (October)

Annual program outcome data and required public disclosures are reviewed, examined, and published in accordance with CACREP reporting expectations and institutional policies.

6. Ongoing Monitoring and Follow-Up

Program faculty monitor implementation of action plans and evaluate the effectiveness of modifications throughout the subsequent academic cycle.

Data Analysis and Use

The CMHC Program systematically analyzes assessment data to evaluate student learning, monitor academic quality indicators, and support continuous program improvement consistent with CACREP 2024 standards for comprehensive assessment and evaluation.

Assessment data are analyzed to:

- Identify longitudinal trends and patterns
- Evaluate student learning and competency development
- Monitor professional disposition development
- Assess program effectiveness and academic quality indicators
- Inform curriculum revision and instructional improvement
- Strengthen clinical training experiences
- Improve student support and remediation processes
- Evaluate effectiveness of program modifications and interventions

Program modifications and assessment decisions are documented through:

- Faculty meeting minutes
- Annual Program Evaluation Reports
- Comprehensive Assessment Plan updates
- Curriculum committee records
- Assessment review documentation

Assessment findings are used to support continuous program improvement through systematic review of curriculum, student outcomes, clinical training experiences, and program policies.

Multi-Year Trend Analysis

Procedure for Multi-Year Trend Analysis

The CMHC Program conducts systematic multi-year trend analysis to evaluate program effectiveness, monitor student learning outcomes, assess Academic Quality Indicators (AQIs), and support continuous program improvement consistent with CACREP 2024 Standard 2.D requirements related to ongoing assessment and longitudinal evaluation.

1. Longitudinal Data Aggregation

KPI, AQI, disposition, CPCE, clinical evaluation, and survey data are compiled annually and maintained within the Program Assessment Master File to support longitudinal comparison across student cohorts and academic years.

2. Trend Identification and Review

Program faculty systematically review multi-year data patterns, including:

- Consistent areas of program strength
- Recurring areas below benchmark
- Variability across cohorts
- Patterns across developmental assessment points
- Changes in student performance over time
- Trends across multiple assessment measures and stakeholder feedback sources

3. Cross-Data Source Analysis

Faculty triangulate multiple assessment data sources, including:

- KPI outcomes
- CCS-R evaluations
- PCPE evaluations
- CPCE performance
- Practicum and internship evaluations
- Survey data
- AQI outcomes

This process assists faculty in determining whether identified patterns represent isolated cohort concerns or broader systemic program issues.

4. Contextual Interpretation of Data

Faculty interpret assessment findings within relevant contextual variables, including:

- Cohort size
- Delivery type
- Curriculum sequencing
- Clinical placement variables
- Changes in instructional or assessment practices

Given the program's smaller cohort sizes, faculty interpret data cautiously and prioritize patterns that persist across multiple cohorts and assessment cycles before implementing substantial programmatic changes.

5. Program Modification and Continuous Improvement

When trend analysis identifies sustained concerns or opportunities for improvement, faculty implement targeted program modifications that may include:

- Curriculum revision
- Assessment modification
- Clinical training enhancements
- Faculty calibration activities
- Student support interventions
- Changes to advising, remediation, or progression processes

All program modifications are documented in:

- Faculty meeting minutes
- Annual Program Evaluation Reports
- Comprehensive Assessment Plan revisions
- Curriculum and assessment records

6. Ongoing Longitudinal Monitoring

Trend data are updated and reviewed annually during faculty assessment review and retreat processes to ensure ongoing, systematic, and data-informed continuous program improvement.

Community Partner Engagement and Advisory Board

Consistent with CACREP 2024 standards related to systematic program evaluation, stakeholder engagement, academic quality review, and continuous program improvement, the CMHC Program maintains an Advisory Board that provides ongoing feedback regarding curriculum, clinical training, program effectiveness, and graduate preparation.

The Advisory Board meets at least annually and includes representation from key stakeholder groups, including:

- Program leadership
- Core counselor education faculty
- Practicum and internship site supervisors
- Employers of program graduates
- Program alumni
- Community mental health professionals and counseling stakeholders

Committee membership is selected to reflect diverse professional perspectives, clinical practice settings, geographic regions, and client population specializations relevant to clinical mental health counseling practice.

The Advisory Board provides structured feedback regarding:

- Curriculum development and revision
- Alignment of student competencies with professional practice expectations
- Clinical training and field placement experiences
- Emerging issues and trends within the counseling profession
- Program effectiveness and academic quality indicators
- Graduate preparation and stakeholder satisfaction
- Community and workforce needs relevant to clinical mental health counseling practice

Advisory Board feedback informs program evaluation, curriculum review, and continuous improvement planning processes.

Advisory Board Orientation and Participation Process

The CMHC Program provides orientation and ongoing communication to Advisory Board members regarding program mission, CACREP accreditation expectations, program outcomes, assessment processes, and advisory responsibilities. Beginning in the 2026–2027 academic year, advisory board members will receive annual orientation materials and recorded training updates reviewing:
• program assessment processes,
• Annual Program Evaluation findings,
• Academic Quality Indicators (AQIs),
• curriculum and program modifications,
• field placement needs,
• workforce and stakeholder trends,
• and advisory board feedback expectations.

Advisory Board members participate in annual review of program outcomes and provide recommendations related to curriculum relevance, professional preparation, workforce needs, field placement experiences, and continuous program improvement. Advisory Board feedback is documented in meeting minutes and incorporated into annual program evaluation and planning processes when applicable.

Advisory Board Documentation

The CMHC Program maintains documentation related to Advisory Board activities and stakeholder engagement, including:

1. Annual board membership records, including names, professional roles, affiliations, and stakeholder representation

2. Meeting agendas and minutes documenting discussion topics, recommendations, feedback, and program responses
3. Documentation of faculty review of Advisory Board feedback during annual assessment and program evaluation processes
4. Documentation of curriculum revisions, policy modifications, or program improvements resulting from stakeholder feedback
5. Records maintained within the program's administrative and assessment files for accreditation review purposes

Advisory Board feedback and related program responses are reviewed annually during faculty assessment and program evaluation processes and are incorporated into the Annual Program Evaluation Report and Comprehensive Assessment Plan review procedures.

The CMHC Program also conducts systematic stakeholder follow-up and program evaluation activities through:

- Alumni surveys
- Employer surveys
- Practicum and internship site supervisor evaluations
- Clinical placement feedback
- Graduate outcome tracking
- Stakeholder satisfaction data collection

Survey procedures include documentation of response rates and participation data to support interpretation of program evaluation findings and representativeness of stakeholder feedback.

Advisory Board recommendations are reviewed by core faculty during annual assessment and program evaluation meetings to determine appropriate programmatic responses, curriculum modifications, and continuous improvement actions.

Advisory Board Procedures

Purpose of the Advisory Board

Consistent with CACREP 2024 standards related to systematic program evaluation, stakeholder engagement, academic quality review, and continuous program improvement, the Clinical Mental Health Counseling (CMHC) Program maintains an Advisory Board that provides ongoing consultation, stakeholder feedback, and professional perspective regarding curriculum, student preparation, clinical training, and overall program effectiveness.

The Advisory Board serves in an advisory capacity to support the CMHC Program's mission, student learning outcomes, professional preparation goals, and continuous improvement processes.

Membership and Representation

The Advisory Board includes representation from relevant stakeholder groups associated with counselor education and clinical mental health counseling practice. Membership may include:
• Program leadership
• Core counselor education faculty
• Practicum and internship site supervisors
• Employers of program graduates
• Program alumni
• Licensed counselors and mental health professionals
• Community agency representatives
• School, healthcare, nonprofit, or integrated care professionals
• Other counseling stakeholders relevant to the program mission and workforce needs

Membership is selected to reflect diverse professional experiences, counseling practice settings, geographic regions, client populations, and areas of specialization relevant to clinical mental health counseling.

Board Structure and Meetings

The Advisory Board meets at minimum annually. Additional meetings, consultations, or electronic review processes may occur as needed.

Meetings may occur:
• in person,
• virtually,
• or through hybrid formats.

The Program Director coordinates Advisory Board meetings, prepares meeting materials, facilitates communication, and maintains documentation related to Advisory Board activities.

Advisory Board Responsibilities

The Advisory Board provides consultation and feedback regarding:
• curriculum relevance and development,
• alignment of student competencies with professional practice expectations,
• clinical training and field placement experiences,
• workforce and community mental health needs,
• emerging issues and trends within the counseling profession,
• program effectiveness and student preparation,
• stakeholder satisfaction and graduate readiness,
• and continuous program improvement processes.

The Advisory Board may review:
• Annual Program Evaluation findings,
• Academic Quality Indicators (AQIs),
• Key Performance Indicator (KPI) trends,
• stakeholder survey results,

• graduate outcome data,
• field placement feedback,
• curriculum modifications,
• and programmatic initiatives.

Advisory Board Orientation and Participation

The CMHC Program provides orientation and ongoing communication to Advisory Board members regarding:
• program mission and goals,
• CACREP accreditation expectations,
• assessment terminology and processes,
• Advisory Board responsibilities,
• program evaluation procedures,
• and stakeholder feedback processes.

Beginning in the 2026–2027 academic year, Advisory Board members will receive annual orientation materials and recorded training updates reviewing:
• program assessment processes,
• Annual Program Evaluation findings,
• Academic Quality Indicators (AQIs),
• curriculum and program modifications,
• field placement needs,
• workforce and stakeholder trends,
• and expectations for advisory participation and feedback.

Advisory Board members are encouraged to participate in annual review of program outcomes and provide recommendations related to curriculum relevance, professional preparation, workforce needs, field placement experiences, and continuous program improvement.

Faculty Review and Program Response

Advisory Board recommendations are reviewed by core faculty during annual assessment and program evaluation meetings to determine appropriate programmatic responses, curriculum modifications, assessment revisions, student support strategies, and continuous improvement actions.

When appropriate, faculty may implement:
• curriculum revisions,
• modifications to assessment procedures,
• changes to field placement processes,
• faculty development activities,
• revisions to advising or remediation procedures,
• or other programmatic improvements informed by stakeholder feedback.

Documentation and Record Retention

The CMHC Program maintains documentation related to Advisory Board activities and stakeholder engagement, including:

1. Annual membership records and stakeholder representation
2. Meeting agendas and minutes
3. Recommendations and feedback provided by Advisory Board members
4. Documentation of faculty review and program response
5. Curriculum revisions or program modifications resulting from stakeholder input
6. Annual Program Evaluation references to Advisory Board feedback
7. Orientation and training materials provided to Advisory Board members

Documentation is maintained within program administrative and assessment records for accreditation, assessment, and program evaluation purposes.

Stakeholder Feedback and Program Evaluation

In addition to Advisory Board consultation, the CMHC Program engages in systematic stakeholder feedback and program evaluation activities through:
• alumni surveys,
• employer surveys,
• practicum and internship site supervisor evaluations,
• field placement feedback,
• graduate outcome tracking,
• and stakeholder satisfaction data collection.

Survey procedures include documentation of participation rates and response rates to support interpretation of assessment findings and representativeness of stakeholder feedback.

Stakeholder feedback is reviewed annually as part of the program's continuous improvement and Comprehensive Assessment Plan review processes.

Public Disclosure

Consistent with CACREP 2024 public disclosure and program evaluation expectations, the CMHC Program publicly reports program outcome and effectiveness data through institutional and program communication platforms.

Publicly disclosed program outcome information includes:

- Program completion rates
- Credentialing examination pass rates
- Employment outcomes
- Program outcome and assessment data
- Required accreditation and program evaluation information
- Program mission, objectives, and student achievement information consistent with institutional and CACREP reporting expectations

Public disclosure data are reviewed and updated annually as part of the program's systematic evaluation and assessment cycle.

Summary

This Comprehensive Assessment Plan provides a systematic, developmental, and outcomes-based framework for evaluating student learning, professional dispositions, clinical competency development, academic quality indicators, and overall program effectiveness in alignment with CACREP 2024 standards related to Academic Quality, Foundational Counseling Curriculum, Professional Practice, and Clinical Mental Health Counseling specialty preparation.

The Comprehensive Assessment Plan ensures:

- Clear alignment among Program Learning Objectives (PLOs), Student Learning Outcomes (SLOs), Key Performance Indicators (KPIs), and CACREP standards
- Systematic assessment of professional knowledge, counseling skills, clinical competencies, and professional dispositions
- Clearly defined individual student performance expectations and program-level benchmarks
- Multiple measures and multiple developmental points of assessment across coursework and clinical training experiences
- Systematic collection, analysis, and review of assessment and Academic Quality Indicator (AQI) data
- Structured procedures for remediation, retention, progression, and student support
- Ongoing annual program evaluation and continuous quality improvement processes
- Multi-year trend analysis and longitudinal assessment review
- Integration of stakeholder and community partner feedback into program improvement efforts
- Transparent and systematic public disclosure of program outcomes and effectiveness indicators
- Data-informed decision-making processes related to curriculum, assessment, clinical training, and program operations

KPI Performance Indicators

This plan supports continuous program evaluation and improvement while ensuring that graduates demonstrate the professional knowledge, counseling competencies, ethical practice, clinical skills, and professional dispositions necessary for competent and effective clinical mental health counseling practice. Representative KPI standards are identified within each curricular area; however, Appendix A demonstrates where all CACREP standards are taught, reinforced, and assessed throughout the curriculum.

KPIs are evaluated using multiple measures and multiple points of assessment across coursework, clinical experiences, professional disposition reviews, and program evaluation processes.

Key Performance Indicators for the Eight Core Areas Chart						
	Overall Indicator for the Eight Core Areas					
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will demonstrate knowledge of professional counseling identity, ethical practice, professional roles and responsibilities, self-awareness, accountability, and professional dispositions necessary for effective and responsible clinical counseling practice. *COUN 505*: PCPE *COUN 530*: PCPE *Virtual Residency*: PCPE	**PLO 1: Professional Identity and Dispositions** Students will demonstrate a developing professional counseling identity characterized by ethical practice, self-awareness, accountability, and the dispositions necessary for effective and responsible clinical practice.	2.C.2 Strategies for demonstrating professional dispositions throughout the program, as evaluated across multiple points in time for purposes of student development, retention, remediation, and progression in the program.	*COUN 505* - **(I)** *COUN 530* - **(R)** *Virtual Residency* **(A)**	80% of students meet/exceed expectations	PCPE	No "Does Not Meet Expectations" ratings
1. Professional Counseling Orientation and Ethical Practice						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students apply ethical decision-making models and professional codes of ethics to clinical counseling scenarios, demonstrating	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills necessary to provide effective, ethical, and culturally responsive	3.A.10 Ethical standards of professional counseling organizations and credentialing bodies, and applications	*COUN 515* ***(I)***: Values & Ethics Paper *CMHC/COUN 570* ***(R)***: Addiction Podcast Series Episode #3 *CMHC 620* ***(A)***: CCS-R	80% of students score ≥ 85%, 80% of students score ≥ 45/60	Values & Ethics Paper, Addiction Podcast Series #3, CCS-R Ethics Section	Student score ≥ 80%, Student score ≥ 42/60

professional judgment, legal awareness, and ethical responsibility across service delivery modalities and specialized practice areas. *COUN 515*: Values& Ethics Paper, *CMHC/COUN 570:* Addiction Podcast Series Episode #3 *CMHC 620:* CCS-R Ethics Section	counseling across diverse client populations and practice settings.	of ethical and legal considerations in professional counseling	Ethics Section Score			
2. Social and Cultural Identities and Experiences						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students demonstrate knowledge of multicultural counseling, advocacy, spirituality, social justice, cultural identity, systemic influences, and the impact of heritage, beliefs, values, oppression, and acculturative experiences on client worldview, help-seeking behaviors, and counseling practice. *COUN 520:* Culture Immersion Experience Paper	**PLO 3: Advocacy and Spiritual Integration** Students will demonstrate the ability to integrate advocacy and spirituality into counseling practice and case conceptualization across diverse client populations and systemic contexts.	3.B.1 Theories and models of multicultural counseling, social justice, and advocacy	*COUN 520* ***(I)****:* Culture Immersion Experience Paper, *CMHC 520* ***(R)****:* Diversity in Mental Illness Group Presentation, *CPCE Subscale* ***(A)*** Social & Cultural Diversity	80% of students score ≥ 85%, 80% within 1 SD of national mean	Culture Immer-sion Experi-ence Paper, Diversity in Mental Illness Group Presenta-tion	Student score ≥ 80%, Raw score ≥ 80

CMHC 520: Diversity in Mental Illness Group Presentation *CPCE Subscale: Social & Cultural Diversity*						
3. Lifespan Development						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will apply theories of human growth and development across the lifespan, integrating biological, neurological, and physiological factors into clinical case conceptualization and treatment planning with diverse client populations. *COUN 525*: Theory Meets Therapy Project *CMHC 575*: Case Study #3	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills necessary to provide effective, ethical, and culturally responsive counseling across diverse client populations and practice settings.	3.C.10 Biological, neurological, and physiological factors that affect lifespan development, functioning, behavior, resilience, and overall wellness	*COUN 525* ***(I)*****:** Theory Meets Therapy Project, *CMHC 575* ***(R)*****:** Case Study #3 Theresa & Paper, *CPCE Subscale* ***(A)*** Human Growth & Development Subscale	8 (9 c f s t u c e r t s s c c r e ≥ 8 5 9 , 8 (9 v i	Theory Meets Therapy Project, Case Study #3 Theresa & Paper	Student score ≥ 80%, Raw score ≥ 80

Theresa & Paper *CPCE Subscale (A)* Human Growth & Development Subscale				t h i r 1 s l c f r a t i c r a l r e a r		
4. Career Development						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**P r o g r a m B e n c h - m a r k**	**Courses Bench-mark**	**Stude nt Bench -mark**
Students will apply career development theories, models, assessment strategies, and counseling interventions to support clients' career, educational, occupational, and life-role development across the lifespan,	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills necessary to provide effective, ethical, and culturally responsive counseling across diverse client populations and practice settings.	3.D.2 Approaches for conceptualizing the interrelationships among and between work, socioeconomic standing, wellness, disability, trauma, relationships, and other	*COUN 551* ***(I)*****:** Group Project: Determine Approaches Presentation *COUN 580* ***(R):*** Career Development Program Presentation, *CPCE Subscale* ***(A)*** Career Development Subscale	8 (9 c f s t u c e r t s s c c r	Group Project: Determine Approa-ches Presenta-tion, Career Develop-ment Program Presenta-tion	Stude nt score ≥ 80%, Raw score ≥ 80

including consideration of wellness, trauma, cultural factors, and contextual influences that affect career decision-making and access to opportunity. *COUN 551***:** Group Project: Determine Approaches Presentation *COUN 580**:*** Career Development Program Presentation, *CPCE Subscale:* Career Development Subscale		life roles and factors				
5. Counseling Practice and Relationships						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will demonstrate effective counseling microskills, therapeutic	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills	3.E.9 Interviewing, attending, and listening skills in the	*COUN 605* ***(I)*** Recording Assignment #6 + Paperwork (CCS-R), *CMHC 615* ***(R)*** Midterm - Student Intern Evaluation on CCS-R,		Recording Assignment #6 + Paper-work (CCS-R),	Student score ≥ 42/60

relationship skills, case conceptualization, and evidence-based counseling interventions in individual counseling practice, as evaluated through direct observation and structured clinical performance assessment. *COUN 605:* Recording Assignment #6 + Paperwork (CCS-R) *CMHC 615:* Midterm - Student Intern Evaluation on CCS-R, *CMHC 620:* Final - Student Intern Evaluation on CCS-R	necessary to provide effective, ethical, and culturally responsive counseling across diverse client populations and practice settings.	counseling process	*CMHC 620* ***(A)*** Final - Student Intern Evaluation on CCS-R	t u d e n t s s c c r e ≥ 4 5 / 6 (	Midterm - Student Intern Evaluation on CCS-R, Final - Student Intern Evaluation on CCS-R	
6. Group Counseling and Group Work						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**P r o g r a m B e n c h - m a r k**	**Courses Bench-mark**	**Student Bench-mark**
Students will apply group counseling theories, principles of	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and	3.F.4 Characteristics and functions of effective	*COUN 530* ***(I)*****:** Group Lab Reflection Paper #1 *CMHC 615* ***(R):*** Case Conceptua-lization, *CPCE Subscale* ***(A)***	8 (9 c f	Group Lab Reflection Paper #1, Case	Student score ≥ 80%,

group dynamics, therapeutic factors, and group facilitation skills in the development, leadership, and evaluation of group counseling experiences, consistent with ethical and culturally responsive group practice. *COUN 530:* Group Lab Reflection Paper #1 *CMHC 615:* Case Conceptualization, *CPCE Subscale* Group Work Subscale	clinical skills necessary to provide effective, ethical, and culturally responsive counseling across diverse client populations and practice settings.	group leaders	Group Work Subscale	s t u d e n t s s c o r e ≥ 8 5 % , 8 0 % o f s t u d e n t s s c o r e ≥ 4 5 / 6 0 , V i t h i n 1 s t I n f r a t i o n a l r e a	Conceptua-lization,	Raw score ≥ 80
7. Assessment and Diagnostic Processes						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will select, administer, score, interpret, and integrate formal and informal assessment and	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills necessary to provide effective,	**3.G.11** Diagnostic processes, including differential diagnosis and the use of current	*COUN 510* ***(I)*:** Assessments Presentation Project *CMHC 610* ***(R)*:** End-of-Semester	80% of students score ≥ 85%, 80% of students score ≥ 45/60,	Assess-ments Presenta-tion Project, End-of-Semester Paper-	Student score ≥ 80%, Student score ≥ 42/60,

diagnostic instruments, including structured interviews, appraisal methods, psychometric measures, symptom inventories, behavioral observations, and screening tools, to support clinical decision-making, case conceptualization, diagnosis, and culturally responsive treatment planning. *COUN 510:* Assessments Presentation Project *CMHC 610:* End-of-Semester Paperwork – CCS-R *CPCE Subscale* Assessment and Testing Subscale	ethical, and culturally responsive counseling across diverse client populations and practice settings.	diagnostic classification systems	Paperwork – CCS-R *CPCE Subscale* ***(A)*** Assessment and Testing Subscale	80% within 1 SD of national mean	work – CCS-R	Raw score ≥ 80
8. Research and Program Evaluation						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will evaluate quantitative, qualitative, and mixed methods research and apply evidence-based practices, needs assessment, and program evaluation	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills necessary to provide effective, ethical, and culturally responsive counseling across diverse client	**3.H.7** Use of research methods and procedures to evaluate counseling interventions	*COUN 585* ***(I):*** Program Evaluation Paper *COUN 510* ***(R):*** Case Study Report *CPCE Subscale* ***(A)*** Research & Program Evaluation Subscale	80% of students score ≥ 85%, 80% within 1 SD of national mean	Program Evalua-tion Paper, Case Study Report	Student score ≥ 80%, Raw score ≥ 80

strategies to counseling interventions, clinical decision-making, and program improvement within clinical mental health counseling settings. *COUN 585:* Program Evaluation Paper *COUN 510:* Case Study Report *CPCE Subscale* Research & Program Evaluation Subscale	populations and practice settings.					
9. Clinical Mental Health Counseling						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will apply diagnostic reasoning, clinical judgment, case conceptualization, and evidence-based treatment planning to complex client presentations, demonstrating competency in clinical mental health counseling practice consistent with CACREP Clinical Mental Health Counseling specialty standards,	**PLO 2: Clinical Competence** Students will demonstrate the knowledge and clinical skills necessary to provide effective, ethical, and culturally responsive counseling across diverse client populations and practice settings.	**5.C.4** Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management	*CMHC 610* ***(I)*****:** Case Concept-ualization Presenta-tion *CMHC 615* ***(R):*** Case Conceptua-lization Presentation *CMHC 620* ***(A)*****:** Case Conceptuali-zation Presentation	80% of students score ≥ 85%	Case Concep-tualization Presenta-tion, Case Concep-tualization Presenta-tion, Case Concep-tualization Presenta-tion	Student score ≥ 80%

ethical practice, and culturally responsive care. *CMHC 610***:** Case Conceptualization Presenta-tion *CMHC 615**:*** Case Conceptualization Presentation *CMHC 620**)*:** Case Conceptualization Presentation						
10. Spiritual Integration and Advocacy						
Key Performance Indicators	**Program Objective**	**CACREP Standards**	**I/R/A**	**Program Bench-mark**	**Courses Bench-mark**	**Student Bench-mark**
Students will apply counseling advocacy strategies and integrate spirituality and worldview as dimensions of human diversity into counseling practice and case conceptualization across diverse client populations and systemic contexts. *COUN 505***:** Interview Project *COUN 555***:** Final Paper *CMHC 620***:** Spiritual Integration Paper	**PLO 3: Advocacy and Spiritual Integration** Students will demonstrate the ability to integrate advocacy and spirituality into counseling practice and case conceptualization across diverse client populations and systemic contexts.	3.B.11 The role of religion and spirituality in clients' and counselors' psychological functioning	*COUN 505* ***(I)*:** Interview Project *COUN 555* ***(R)*:** Final Paper *CMHC 620* ***(A)*:** Spiritual Integration Paper	80% of students score ≥ 85%	Interview Project, Final Paper, Spiritual Integration Paper	Student score ≥ 80%

Ensuring Students are Informed of Expectations

All KPI rubrics are provided to students at the start of the course through Blackboard.

Site Supervisor Qualification Verification

The Clinical Coordinator verifies site supervisor licensure, professional experience, supervision qualifications, and completion of program orientation procedures prior to student placement.

Example of Program Modification Based on Assessment Data

Identified Need:
Based on student feedback from Group Counseling and faculty expertise, students needed additional time and experiential learning to fully develop group counseling skills and internalize group process principles.

Action Taken:
The Group Counseling course was expanded from an 8-week term to a full summer semester. Additionally, the primary text was changed to a more robust theoretical and practice-based resource to support deeper learning.

Rationale:
Extending the course provides students with more time for experiential learning, skill development, and supervision, supporting stronger alignment with CACREP group counseling competencies.

Outcome & Ongoing Evaluation:
This course revision will be implemented in the upcoming summer term. Outcome data will be collected following the course offering using KPI assignments, CCS-R evaluations, and student feedback. These data will be reviewed during the annual assessment cycle to evaluate the impact of this change and inform future program decisions. This change is currently being implemented, and outcome data will be collected and evaluated as part of our ongoing assessment cycle.

Appendix A: Master Curriculum Alignment Table

Appendix A presents the primary course assignments through which each CACREP 2024 standard is explicitly taught and assessed.
While additional learning activities (e.g., readings, quizzes, discussions) support competency development, the assignments listed below represent the primary evidence used to evaluate student learning.

CACREP Standards → Course → Assignment/Evidence

PROFESSIONAL ORIENTATION (3.A)

Standard	Course	Assignment / Evidence
3.A.1	COUN 505	• Final Exam • Mandatory Synchronous Class Meeting Discussion: Characteristics of the Effective Counselor and The History of the Counseling Profession
3.A.2	COUN 505	• Interview Project • Final Exam • Mandatory Synchronous Class Meeting Discussion: Characteristics of the Effective Counselor and The History of the Counseling Profession
3.A.3	COUN 555	• Reading Quiz • Paper: Crisis, Trauma, Suicide, and Counseling • Discussion: Suicide & Interdisciplinary Teams • Reflection Paper: Part of the Team (*team/collaboration component demonstrated through interdisciplinary crisis response discussion and assignments)* • Final Exam Paper
3.A.4	COUN 505	• Interview Project *(advocacy discussion embedded)* • Final Exam • Discussion: Ethics, Multicultural Counseling, and Social Justice
3.A.5	COUN 505	• Interview Project • Review CCS-R in Tevera Paper • Final Exam • Discussion: Ethics, Multicultural Counseling, and Social Justice
3.A.5	COUN 635	• Research Project • Discussion: Ethical and Legal Consideration • Discussion: Resumes and Job Hunting
3.A.6	COUN 505	• Verification of Professional Organization Membership • Final Exam • Discussion: A Christ Centered Community and Professional Organizations
3.A.6	COUN 635	• Research Project • Discussion: Ethical and Legal Considerations

Standard	Course	Assignment / Evidence
3.A.7	COUN 505	• Research Paper: Technology in Counseling, the Labor Market, Credentialing, and Legislation • Final Exam • Mandatory Synchronous Class Meeting Discussion: Accreditation in Counseling and Related Fields and Credentialing in Counseling and Related Fields
3.A.7	COUN 635	• State Licensing/Credentialing Presentation • Discussion: Wellness and Credentialing
3.A.8	COUN 505	• Research Paper: Technology in Counseling, the Labor Market, Credentialing, and Legislation • Final Exam • Discussion: Ethics, Multicultural Counseling, and Social Justice
3.A.9	COUN 505	• Research Paper: Technology in Counseling, the Labor Market, Credentialing, and Legislation • Final Exam
3.A.10	COUN 515	• Values & Ethics When Dealing with Difficult Situations Research Paper • Role Play 1 Counseling Adolescents: Teen Pregnancy Reaction Paper • Discussion: Ethics, Counselor as a Person and Professional and Values in the Helping Relationship
3.A.10	CMHC/COUN 570	• Reading quiz • Addiction Podcast Series Episode #3 Group Project
3.A.10	CMHC 620	• Case Conceptualization Presentation • End of Semester Paperwork: CCS-R
3.A.11	COUN 515	• Ethical Counselor Brochure • Discussion: Ethics, Counselor as a Person and Professional and Values in the Helping Relationship • Discussion: Biblical Verse and Ethics
3.A.11	COUN 635	• Wellness Plan and Workshop Presentation • Discussion: Wellness and Credentialing
3.A.11	CMHC/COUN 570	• Addiction Podcast Series Episode # 4 Group Project
3.A.12	COUN 515	• Ethical Counselor Brochure • Discussion: Supervision, Issues in Practice, Couples and Family Therapy, Group Work, and Social Justice
3.A.12	COUN 605	• Clinical Supervision and Individual Meeting with Your Instructor Reflection

SOCIAL & CULTURAL DIVERSITY (3.B)

As a Christian institution, the program integrates spirituality as a dimension of multicultural competence. Students are trained to ethically and respectfully engage with clients' diverse spiritual and religious identities, consistent with CACREP Standard 3.B.11.

Standard	Course	Assignment / Evidence
3.B.1	COUN 520	• Final Exam • Discussion: Cultural Humility Self-Assessment
3.B.1	CMHC 520	• Diversity in Mental Illness Group Presentation
3.B.2	COUN 520	• Culture Immersion Experience Paper • Personal Cultural Narrative
3.B.3	COUN 520	• Culture Immersion Experience Paper • Personal Cultural Narrative • Class Discussion *(application of culture to practice)*
3.B.3	CMHC 520	• Discussion: Case of Edwige • Mandatory Synchronous Class Meeting Discussion: Autism • Discussion: Case Study - Jaimie • Adverse Childhood Relationships and OCD Poster Presentation • Mandatory Synchronous Class Meeting Discussion: Gender Dysphoria • Diversity in Mental Illness Group Presentation • Multicultural Impacts on Diagnosis & Psychopathology Paper • Discussion: Case of Single Mom
3.B.4	COUN 520	• Culture Immersion Experience Paper
3.B.5	COUN 520	• Class Presentation Group Meeting #1 & #2 • Class Presentation
3.B.6	COUN 520	• Class Presentation Group Meeting #1 & #2 • Class Presentation • Final Exam
3.B.6	CMHC 520	• Biopsychosocial Paper • Discussion: Case of Edwige • Discussion: Case Study-Jaimie • Case Conceptualization: Dylan • Diversity in Mental Illness Group Presentation • Discussion: Fact Sheet • Discussion: Case of Single Mom • Mandatory Synchronous Class Meeting Discussion: Gender Dysphoria Multicultural Impacts on Diagnosis & Psychopathology Paper
3.B.7	COUN 520	• Class Presentation Group Meeting #1 & #2 • Class Presentation
3.B.8	COUN 520	• Personal Cultural Narrative
3.B.9	COUN 520	• Culture Immersion Experience Paper
3.B.10	COUN 520	• Class Presentation Group Meeting #1 & #2

Standard	Course	Assignment / Evidence
		• Class Presentation
3.B.11	CMHC 520	• Biopsychosocial Paper • Mandatory Synchronous Class Meeting Discussion: Gender Dysphoria • Diversity in Mental Illness Group Presentation • Multicultural Impacts on Diagnosis & Psychopathology Paper • Spiritual Integration Paper (integration of cultural and spiritual factors in client conceptualization)
3.B.11	CMHC/COUN 570	• Addiction Podcast Series Group Project • Discussion: Spirituality in Addiction
3.B.11	CMHC 575	• Research Paper Pt. I • Discussion: A Day in the Life • Case Study # 3 Theresa & Paper
3.B.11	COUN 555	• Paper: Suicide & the Minimum Standard of Care • Discussion: Being Intentional
3.B.11	COUN 580	• Career Counseling and Spiritual Integration Paper
3.B.11	COUN 635	• Research Project
3.B.11	COUN 550	• Class Discussion • Journal • Religious and Spiritual Values in Counseling Case Scenario • Personal Model of Counseling Paper and Video
3.B.11	COUN 551	• Journal • My Experience as a Counseling Client Process Paper

HUMAN GROWTH & DEVELOPMENT (3.C)

Standard	Course	Assignment/Evidence
3.C.1	COUN 525	• Theory Meets Therapy Project • Discussion: Spiritual Integration – Aging with Grace: Death, Dying, and Grieving • Discussion with Classmate: Nature vs. Nurture • Early Childhood Brochure • Significant Developmental Events in My Life Presentation
3.C.1	CMHC 515	• Family Development Video Presentation • Adlerian Genogram & Paper • Quiz • Midterm • Final Exam
3.C.2	COUN 525	• Theory Meets Therapy Project • Discussion: Middle Adulthood Case Conceptualization • Significant Developmental Events in My Life Presentation
3.C.2	COUN 520	• Class Discussion • Class Presentation Group Meeting #1 & #2 • Class Presentation • Final Exam
3.C.3	COUN 525	• Theory Meets Therapy Project • Bandura Discussion • Early Childhood Brochure
3.C.4	COUN 525	• Theory Meets Therapy Project • Discussion with Classmate: Nature vs. Nurture • Early Childhood Brochure • Discussion: Middle Adulthood Case Conceptualization • Significant Developmental Events in My Life Presentation
3.C.4	COUN 550	• Class Discussion • Final Exam • Case Conceptualizations • Discussion: Person Centered and Psychoanalytic • Mandatory Synchronous Class Meeting Discussion: Existential and Person Centered • Discussion: Gestalt and Feminist Therapy • Discussion: Family Systems and Integrative Perspective
3.C.4	COUN 551	• Discussion: Adlerian Therapy and Behavior Therapy • Mandatory Class Synchronous Meeting Discussion: CBT and Choice Theory/Reality Therapy • Discussion: Post Modern Approaches and Transactional Analysis • Case Conceptualizations • Final Exam
3.C.5	CMHC 520	•Discussion: Substance-Related and Addictive Disorders

Standard	Course	Assignment/Evidence
3.C.5	CMHC/COUN 570	• Addiction Podcast Series Group Project • Mindfulness Journal #1 • Mindfulness Journal #2 • Mindfulness Journal #3 • Discussion: 4-C's
3.C.6	CMHC 515	• Adlerian Genogram & Paper • Discussion: Family Scenarios • Discussion: LGBTQ+ • Article Critique Paper • Quiz • Midterm • Final Exam
3.C.7	COUN 525	• Theory Meets Therapy Project • Discussion with Classmate: Nature vs. Nurture • Early Childhood Brochure • Developmental Stage and Trauma Research Paper • Discussion: Spiritual Integration – Aging with Grace: Death, Dying, and Grieving • Discussion: Middle Adulthood Case Conceptualization • Significant Developmental Events in My Life Presentation
3.C.8	COUN 525	• Theory Meets Therapy Project
3.C.9	COUN 520	•Mandatory Synchronous Class Meeting Discussion: Human Sexuality
3.C.10	COUN 525	• Theory Meets Therapy Project • Early Childhood Brochure • Discussion: Middle Adulthood Case Conceptualization
3.C.10	CMHC 575	• Reading quiz • Midterm • Final Exam • Research Paper Pt. I • Case Study # 1 Albert & Paper • Discussion: Neurotransmission and Other Topics • Case Study # 2 Miquel & Paper • Research Paper Pt. II • Case Study # 3 Theresa & Paper
3.C.11	COUN 525	• Theory Meets Therapy Project • Discussion: Middle Adulthood Case Conceptualization • Significant Developmental Events in My Life Presentation
3.C.11	CMHC/COUN 570	• Reading quiz • Addiction Podcast Series Group Project • Mindfulness Journal #2 • LGBTQIA Discussion

Standard	Course	Assignment/Evidence
3.C.11	CMHC 575	• Reading quiz • Midterm • Final Exam • Research Paper Pt. I • Case Study # 1 Albert & Paper • Discussion: Neurotransmission and Other Topics • Case Study # 2 Miquel & Paper • Case Study # 3 Theresa & Paper
3.C.12	CMHC 515	• Adlerian Genogram & Paper • Case Conceptualization, Treatment Plan, and Role Play Video • Quiz • Midterm • Final Exam
3.C.13	COUN 525	• Theory Meets Therapy Project
3.C.13	CMHC/COUN 570	• Reading quiz • Addiction Podcast Series Group Project • Mindfulness Journal #1

CAREER DEVELOPMENT (3.D)

Standard	Course	Assignment/Evidence
3.D.1	COUN 580	• Reading Quiz • Career Theories Tool • Discussion: Career Counseling Theories/Models • Career Information Presentation • Career Counseling and Spiritual Integration Paper
3.D.2	COUN 550	• Chapter Reading • Case Conceptualizations • Class Discussion
3.D.2	COUN 551	• Chapter Reading • Case Conceptualizations • Group Project: Determine Approaches Presentation
3.D.2	COUN 580	• Reading Quiz • Career Development Program Presentation • Discussion: Career Development Program
3.D.3	COUN 580	• Reading Quiz • Career Assessment Paper • Career Information Presentation
3.D.4	COUN 580	• Reading Quiz • Career Assessment Paper
3.D.5	COUN 580	• Reading Quiz • Career Assessment Paper
3.D.6	COUN 580	• Reading Quiz • Career Development Program Presentation • Discussion: Career Development Program
3.D.7	COUN 580	• Reading Quiz • Career Counseling and Spiritual Integration Paper • Discussion: Advocating for Diverse Clients
3.D.8	COUN 580	• Reading Quiz • Case Study Paper
3.D.9	COUN 580	• Reading Quiz • Discussion: Career Exploration Case Study
3.D.10	COUN 580	• Discussion: Career Exploration Case Study
3.D.11	COUN 580	• Discussion: Career Exploration Case Study
3.D.12	COUN 580	• Career Counseling Ethics Paper

COUNSELING RELATIONSHIPS (3.E)

Standard	Course	Assignment/Evidence
3.E.1	COUN 550	• Case Conceptualizations • Religious and Spiritual Values in Counseling Case Scenario • Class Discussion • Final Exam Exam
3.E.1	COUN 551	• Case Conceptualizations • Discussion: Adlerian Therapy and Behavior Therapy • Mandatory Class Synchronous Meeting Discussion: CBT and Choice Theory/Reality Therapy • Discussion: Post Modern Approaches and Transactional Analysis • Final Exam Exam
3.E.1	COUN 635	• Treatment Plan
3.E.2	COUN 605	• Recording Assignments
3.E.2	CMHC 610	• Group Supervision • Journal Entries
3.E.3	COUN 550	• Case Conceptualizations
3.E.3	COUN 551	• Case Conceptualizations
3.E.3	CMHC 515	• Case Conceptualization, Treatment Plan, and Role Play Video
3.E.3	CMHC 520	• Biopsychosocial Paper • Discussion: Case of Edwige • Schizophrenia Paper • Case Conceptualization: Olivia • Discussion: Case Study - Jaimie • Adverse Childhood Relationships and OCD Poster Presentation • Case Conceptualization: Dylan • Discussion: Case of Single Mom
3.E.3	CMHC 610	• Case Conceptualization Presentation
3.E.4	CMHC 610	• Group Supervision • Client Session Recordings • Case Conceptualization Presentation
3.E.5	COUN 605	• Recording Assignments (Technology Use)
3.E.6	COUN 515	• Study Guide with Video Presentation • Discussion: Biblical Verse and Ethics • Role Play 1 Counseling Adolescents: Teen Pregnancy Reaction Paper • Discussion: Ethics, Counselor as a Person and Professional and Values in the Helping Relationship

Standard	Course	Assignment/Evidence
		• Mandatory Synchronous Class Meeting Discussion: Multicultural, Diversity, Client Rights, and Boundaries
3.E.6	CMHC 610	• Client Session Recordings
3.E.7	COUN 550	• Class Discussion • Final Exam
3.E.7	COUN 551	• Case Conceptualizations • Group Project: Determine Approaches Presentation
3.E.7	COUN 605	• Recording Assignments (Technology Use)
3.E.8	COUN 550	• Class Discussion • Paper: Reflect on the Counselor as a Person and Professional • Case Conceptualizations
3.E.8	COUN 551	• Discussion: Adlerian Therapy and Behavior Therapy • Mandatory Class Synchronous Meeting Discussion: CBT and Choice Theory/Reality Therapy • Discussion: Post Modern Approaches and Transactional Analysis • Case Conceptualizations • My Experience as a Counseling Client Process Paper
3.E.8	COUN 605	• Recording Assignments (Technology Use)
3.E.9	COUN 605	• Recording Assignment #6 + Paperwork • Recording Assignments
3.E.9	COUN 635	• Research Project • Treatment Plan • Discussion: Ethical and Legal Considerations
3.E.9	CMHC 615	• Midterm Paperwork – CCS-R • Client Session Recordings • Case Conceptualization Presentation
3.E.10	COUN 550	• Class Discussion • Case Conceptualizations • Personal Model of Counseling Paper and Video
3.E.10	COUN 551	• Case Conceptualizations
3.E.10	CMHC 610	• Group Supervision • Client Session Recordings
3.E.11	CMHC 610	• Client Session Recordings • Case Conceptualization Presentation
3.E.12	COUN 605	• Recording Assignments
3.E.13	COUN 605	• Recording Assignments • Website Scavenger Hunt: The Treatment Plan
3.E.13	COUN 635	• Treatment Plan • Discussion: Ethical and Legal Considerations

Standard	Course	Assignment/Evidence
3.E.14	COUN 605	• Recording Assignments • Website Scavenger Hunt: The Treatment Plan
3.E.15	COUN 550	• Personal Model of Counseling Paper and Video
3.E.15	COUN 551	• Case Conceptualizations
3.E.15	CMHC 610	• Client Session Recordings
3.E.16	CMHC 610	• Field Placement Records and Documentation • Group Supervision
3.E.17	COUN 605	• Recording Assignments • Website Scavenger Hunt: The Treatment Plan
3.E.18	CMHC 575	• Reading quiz • Midterm • Final Exam • Research Paper Pt. I • Case Study # 1 Albert & Paper • Discussion: Neurotransmission and Other Topics • Case Study # 2 Miquel & Paper • Research Paper Pt. II • Case Study # 3 Theresa & Paper
3.E.19	COUN 555	• Reading Quiz • Paper: Crisis, Trauma, Suicide, and Counseling • Reflection Paper: Part of the Team • Practice Video # 1 • Paper: Suicide & the Minimum Standard of Care • Practice Video # 2 • Final Paper
3.E.20	COUN 555	• Reading Quiz • Paper: Crisis, Trauma, Suicide, and Counseling • Reflection Paper: Part of the Team • Practice Video # 1 • Practice Video # 2 • Website Scavenger Hunt & Paper • Treating Trauma Conference Poster • Final Paper
3.E.21	COUN 550	• Class Discussions • Personal Model of Counseling Paper and Video • Journal
3.E.21	COUN 551	• Journal

GROUP WORK (3.F)

Standard	Course	Assignment/Evidence
3.F.1	COUN 530	• Group Labs • Create a Group Picture Collage • Group Dynamics Paper • Group Lab & Spiritual Integration Paper
3.F.2	COUN 530	• Group Labs • Group Picture Collage • Group Dynamics Paper • Group Lab Weekly Reflections • Group Lab & Spiritual Integration Paper
3.F.3	COUN 530	• Group Dynamics Paper • Group Lab Weekly Reflections • Group Lab Weekly Reflections
3.F.4	COUN 530	• Group Labs • Group Picture Collage • Group Dynamics Paper • Group Lab Reflection Paper #1 • Group Lab & Spiritual Integration Paper • CCS-R Instructor Assessment
3.F.5	COUN 530	• Group Picture Collage • Group Dynamics Paper
3.F.6	COUN 530	• Group Dynamics Paper • Group Lab Weekly Reflections • Group Lab & Spiritual Integration Paper • Group Picture Collage
3.F.7	COUN 530	• Group Dynamics Paper • Group Picture Collage
3.F.8	COUN 530	• Group Dynamics Paper • Group Lab Weekly Reflections • Group Lab & Spiritual Integration Paper
3.F.9	COUN 530	• Group Dynamics Paper • Group Lab Weekly Reflections
3.F.10	COUN 530	• Group Labs and Videos (1-12)

ASSESSMENT (3.G)

Standard	Course	Assignment/Evidence
3.G.1	COUN 510	• Reading quiz • Midterm • Case Study Report • Final Exam
3.G.2	COUN 510	• Reading quiz • Assessments Presentation Project • Midterm • Final Exam
3.G.3	COUN 510	• Reading quiz • Midterm • Case Study Report • Final Exam
3.G.4	COUN 510	• Discussion – Reliability & Validity • Assessments Presentation Project • Reading quiz • Midterm • Final Exam
3.G.5	COUN 510	• Reading quiz • Midterm • Final Exam • Case Study Report
3.G.6	COUN 510	• Assessments Presentation Project • Reading quiz • Midterm • Final Exam
3.G.7	COUN 510	• Case Study Report • Final Exam
3.G.8	COUN 510	• Case Study Report • Mandatory Synchronous Class Meeting Discussion: Career and Personality Assessment
3.G.8	COUN 580	• Career Assessment Paper
3.G.9	COUN 510	• Assessments Presentation Project • Mandatory Synchronous Class Meeting Discussion: Assessment Presentation Project
3.G.10	COUN 510	• Assessments Presentation Project
3.G.11	COUN 510	• Midterm • Case Study Report
3.G.12	CMHC/COUN 570	• Mandated Reporter Paper
3.G.13	COUN 555	• Reading Quiz • Paper: Crisis, Trauma, Suicide, and Counseling

Standard	Course	Assignment/Evidence
		• Reflection Paper: Part of the Team • Practice Video # 1 • Practice Video # 2 • Final Paper
3.G.14	COUN 555	• Paper: Crisis, Trauma, Suicide, and Counseling • Reflection Paper: Part of the Team • Treating Trauma Conference Poster • Final Paper
3.G.15	COUN 555	• Reading Quiz • Paper: Counselors as Mandated Reporters
3.G.16	COUN 510	• Case Study Report
3.G.17	COUN 510	• Case Study Report • Reading quiz • Midterm • Final Exam

RESEARCH & PROGRAM EVALUATION (3.H)

Standard	Course	Assignment/Evidence
3.H.1	COUN 585	• **Program Evaluation Paper** • Final Paper • Reading Quizzes
3.H.2	COUN 585	• Find a Gap • Annotated Bibliography
3.H.3	COUN 585	• Discussion Board: Qualitative Research • Discussion Board: Qualitative Research #2 • Reading Quizzes • Final Paper
3.H.4	COUN 585	• Find a Gap • Annotated Bibliography • Discussion Board: Correlational Research • Research Design • Midterm • Final Paper
3.H.5	COUN 585	• Find a Gap • Discussion Board: Experimental Research • Final Exam
3.H.6	COUN 585	• Find a Gap • Annotated Bibliography • Discussion Board: Presenting Research • Reading Quizzes
3.H.7	COUN 585	• Program Evaluation Paper • Final Topic
3.H.8	COUN 585	• Program Evaluation Paper
3.H.9	COUN 585	• Program Evaluation Paper • Reading Quizzes
3.H.10	COUN 585	• Program Evaluation Paper • Three Identical Strangers Paper
3.H.11	COUN 585	• Program Evaluation Paper • Three Identical Strangers Paper • Final Exam

CMHC SPECIALTY (5.C)

Standard	Course	Assignment
5.C.1	CMHC 520	• Prisoner Mental Health Paper • Discussion: Case of Edwige • Mandatory Synchronous Class Meeting Discussion: Autism • Synchronous Discussion – Sleep Hygiene • Eating Disorder Presentation • Case Conceptualization: Steven • Autism Compare/Contrast Paper • Schizophrenia Paper • Case Conceptualization: Olivia • Discussion: Case Study - Jaimie • Adverse Childhood Relationships and OCD Poster Presentation • Case Conceptualization: Dylan • Discussion: Fact Sheet • Discussion: Substance-Related and Addictive Disorders • Mandatory Synchronous Class Meeting Discussion: Gender Dysphoria
5.C.1	CMHC 575	• Reading quiz • Midterm • Final Exam • Research Paper Pt. I • Case Study # 1 Albert & Paper • Case Study # 2 Miquel & Paper • Research Paper Pt. II • Case Study # 3 Theresa & Paper
5.C.2	CMHC 520	• Case Conceptualization: Olivia • Case Conceptualization: Dylan • Case Conceptualization: Steven
5.C.3	COUN 505	• Research Paper: Technology in Counseling, the Labor Market, Credentialing, and Legislation • Final Exam • Discussion: Ethics, Multicultural Counseling, and Social Justice
5.C.3	COUN 515	• Study Guide with Video Presentation • Mandatory Synchronous Class Meeting Discussion: Multicultural, Diversity, Client Rights, and Boundaries
5.C.3	CMHC 575	• Case Study # 2 Miquel & Paper • Discussion: A Day in the Life • Case Study # 3 Theresa & Paper
5.C.4	COUN 510	• Case Study Report • Reading quiz • Final Exam

Standard	Course	Assignment
5.C.4	COUN 605	• Recording Assignments • Website Scavenger Hunt: Informed Consent Document • Website Scavenger Hunt: The Intake Assessment • Website Scavenger Hunt: The Treatment Plan • Website Scavenger Hunt: Termination Summary/Discharge Plan
5.C.4	CMHC 515	• Case Conceptualization, Treatment Plan, and Role Play Video • Quiz • Midterm • Final Exam
5.C.4	CMHC 520	• Prisoner Mental Health Paper • Biopsychosocial Paper • Discussion: Case of Edwige • Complex PTSD Brochure • Discussion – DID • Case Conceptualization: Steven
5.C.4	CMHC 575	• Research Paper Pt. I • Case Study # 1 Albert & Paper • Case Study # 2 Miquel & Paper • Discussion: A Day in the Life • Case Study # 3 Theresa & Paper
5.C.4	CMHC 615	• Case Conceptualization Presentation
5.C.5	COUN 605	• Recording Assignments
5.C.6	CMHC/COUN 570	• Reading quiz • Addiction Podcast Series Group Project
5.C.7	CMHC/COUN 570	• Addiction Podcast Series Group Project
5.C.8	COUN 555	• Website Scavenger Hunt & Paper • Practice Video # 2 • Treating Trauma Conference Poster • Discussion: Being Intentional • Final Paper
5.C.8	CMHC 575	• Research Paper Pt. I • Case Study # 2 Miquel & Paper • Discussion: A Day in the Life • Case Study # 3 Theresa & Paper
5.C.9	COUN 605	• Insurance Benefits Experience • Case Notes
5.C.9	CMHC 575	• Case Study # 2 Miquel & Paper
5.C.9	CMHC 615	• Case Conceptualization Presentation