



MASTER OF SCIENCE DEGREE IN MENTAL HEALTH COUNSELING

STUDENT HANDBOOK

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Vision, Mission, and Values

Pace University Vision

We educate those who aspire to excellence and leadership in their professions, their lives, and their communities. Through teaching, scholarship, and creative pursuits, our faculty foster a vibrant environment of knowledge creation and application. Faculty engage students in shared discovery and are committed to guiding students in their education, providing them with a strong foundation for leading meaningful and productive lives.

We embrace a culture of quality improvement and shared values to ensure an informed, responsive, caring, and effective community empowered to build and sustain a great University. Together, faculty, administrators, and staff pursue innovation in academic programs and administrative services. We operate with integrity, following through on our commitments to students and each other, holding ourselves accountable for our decisions and actions. We embody an ethos of respect for, and celebration of, our diversity, creating an inclusive and welcoming environment where every person is encouraged to freely and respectfully contribute to the life of the University.

Pace University Mission

Our mission is *Opportunitas*. Pace University provides to its undergraduates a powerful combination of knowledge in the professions, real-world experience, and a rigorous liberal arts curriculum, giving them the skills and habits of mind to realize their full potential. We impart to our graduate students a deep knowledge of their discipline and connection to its community. This unique approach has been firmly rooted since our founding and is essential to preparing our graduates to be innovative thinkers who will make positive contributions to the world of the future.

Pace University Values

In pursuing its vision and mission, the following values will guide Pace's specific goals and activities:

- **Excellence and continuous innovation** – in teaching, scholarship, professional preparation, service, and institutional management.
- **Independent thinking** – in individual, collaborative and interdisciplinary learning, research and scholarship.
- **Diversity** – in gender and in socioeconomic, racial/ethnic, national, and religious backgrounds and traditions.
- **Professionalism** – in the standards of knowledge, preparation, presentation, and ability to learn that are expected of Pace students.
- **The highest standards** – of truth, ethical behavior, and academic freedom in every aspect of the University's life and actions.

MHC Program Value Statement

Respect for diversity and for values different from one's own is a central value of the Pace University mental health counseling training program. The valuing of diversity is consistent with the profession of counseling as articulated in the American Counseling Association's Code of Ethics (2014).

Our academic training program, and our practicums and internships that employ counselors exist within multicultural communities that contain people of diverse racial, ethnic, and class backgrounds; national origins; religious, spiritual and political beliefs; physical abilities; ages; genders; gender identities, sexual orientations, and physical appearance. Our program, consonant with the ACA Code of Ethics, recognizes that our training community is enriched by members' openness to learning about others who are different than them as well as acceptance of others. Our training community (students, faculty, and staff) work together to create a training environment that is characterized by respect, safety, and trust. Further, faculty and students are expected to be respectful and supportive of all individuals including but not limited to clients, staff, peers, and research participants.

All members of our training community are expected to be committed to the social values of respect for diversity, inclusion, and equity and are expected to be committed to critical thinking and the process of self-examination so that such prejudices or biases (and the assumptions on which they are based) may be evaluated in the light of available scientific data, standards of the profession, and traditions of cooperation and mutual respect. Thus, all members are expected to demonstrate a willingness to examine their personal values, and to acquire and utilize professionally relevant knowledge and skills regardless of their beliefs, attitudes, and values.

Our program maintains that students personally introspect about personal life experiences as an essential component of the training program. Specifically, while in the program students will be expected to engage in self-reflection and introspection on their attitudes, beliefs, opinions, feelings and personal history. Trainees will be expected to examine and attempt to resolve any of the above in order to eliminate potential negative impact on their ability to perform the functions of a mental health counselor.

The ACA Preamble to its Code of Ethics states:

The American Counseling Association (ACA) is an educational, scientific, and professional organization whose members work in a variety of settings and serve in multiple capacities. Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals. Professional values are an important way of living out an ethical commitment. The following are core professional values of the counseling profession:

1. enhancing human development throughout the life span;
2. honoring diversity and embracing a multicultural approach in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts;

3. promoting social justice;
4. safeguarding the integrity of the counselor–client relationship; and
5. practicing in a competent and ethical manner.

MHC Program Mission Statement

The mission of the Mental Health Counseling program is to develop and foster a curriculum and climate that promotes the values and mission statement of Pace University, as well as employ the most recently published standards of the Council for Accreditation of Counseling and Related Educational Programs (CACREP). We are committed to providing personalized instruction to our students to assist in the development and enhancement of their personal qualities and characteristics, knowledge, skills, and attitudes in becoming culturally competent and interpersonally-skilled mental health counselors working with children, adolescents, families, and adults in a variety of settings. Lastly, we are committed to ongoing self-evaluation and growth of the program and the students, while maintaining a curriculum that meets the changing needs of students coming to Pace University’s Mental Health Counseling program that provides them an exceptional education as a mental health counselor.

Mental Health Counseling Program

Program Objectives

1. Students will demonstrate knowledge of the history, philosophy, licensure, supervision, and ethics in the profession.
2. Students will show knowledge of multicultural characteristics, counseling competencies, and social justice issues related to diverse groups.
3. Students will show knowledge of lifespan development, learning, and abnormal development including addictions, trauma, wellness, and resilience.
4. Students will show knowledge of career counseling theories and strategies including ethical considerations.
5. Students will demonstrate knowledge and skills in counseling in various modalities (individual, group, family) including suicide and crisis interventions.
6. Students will be knowledgeable of theories and practice of group counseling and participate in small group activity.
7. Students will show knowledge and skills in gathering, analyzing, interpreting and presenting data about clients and be familiar with assessment with DSM-5.
8. Students will show understanding of research concepts and be able to interpret research literature and program evaluation.
9. Through supervised practice students will integrate knowledge and skills of a successful counselor.
10. Through self-reflection, students will develop an understanding of self in the process of counseling and show a personal approach to counseling.

Course Requirements

A total of 60 credits are required in the Mental Health Counseling program: 48 credits in required courses and 12 in elective courses.

Required Courses

There are 16 required courses (48 credits).

- MHC 630** Helping Relationships: Theories and Techniques of Counseling I - *3 credits*
- MHC 631** Helping Relationships: Theories and Techniques of Counseling II - *3 credits*
- MHC 632** Orientation to Addiction: Etiology, Screening, and Treatment - *3 credits*
- MHC 652** Human Growth and Development - *3 credits*
- MHC 658** Group Dynamics - *3 credits*
- MHC 672** Psychopathology and Personality Disorders - *3 credits*
- MHC 674** Integrating Seminar: Professional Orientation and Ethics - *3 credits*
- MHC 675** Field Experience: Counseling Internship I - *3 credits*
- MHC 676** Field Experience: Counseling Internship II - *3 credits*
- MHC 677** Research and Program Evaluation - *3 credits*
- MHC 678** Career and Lifestyle Development - *3 credits*
- MHC 679** Marriage and Family Systems and Counseling: Recognizing and Reporting Child Abuse and Maltreatment - *3 credits*
- MHC 685** Social and Cultural Foundations of Counseling - *3 credits*
- MHC 686** Appraisal and Assessment of Individuals, Couples, and Families - *3 credits*
- MHC 687** Foundations of Mental Health Counseling and Consultation - *3 credits*
- MHC 694** Practicum in Mental Health Counseling - *3 credits*

Elective Courses

Students choose four 600-level electives (12 credits) from the following list or from newly-created electives. These electives are not offered on a set rotation. They are a sample of electives that have been offered based on student interest.

- MHC 601** Death, Meaning, and Counseling - *3 credits*
- MHC 602** Correctional Counseling: From Incarceration & Beyond - *3 credits*
- MHC 606** Clinical Work with Adolescents - *3 credits*
- MHC 611** Counseling Service Member, the Military and their Family - *3 credits*
- MHC 613** Current Perspectives on PTSD Counseling - *3 credits*
- MHC 614** Current Perspectives on Grief Counseling - *3 credits*

- MHC 620** Introduction to Gerontology - *3 credits*
- MHC 622** Trauma and Loss: Empirical Perspectives 3 credits
- MHC 638** Positive Psychology and Psychotherapy - *3 credits*
- MHC 651** Issues in Child Psychotherapy - *3 credits*
- MHC 653** Counseling Gay, Lesbian, Bisexual, and Transgender Clients - *3 credits*
- MHC 659** Introduction to Cognitive Behavior Therapy - *3 credits*
- MHC 664** Building your Ideal Private Practice - *3 credits*
- MHC 668** Spiritual Issues in Counseling - *3 credits*
- MHC 669** Couple Counseling - *3 credits*
- MHC 688** Sex Education and Counseling: Intimacy and Sexuality - *3 credits*
- MHC 690** Telemental Health: Best Practices and Ethical Considerations - *3 credits*
- MHC 697** Counseling the Older Adult - *3 credits*

MS in Mental Health Counseling – 60 Credits

Name _____

U# _____ Graduation Date _____ GPA _____

REQUIRED COURSES (48 Credits)	CRD	GRADE	SEM	NOTES
MHC 630 Helping Relationships: Counseling Theories and Techniques I	3			1st semester
MHC 631 Helping Relationships: Counseling Theories and Techniques II Prereq: 630	3			2nd semester
MHC 632 Orientation to Addiction: Etiology, Screening, and Treatment	3			2nd or 3rd semester
MHC 652 Human Growth and Development	3			1st semester
MHC 658 Group Dynamics Prereq: 630, 672	3			2nd or 3rd semester
MHC 672 Psychopathology and Personality Disorders	3			1st semester
MHC 687 Foundations of Mental Health Counseling and Consultation	3			1st or 2nd semester
MHC 677 Research and Program Evaluation Prereq: 630	3			2nd or 3rd semester
MHC 678 Career and Lifestyle Development Prereq: 630	3			2nd or 3rd semester
MHC 679 Marriage and Family Systems and Counseling: Recognizing and Reporting Child Abuse and Maltreatment Prereq: 630	3			2nd or 3rd semester
MHC 685 Social and Cultural Foundations of Counseling Prereq: 630	3			2nd or 3rd semester
MHC 686 Appraisal and Assessment of Individuals, Couples, Families, and Groups Prereq: 630	3			2nd or 3rd semester
MHC 694 Practicum in Mental Health Counseling Prereq: 630, 631, 632, 652, 672, 687, 658, 685, 677, 686, 679, 678	3			You must have at least 42 credits to start PSY 694 and get departmental approval
MHC 675 Field Experience in Counseling: Internship I Prereq: 694	3			
MHC 676 Field Experience in Counseling: Internship II Prereq: 675	3			
MHC 674 Integrating Seminar: (last class) Professional Orientation and Ethics – capstone	3			
ELECTIVES (12 Credits)	CRD	GRADE	SEM	NOTES
MHC	3			
MHC	3			
MHC	3			
MHC	3			

If your grade is B- or below in any course, you will have to repeat the course. You can request a re-computation only if your grade is an F. By signing below you are certifying that you have read and agreed to all the Mental Health Counseling requirements.

Signature of Student _____ Date _____

Course Descriptions

Required Courses

MHC 630 Helping Relationships: Counseling Theories and Techniques I

Students will be introduced to general theories and basic skills used in counseling. The students will be asked to do research and to use audio and videotaping to achieve the skills goal. An understanding of counseling and consultation processes will include an introduction to ethical issues and to the client-counselor relationship.

MHC 631 Helping Relationships: Counseling Theories and Techniques II

This course will acquaint students with major approaches to psychological counseling and allow them to develop elementary proficiency in applying them to the counseling and consultation process. Special topics include: ethical considerations, confidentiality, and legal issues (e.g., professional liability).

MHC 632 Orientation to Addiction: Etiology, Screening, Treatment

Students completing this course will critically examine various models for understanding the causes of alcoholism and substance abuse and their implications for treatment. The students will become familiar with treatment approaches based on these models. Special emphasis is given to: 12-step and other self-help programs, relapse prevention and psychopharmacology.

MHC 652 Human Growth and Development

The primary objective of this course is to provide a broad overview of the field of development psychology and relate this knowledge to your role as future clinicians. The semester will encompass four major areas: (1) Historical Precedents and Fundamentals Principles – first we will examine the philosophical underpinnings of developmental psychology and related conceptualizations of human nature; (2) Learning and Cognition—we will focus on human learning, examining theories and research that have attempted to explain how humans process information throughout development; (3) Theories of Personality Development; and (4) Issues in Development – here we will take a more focused look at various issues across the life course and how they might affect an individual's life and present themselves in mental health counseling.

MHC 672 Psychopathology and Personality Disorders

This course will allow students to become proficient in the understanding and use of psychiatric terminology and in the forming and testing of hypotheses about using criteria set forth in DSM-IV. Upon completion of the course, students will have knowledge of the principle pharmacological and psychological approaches to treatment of the disorders discussed.

MHC 674 Integrating Seminar: Professional Orientation and Ethics

Prerequisite: 42 credits earned before registering. Needs Approval from Program Director.

This is, in most cases, one of the final courses in your master's degree program of study. In it, we will bring together key topics you have learned as well as selected special topics for review and examination, the specific objectives of the course are: (1) to reflect on and examine your own views on personality, psychopathology, and counseling and psychotherapy, as these are informed by different theories and techniques; (2) to identify your values as these might affect your work as a counselor; and (3) to understand professional and ethical issues in counseling by reviewing relevant ethical codes and legal requirements.

MHC 675 Field Experience in Counseling: Internship I

Prerequisite: MHC 694 - Department approval required.

This is a 300-hour internship in Mental Health Counseling (e.g. Substance abuse counseling, grief counseling, or other approved counseling) setting under the clinical supervision of a site supervisor. The seminar students meet weekly with faculty.

MHC 676 Field Experience in Counseling: Internship II

Prerequisite: MCH 675 - Department approval required.

A 300-hour internship in a substance abuse counseling, grief counseling, or other approved setting under the clinical supervision of a site supervisor. The seminar students meet weekly with faculty.

MHC 687 Foundations of Mental Health Counseling and Consultation

This course is designed to promote a foundational appreciation and understanding of the various issues that confront mental health professionals. It is also intended to provide an understanding and appreciation. The course also seeks to provide the student with the basic tools and information to make informed decisions in the light of existing regulations, policies, laws and code of ethics.

MHC 677 Research and Program Evaluation

This is an introduction to research methods, basic statistical analysis, needs assessment, and program evaluation. Topics include: the importance of research, descriptive statistics, research methods, the use of computer technology, principles, models and applications of needs assessment and program evaluation, use of research to improve counseling effectiveness, and ethical (legal) considerations in research.

MHC 678 Career and Lifestyle Development

This is an introduction to understanding career development and related life factors. Topics include: career development theories and decision-making models; career, educational, and labor market resources; career/educational planning, assessment instruments and technologies; career development program planning; interrelationships among work, family, and other life roles; career counseling processes, and ethical (legal) considerations.

MHC 679 Marriage and Family Systems and Counseling: Recognizing and Reporting Child Abuse and Maltreatment

An introduction to family counseling. Beginning with a brief history of this approach, it covers philosophical and etiological premises of family counseling. This course constitutes a survey of some of the major approaches to family therapy that are in use today. An important segment of this course covers the NYS-mandated training in recognition and reporting of child abuse and maltreatment.

MHC 685 Social and Cultural Foundations of Counseling

This course provides an understanding of the cultural context of relationships, issues and trends in a multicultural and diverse society related to such factors as culture, ethnicity, nationality, age, gender, sexual orientation, mental and physical characteristics, education, family values, religious and spiritual values, socioeconomic status and unique characteristics of individuals, couples, families, ethnic groups, and communities including: multicultural and pluralistic trends, attitudes, beliefs, understandings, and acculturative experiences, strategies for working with diverse populations, social justice, advocacy and conflict resolution, theories of multicultural counseling, and ethical and legal considerations.

MHC 686 Appraisal and Assessment of Individuals, Couples, Families, and Group

This course integrates individual and group approaches to interviewing and appraisal techniques, including an understanding of individual and group approaches to assessment and evaluation, including historical perspectives to assessment, general principles of case conceptualization, reliability and validity and statistical concepts and basic concepts of various assessment techniques, as well as ethical and legal issues. Diagnostic assessment involves the selection, administration, scoring, and interpretation of various types of tests used in a counseling setting and the factors related to the assessment and evaluation of individuals, groups, and specific populations.

MHC 694 Practicum in Mental Health Counseling

Prerequisites: MHC 630, 631, 632, 652, 672, 687, 685, 677, 686, 658, 679, 678. Required to enroll: 42 credits and departmental approval.

This course is a 100-hour clinical experience (40 which are face to face) in mental health counseling setting under the clinical supervision of a site supervisor. The seminar students meet weekly with faculty for supervision and class.

Elective Courses

MHC 601 Death, Meaning, and Counseling

This is an introduction to the roles that death, loss, and meaning-seeking play in counseling. Counseling issues can be addressed on at least three levels: the presenting behaviors, the social

and personal meanings that are attached to such behaviors, and the existential issues that underlie virtually all human behaviors and concerns.

MHC 602 Correctional Counseling: From Incarceration & Beyond

This course provides an overview of the range of clinical treatment approaches and methods employed in prisons to provide clinical counseling strategies to treat offenders while incarcerated and beyond. Students will gain insight into the role of the correctional counselor, understand theories associated with institutional counseling, and develop hone clinical skills to counsel such clients.

MHC 606 Clinical Work with Adolescents

This course will provide a broad overview of clinical practice with adolescents. Topics include: substance abuse, depression, mood disorders, eating disorders and anxiety.

MHC 611 Counseling Service Member, the Military and their Family

The course provides an introduction to the challenges veterans and service members face both socially and psychologically while exploring contemporary treatment modalities including: Cognitive Processing Theory and Prolonged Exposure. We will also address the psychosocial factors of transitioning into civilian life, stigma, co-occurring disorders, resiliency, and PTSD. Throughout the course, we will emphasize the ways in which Mental Health Counselors may advocate for veterans and service member clients and enhance overall well-being.

MHC 613 Current Perspectives on Posttraumatic Stress Disorder Counseling

This course focuses on the historical background, phenomenology, etiology, longitudinal course, and treatment of posttraumatic stress disorder (PTSD). We will trace the historical antecedents of PTSD from its early origins in war experiences and train accidents (“battle fatigue,” “shell shock,” “railway spine”) to its present day role in the DSM-IV and V. We will examine the nature of PTSD symptoms (e.g., intrusive thoughts, nightmares, detachment) and the way they cluster together (e.g., avoidance, dysphoria, hyperarousal). We will consider the prevalence of PTSD and the different patterns of PTSD symptoms that people exhibit over time, emphasizing resilience and individual differences.

MHC 614 Current Perspectives on Grief Counseling

This course focuses on counseling interventions to help people cope with the loss of a loved one. Using research articles, theory, film, and nonfiction, we will discuss the nature of grief, theoretical models of grieving, distinct types of grief reactions, how to identify “complicated” grief reactions, the appropriate role of counseling for grief, and specific grief counseling techniques. Throughout we will emphasize the critical role of theory, empirical research, and general principles of intervention in guiding grief counseling approaches.

MHC 620 Introduction to Gerontology

This course provides a multidisciplinary perspective of the biological, psychological and sociocultural aspects of aging. An overview of the issues that significantly impact the older adult, their family and society is presented. The demographics profile of America's older adult serves as a basis for explaining issues related to physical and mental health changes, role transitions, care and living arrangements for the older adult.

MHC 622 Trauma and Loss: Empirical Perspectives

This course examines the impact on adaptive functioning of potentially traumatic events, such as bereavement, traumatic injury, life-threatening illness, military deployment, mass trauma, and disaster. We will address the role of coping strategies, positive aspects of psychological functioning, such as smiling and laughter, prior adversity and trauma exposure, psychobiological and genetic factors, whether people can actually benefit from significant adversity, the way culture shapes our capacity to cope with stress and with loss. Throughout we will emphasize that human beings are resilient to trauma and loss, and that resilience emerges from normative adaptational systems and an array of person-centered and social-contextual factors.

MHC 629 Cognitive Behavioral Therapy

Cognitive Behavioral Therapy (CBT) is one of the most widely recognized and practiced brief therapies. This practice-oriented course will introduce students to the basics of cognitive-behavioral theory and therapy and teach them how to conceptualize clients and plan and conduct treatment within the CBT model. Students will learn to use some of the most commonly used CBT techniques for mood and anxiety disorders in adults through a combination of lecture, discussion, video, role play, homework, clinical case presentations, and writing a clinical case conceptualization report.

MHC 638 Positive Psychology and Psychotherapy

This course will be devoted to a particular domain of research and clinical application, known as "positive psychology". The first part of the course will touch upon some of the fundamental issues in positive psychology, particularly the study of happiness and human flourishing. We will try to address a number of different questions, including: Why are some people happier than others? What are the factors that allow people to excel across situations (work, relationships, traumatic events, etc.)? How other factors associated with the good life—meaning, purpose, gratitude, etc.—related to well-being? The second half of the course will look at how our empirical understanding of well-being can be applied to counseling. Examining both research and different treatment modalities, we will review ways to implement positive interventions into therapy.

MHC 651C Issues in Child Psychotherapy

Experts from various domains of the field will present on their area of expertise. Participants will be introduced to relevant theory, research, and practice in the area of child psychotherapy. In this interactive course, comprehensive approaches will be introduced with discussion given to the

critical roles played by counselors and clients. Topics include, but are not limited to: child psychopathology as defined in the DSM-IV-TR; ethical and legal considerations in working with children; overcoming resistance in children and/or their parents; and working with specific populations, including children with ADHD, children who are aggressive, medically fragile, or domestic violence and trauma survivors.

MHC 664 Building your Ideal Private Practice

This is a course designed to assist students in developing the knowledge base, skills, and confidence to develop a successful private counseling practice. It will touch on getting the experience and supervision necessary before beginning one's own practice, and the will concentrate on what is needed to successfully start one's own practice, maintain, and/or expand and diversify it.

MHC 668 Spiritual Issues in Counseling

This course will explore an important and often neglected aspect of counseling; the client's spiritual/religious beliefs. Topics to be covered include spiritual explanations for suffering; counseling perspectives of the major spiritual/religious traditions; special needs and problems of religious client; the counselors own belief system; and, the clinical use of the client's belief. The course will employ didactic lecture, group discussion and exercises, case study presentations, and, role-plays of counseling sessions.

MHC 669 Couple Counseling

This course is a survey of the major approaches to couples counseling. Emotion focused, cognitive-behavioral and couple's group counseling approaches are reviewed. Observation of videotaped sessions, role playing of sessions, and application of technique is emphasized.

MHC 688 Sex Education and Counseling: Intimacy and Sexuality

This course examines the dimensions of human sexuality and intimacy that bear on the role and function of today's counselor. Topics include: human sexual development, defining healthy expressions of intimacy and relatedness, an overview of effects of abuse and violence in relationships including sexual abuse, incest and pornography. Also trends in behaviors related to the transmissions of AIDS and STD's, sexual dysfunctions, treatment modalities and sexual ethics for professional counselors.

MHC 690 Telemental Health: Best Practices and Ethical Considerations

This course will expose students to numerous emerging technologies and will give them the skills to access, utilize and critique in terms of how the tools can be applied to the counseling world.

MHC 697 Counseling the Older Adult

Mental illness occurs across the lifespan and affects all age groups. The fastest growing age group at this time is the elderly population or individuals over 65 years of age. This course will emphasize the most frequent mental health diagnosis of the older adult. It will build on the foundation of their

fundamental counseling skills, providing students with standards and specific competencies for effective interventions when counseling the older adult population.

Overview and Requirements for Field Experience

The requirements for a Master of Science degree in Mental Health Counseling from Pace University include satisfactory completion of a one-semester practicum and a two-semester clinical internship.

- MHC 694 Practicum in Mental Health Counseling
- MHC 675 Field Experience in Counseling: Internship I
- MHC 676 Field Experience in Counseling: Internship II

In order to enroll in the practicum and internships, a student must have, among other things, successfully completed at least 42 credits toward the Master of Science degree in Mental Health Counseling. Students must also purchase professional liability insurance in the amounts of 1,000,000/3,000,000. Suggested providers will be given in advance.

Students may enroll in MHC 694 during the Fall, Spring, or Summer semesters. Upon successful completion of MHC 694, students may then enroll in MHC 675 and thereafter in MHC 676. Students may not simultaneously register for MHC 675 and MHC 676.

The Master's Program requires students to remain in the same Field Placement for MHC 694, MHC 675, and MHC 676.

The Field Placement Practicum and Internship Handbook is available for students seeking Field Placement with all the information needed.

Practicum

- A. Students complete supervised counseling practicum experiences that total a minimum of 100 clock hours over a full academic term that is a minimum of 10 weeks.
- B. Practicum students complete at least 40 clock hours of direct service with actual clients that contributes to the development of counseling skills.
- C. Practicum students have weekly interaction with supervisors that averages one hour per week of individual and/or triadic supervision throughout the practicum by (1) a counselor education program faculty member, (2) a student supervisor who is under the supervision of a counselor education program faculty member, or (3) a site supervisor who is working in consultation on a regular schedule with a counselor education program faculty member in accordance with the supervision agreement.
- D. Practicum students participate in an average of 1½ hours per week of group supervision on a regular schedule throughout the practicum. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member.

Internship

- E. After successful completion of the practicum, students complete 600 clock hours of supervised counseling internship in roles and settings with clients relevant to their specialty area.
- F. Internship students complete at least 240 clock hours of direct service.
- G. Internship students have weekly interaction with supervisors that averages one hour per week of individual and/or triadic supervision throughout the internship, provided by (1) the site supervisor, (2) counselor education program faculty, or (3) a student supervisor who is under the supervision of a counselor education program faculty member.
- H. Internship students participate in an average of 1½ hours per week of group supervision on a regular schedule throughout the internship. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member.

Counseling Organizations

Professional Counseling Organizations

American Counseling Association (ACA)

www.counseling.org

The American Counseling Association is a not-for-profit, professional and educational organization that is dedicated to the growth and enhancement of the counseling profession. Founded in 1952, ACA is the world's largest association exclusively representing professional counselors in various practice settings. By providing leadership training, publications, continuing education opportunities, and advocacy services to over 55, 000 members, ACA helps counseling professionals develop their skills and expand their knowledge base.

Mission: The mission of the American Counseling Association is to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity.

The National Board for Certified Counselors, Inc (NBCC)

www.nbcc.org

The National Board for Certified Counselors, Inc., and Affiliates (NBCC), an independent not-for-profit credentialing body for counselors, was incorporated in 1982 to establish and monitor a national certification system, to identify those counselors who have voluntarily sought and obtained certification, and to maintain a register of those counselors. NBCC's certification program recognizes counselors who have met predetermined standards in their training, experience, and performance on the National Counselor Examination for Licensure and Certification (NCE), the most portable credentialing examination in counseling. NBCC has approximately 42,000 certified counselors. These counselors live and work in the US and over 50 countries. Our examinations are used by more than 48 states, the District of Columbia, and Guam to credential counselors on a state level.

Mission: The National Board for Certified Counselors (NBCC) is the nation's premier professional certification board devoted to credentialing counselors who meet standards for the general and specialty practices of professional counseling.

American Mental Health Counselors Association (AMHCA)

www.amhca.org

The American Mental Health Counselors Association (AMHCA) is a growing community of almost 6,000 mental health counselors. Together, we make a critical impact on the lives of Americans. AMHCA succeeds in giving a voice to our profession nationwide and in helping to serve you and your colleagues in your state.

Mission: To enhance the profession of mental health counseling through licensing, advocacy, education and professional development.

Vision: To be the national organization representing licensed mental health counselors and state chapters, with consistent standards of education, training, licensing, practice, advocacy and ethics.

Guiding Principles: AMHCA members are dedicated to the principles in our Code of Ethics. As our profession and the needs of our clients change, a committee of knowledgeable, experienced professionals updates the code.

New York Mental Health Counselors Association (NYMHCA)

www.nymhca.org

NYMHCA is the state branch of the American Mental Health Counselors Association. Membership in AMHCA is encouraged but not required to join us. We are also an affiliated member of the New York Counseling Association.

The Mission: NYMHCA is the advocacy organization representing the clinical counselors of New York State. We worked to obtain licensure, and our continuing role is to protect and enhance the rights of counselors to practice our profession!

American Counseling Association of New York (ACA-NY)

www.counselingny.org

ACA-NY is a not-for-profit grassroots organization that represents professional counselors and counseling students, of all specialty areas, who live or work in New York State. As a chapter of the American Counseling Association, ACA-NY extends the efforts of growing and enhancing the counseling profession at the state level.

Mission: ACA-NY's mission echoes ACA's mission: "to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity."

Student Counseling Organization

Chi Sigma Iota (CSI)

CSI's mission is to promote scholarship, research, professionalism, leadership and excellence in counseling, and to recognize high attainment in the pursuit of academic and clinical excellence in the profession of counseling.

Credentialing and Employment

Become part of one of the fastest-growing professions in the U.S.—counseling—particularly in the areas of substance abuse, behavioral disorder, mental health, and trauma and loss counseling.

Pace University's MS in Mental Health Counseling program prepares you to take advantage of this trend and for jobs in professional settings such as mental health counseling facilities, hospitals, private practices, and intervention facilities. Our degree provides strong foundations in advanced psychology, plus specialized knowledge in groundbreaking research like resiliency and positive-approach psychotherapy. Importantly, it also prepares graduates to become licensed practitioners in mental health counseling with specialties and emphases on areas ranging from trauma and loss counseling, substance abuse, and positive psychology.

In a 2016 study of alumni from the Pace Mental Health Counseling program, 64% of former students reported that they were employed in a counseling or counseling-related setting. They were employed in positions such as: vocational counselor, psychiatric clinical specialist, intake counselor, substance abuse counselor, therapist in private practice, and family therapist.

Nearly half of survey participants also reported being licensed or credentialed as NYS Licensed Mental Health Counselors, while many others are licensed/credentialed in neighboring states as mental health counselors, CASAC, NCC, and some with licenses as a Psychologists. 41% of graduates are also current National Certified Counselors.

Employment of mental health counselors and marriage and family therapists is projected to grow 19 percent from 2014 to 2024, much faster than the average for all occupations. Growth is expected in both occupations as more people have mental health counseling services covered by their insurance policies. \$43,190 median salary as of May 2-15, with the metropolitan area of the university having a mean salary of \$45, 900. (BLS.Gov, 2016)

Licensure Requirements for New York

The most up-to-date information can be received from the Department of Education website at <http://www.op.nysed.gov/prof/mhp/mhclic.htm>.

Academic Requirements

To meet the professional education requirement for licensure as a Mental Health Counselor, you must present evidence of receiving a master's or doctoral degree in counseling from a program that is:

- registered by the Department as licensure qualifying;
- accredited as a mental health counseling program of 60 semester hours by the Commission on the Accreditation of Counseling Related Education Programs (CACREP) or another acceptable accrediting agency; or
- determined by the Department to be the substantial equivalent of such a registered or accredited program.

A program located outside the United States and its territories may be used to satisfy the professional education requirement if it:

- prepares individuals for the professional practice of Mental Health Counseling; and
- is recognized by the appropriate civil authorities of that jurisdiction; and
- can be appropriately verified; and
- is determined by the Department to be the substantial equivalent of a registered licensure qualifying or acceptable accredited master's or doctoral program in counseling.

Clinical Experience

To meet the experience requirement for licensure as a Mental Health Counselor, you must submit documentation of completion of a supervised experience of at least 3,000 clock hours providing Mental Health Counseling in a setting acceptable to the Department. The supervised experience must be obtained after completion of the master's degree program required for licensure.

The practice of Mental Health Counseling is defined as:

- the evaluation, assessment, amelioration, treatment, modification, or adjustment to a disability, problem, or disorder of behavior, character, development, emotion, personality or relationships by the use of verbal or behavioral methods with individuals, couples, families or groups in private practice, group, or organized settings; and
- the use of assessment instruments and Mental Health Counseling and psychotherapy to identify, evaluate and treat dysfunctions and disorders for purposes of providing appropriate Mental Health Counseling services.

Not less than 1,500 clock hours of such required experience must consist of direct contact with clients. The remaining experience may consist of other activities that do not involve direct client contact, including but not limited to, recordkeeping, case management, research, supervision and professional development.

Experience for licensure must be completed in a legal manner, under a qualified supervisor in a setting that is authorized to provide professional services. In New York State, the experience must be under a limited permit issued by the Department for a specific setting under a qualified supervisor (see below). Experience in other jurisdictions will be evaluated to determine if the equivalent requirements have been satisfied in a legal manner.

In addition, there are fees associated with licensure and students must earn a passing score on the National Clinical Mental Health Exam.

Faculty

Full-Time Faculty

Sheila Chiffriller, PhD, Licensed Psychologist

Professor

Dr. Chiffriller's research has focused on understanding the phenomenology of intimate partner violence and factors associated with college students' general well-being. Her research topics have included behavioral and psychological correlates of domestic violence and the impact of substance use and concussion on collegiate athletes' academic performance, and prevalence and health risk of body art among college students. Most recently, her research has combined her interests and she has begun to focus on predictors of, and responses to dating violence on college campuses. Dr. Chiffriller continually mentors both undergraduate and graduate students to facilitate the development of their research skills and prepare them for various doctoral programs in counseling and psychology.

Poonam Doshi, PhD, LMHC, LPC, NCC

Assistant Professor

Dr. Doshi is a Licensed Mental Health Counselor (LMHC) in NY, Licensed Professional Counselor (LPC) in NJ and a National Certified Counselor (NCC). Her research interests have included studying variables such as types of motivation from self-determination theory framework as well as clinical supervision. She has studied these variables for the purpose of understanding their influence on counselor self-efficacy especially in the field of counselor education and mental health counseling. Dr. Doshi is well-versed in the knowledge and application of integrated counseling approaches and is specifically interested in person-centered as well as humanistic theories.

Joseph R. Franco, PhD, LMHC, NCC

Professor, MS in Mental Health Counseling Program Director, Director of Clinical Field Supervision

Dr. Franco is a Counselor Educator, Practicing Clinician, Licensed Mental Health Counselor, and a Nationally Certified Counselor. He has served as President and Membership Chair for the New York Mental Health Counselors Association (NYMHCA) for a period of eight years. Dr. Franco recently published his book, *Aspirations of Italian-American College Students: The impact of family traditions, mentorship, career interventions, and counseling for professional success*. Dr. Franco's research interests include counseling strategies with ethnic minorities and LGBTQQI clients, supervision models for counselor educators and advocacy in the mental health counseling profession. He regularly presents at national and local conferences. Dr. Franco is the recipient of the Outstanding Service Award for his commitment to NYMHCA, Outstanding Counselor Educator Award for teaching excellence and the Pace University Kenan Award for teaching excellence.

Paul W. Griffin, PhD

Associate Professor, Chair, Psychology Department (Pleasantville)

Dr. Griffin's research reflects his graduate training in both counseling and developmental psychology. Dr. Griffin is broadly interested in adult development, though much of his research has particularly focused on subject well-being (e.g., happiness) and eudemonic well-being (e.g., meaning and purpose). Related to the theme of well-being, Dr. Griffin has chaired dissertation projects on a variety of projects, including flow, grit, meaning, and identity illness. In the area of counseling, Dr. Griffin has published on a variety of issues, including grief therapy, group counseling, and multicultural considerations in practice. He is currently pursuing two lines of research. The first is focused on investigating the question of subjective and eudemonic well-being among counseling professionals. The second is focused on how values and beliefs affect the counseling relationship and counselor identity.

Sara Juncaj, PhD, LMHC

Clinical Assistant Professor

Dr. Juncaj's central theme of work understands how individuals' work can affect their psychological well-being. Her current research examined how to better understand well-being among one of the most stressful and dangerous occupations, police officers, particularly focusing on the effects of flow. More specifically, her work has examined questions such as how job, organizational and flow characteristics impact job satisfaction and how job satisfaction levels impact life satisfaction. Dr. Juncaj is also interested in studying the job dynamics of mental health counselors in relation to supervision, burnout, and self-efficacy.

Anthony Mancini, PhD, Licensed Psychologist

Associate Professor

Dr. Mancini's research focuses on the different ways people respond to potentially traumatic events, including the Virginia Tech Campus shootings, military deployment, the 9/11 terrorist attack, Hurricane Sandy, traumatic injury, life threatening illness, and bereavement. He also examines the ways that stress can stimulate social connection and improve psychological functioning, how networks of PTSD symptom develop over time, and how analog stress paradigms can illuminate the stress response in experimental lab settings. See Dr. Mancini's research group, The Trauma, Social Processes, and Resilience Lab.

Johnna Pointek, PhD

Lecturer

Dr. Pointek earned her BS in Psychology from Mercy College, MS in Psychology from Long Island University, and PsyD from California School of Professional Psychology. She is a Lecturer at Pace University. She teaches in the graduate level in focuses on the following courses: Sex Education and Counseling Intimacy and Sexuality; Introduction to Gerontology; Helping Relationships: Counseling Theories and Techniques.

Ross Robak, PhD, Licensed Psychologist, LMHC

PhD in Mental Health Counseling, Professor

Dr. Robak's research extends across a number of different areas. Much of his recent work has studied factors that affect the group counseling process. He is also interested in self-definition and self-perception, as well as self-determination theory and its application to counselor education. Other previous research has examined the relationship between money and life-satisfaction.

Michael Tursi, PhD, LMHC

Assistant Professor

Dr. Tursi is a Licensed Mental Health Counselor (LMHC) and a National Certified Counselor (NCC). He is interested in qualitative research, especially research focused on clients' experiences of counseling and the influence of client variables on the counseling process. Dr. Tursi is also interested in person-centered and other humanistic counseling theories in addition to integrative counseling approaches.

Maren Westphal, PhD, Licensed Psychologist

Associate Professor

Dr. Westphal's research aims to further understanding of how emotion regulation may contribute to resilience and psychopathology, with focus on flexibility in emotional expression, attentional biases to emotion, mindfulness, and self-compassion. Her research has looked at these variables in the context of immediate threat and cumulative life stress and in relation to work-related stress and early adversity. She has also investigated the impact of exposure to potentially traumatic life events among ethnic minority patients in primary care. Dr. Westphal currently investigates mindfulness as a longitudinal predictor of mental health in health professionals and mindfulness and self-compassion as predictors of treatment outcome in cognitive behavioral therapy for depression.

Adjunct Faculty

Lynn Bogin, LMHC

Integrating Seminar: Professional Orientation

David Gerber, MEd, Master CASAC

Orientation to Addiction: Etiology, Screening, Treatment

Francine Hansen, LMHC

Field Experience: Internship II

Sharon Kelly, CASAC

Counseling Theories and Techniques; Psychopathology and Personality Disorders; Appraisal: Assessment, Reporting and Treatment Planning; Case Management in Treating Addictions

Nikita Krishnan, LMHC

Death, Meaning, and Counseling, Spiritual Issues in Counseling

Monica Lake, PsyD, NCSP

Human Growth and Development

Jill Mastrandrea, LMHC, CASAC, NCC, CRPA

Integrating Seminar: Professional Orientation and Ethics

Catherine Morrison, PsyD

Psychopathology and Personality Disorders

Terrance Nicholls, LMHC

Marriage and Family Systems

Jennifer Powell-Lunder, PhD

Clinical Work with Adolescents; Human Growth and Development

Melissa Ramdass, LMHC

Group Dynamics; Appraisal and Assessment of Individuals, Couples, Families, and Groups

Christine Romano, LMHC, NCC, AASECT-CST

Research and Program Evaluation; Appraisal and Assessment of Individuals, Couples, Families, and Groups; Foundations of Mental Health Counseling and Consultation; Couples Counseling

Amelia Ruppman, PhD, LMHC, CASAC, NCC

Career and Lifestyle Development

Lana Tamaro, LMHC, NCC, BCC

Couple Counseling

ACADEMIC POLICIES AND PROCEDURES

Admission Requirements

Admission decision recommendations are made by the academic unit's selection committee and include consideration of the following:

1. Each applicant's aptitude for graduate-level study.
2. Each applicant's career goals and their relevance to the program.
3. Each applicant's potential success in forming effective and culturally relevant interpersonal relationships in individual and small-group contexts.

The Admissions Committee consists of a) Program Director, b) Program Manager, c) Admissions Coordinator, d) full time faculty members. Program faculty participate in the admission decisions for the MS in mental health counseling. The admissions committee consists of the (a) program Director, (b) Assistant Director, and (c) admissions assistant to the Assistant Director. The Program Manager and Field Placement/Admissions Coordinator review the admissions paperwork with the Graduate Admissions Office.

The committee then makes a decision about whom to interview. An interview is conducted by members of the committee followed by a rating process utilizing an Admissions Rating Form that identifies levels of each applicant's (1) aptitude for graduate-level study, (2) career goals and their relevance to the program, and (3) potential success in forming effective and culturally relevant interpersonal relationships in individual and small group contexts.

1. **The applicant's aptitude for graduate-level study** is evaluated by a review of :
 - A. Undergraduate GPA minimum 3.0
 - B. GPA from another completed graduate degree (3.3 minimum)
 - C. Two professional letters of recommendation on rating forms that ask about
 - i. Intellectual ability
 - ii. Ability to work with others
 - iii. Ability in written expression
 - iv. Ability in oral expression
 - v. Maturity
 - vi. Initiative/independence
 - vii. Creativity/originality
 - viii. Potential for career advancement

For applicants who do not meet the GPA criteria, but who have an acquired knowledge of the profession based on counseling-related experience, a provisional acceptance to the program may be offered. Conditional acceptance is to a non-matriculated student status. Such students are allowed to take 6 introductory credits and must complete them with grades of no less than B.

2. **Career goals and their relevance to the program** are assessed as follows:
 - A. In a written personal statement which students submit with their application papers they are asked to identify and describe their career goals their reasons for applying to the program in light of such goals.
 - B. Each applicant's required resume/CV is examined for experiences which are reflective of a commitment to the helping professions.
 - C. In their interviews, potential students are inquired about their career goals and their understanding of the development of their professional objectives in the counseling profession.

3. **Each applicant's potential success in forming effective and culturally relevant interpersonal relationships in individual and small group contexts** is addressed via:
 - A. Each applicant's personal statement allows for insights into that potential student's motivations regarding interpersonal relationships in the helping context.
 - B. The recommendation rating form contains items that ask the recommender to rate the applicant's ability to work with others and his/her maturity.
 - C. The interview contains a question about the person's experiences in working with others who are in some ways different from themselves.
 - D. The interview also provides an initial opportunity for a first-look at the potential student's interpersonal skills.

Academic Advising

Students have an assigned faculty adviser at all times during enrollment in the program. Students, with their faculty adviser, develop a planned program of study within the first 12 months of graduate study.

Upon acceptance into the MS in Mental Health Counseling program, students are notified of their advisers: Meghan Seixas (MS in MHC Program Manager, 914-773-3627) and the faculty member who will be their primary faculty adviser.

Students meet with their advisers soon after their acceptance into the program. At that time, they discuss the program as a whole, and determine the initial courses they will be taking as well as the overall arc of their individual programs. Their overall arcs are influenced by their career interests.

The Counseling Student Handbook describes the student-adviser relationship as "ongoing." Students are expected to meet with the Graduate Program Manager prior to registering for courses each semester.

Students are required to meet with their advisers and to write up their programs by filling out their program-of-study form as soon as possible after admission to the program. The advisement process includes a discussion of program requirements and elective options, filling out the program of study form, and signing it. The date by which the student must complete the program (five years

from the time the first course is taken) is noted in the Student Handbook. A copy of a completed form is placed in the student's file; a copy is given to each student. Often, students may want to make changes to their programs and they have the opportunity to do so each semester as they meet with an adviser to register for each upcoming semester.

Assessment of Student Performance

Student performance is assessed at specific intervals using the Counselor Competencies Scale-R.

EARLY POINT 1	EARLY POINT 2	MID-POINT	ADVANCED PART 1	ADVANCED PART 2	EXIT
MHC 630	MHC 658	Admit to Practicum (MHC 694)	Admit to Internship (MHC 675)	Internship (MHC 676)	
Grade of B or better; CCS-R part 1: Primary Counseling Skills	Grade of B or better; CCS-R part 2: Primary Prof. Dispositions and Behaviors	Complete Core Courses: (630, 631, 652, 672, 687,658); Overall GPA: B or better; Faculty approval	Successful Completion of Practicum; Faculty approval CCS-R: entire Grade of B or better	Faculty Supervisor Evaluation (site visit as needed); Site supervisor: Mid and Final Evals.	NCE Or CCE Counselor Comprehensive Exam And CCS-R: entire

Academic Standards: Probation, Dismissal, and Appeal

<https://www.pace.edu/dyson/the-dyson-difference/advising/academic-probation-dismissal-and-appeal-policies/graduate-academic-dismissal>

Probation Policy

Placement on Academic Probation

All graduate students enrolled in programs in the Dyson College of Arts and Sciences, except non-matriculated students and those enrolled in programs that have adopted their own probation and dismissal policies, will be placed automatically on academic probation if the following occurs:

The student's cumulative quality point average ("CQPA") falls below 3.00 or a "B" average and it is mathematically impossible that the student could achieve a 3.00 CQPA within one semester.

Students whose CQPA is such that it is mathematically impossible for them to achieve a 3.00 CQPA within one semester will not be placed on probation and instead will be dismissed automatically from the program in which they are enrolled.

Notice of Probation

Ordinarily, a student who has been placed on academic probation will receive written notice of his or her probationary status as soon as practicable from the program director (or his or her designee). However, academic probation is automatic if the requisite condition is met and therefore is not contingent upon receipt of such written notice. It is the student's responsibility to verify his or her academic standing before each semester and to make inquiries of the program director if clarification is needed.

Probationary Semester

In order to be restored to the status of good academic standing and to be eligible to continue in the program in which he or she is enrolled, a student on academic probation is required to meet the condition of probation as described in the Condition of Academic Probation section below. Normally, a student must satisfy the condition of academic probation within one semester (the "Probationary Semester"). The two summer sessions together may constitute a Probationary Semester if the student accrues the number of credits applicable to the student's normal status as a part-time student (not less than 6 credits) or full-time student (not less than 9 credits) during the two summer sessions.

Condition of Academic Probation

In order to be restored to good academic standing by the end of the Probationary Semester, the student's CQPA must be 3.0 or higher.

A student who fails to satisfy the condition of academic probation within the time permitted, i.e., the Probationary Semester, will be dismissed automatically from the program in which he or she is enrolled.

The condition of academic probation, and the time period within which the condition must be satisfied, i.e., the Probationary Semester, are final and may not be appealed.

Dismissal Policy

Except for non-matriculated students and those enrolled in a graduate program that has adopted its own probation and dismissal policies, usually, before being dismissed from a graduate program in the Dyson College of Arts and Sciences (“Dyson College”) students will have been on academic probation for one semester (the “Probationary Semester”) and failed to satisfy the condition of probation. As soon as practicable after the conclusion of the fall and spring semesters and the second summer session, the program director (or his or her designee) will review the status of each graduate student in the program who was on academic probation to determine whether the student satisfied the condition of academic probation at the conclusion of the Probationary Semester. Students who satisfied the condition of academic probation within the time permitted will be restored to good academic standing. Students who did not satisfy the condition of academic probation within the time permitted will be dismissed automatically from the program in which the student is enrolled.

There are, however, circumstances when students will be dismissed automatically without having been placed previously on academic probation.

A student whose cumulative quality point average (“CQPA”) falls below a 3.0 or a “B” average, and who will not be able to achieve a 3.00 CQPA by the conclusion of the Probationary Semester due to mathematical impossibility, will be dismissed automatically from the program. (See Dyson College Graduate Academic Probation Policy).

A student who qualifies for probation more than twice will not be placed on probation a third time and instead will be dismissed automatically from the program.

A student who fails to satisfy the condition of academic probation, or has a CQPA below 3.00 that due to mathematical impossibility cannot be raised to a 3.00 by the end of the Probationary Semester, or qualifies for academic probation more than twice, will receive written notice from the program director (or his or her designee) as soon as practicable that he or she has been dismissed from the program. However, dismissal is automatic if a student meets the criteria for dismissal and therefore is not contingent upon receipt of such notice. It is the student’s responsibility to verify his or her academic standing before each semester and to make inquiries of the program director (or his or her designee) if clarification is needed.

A student who has been dismissed from a program pursuant to this Academic Dismissal Policy may appeal that dismissal in accordance with the Dyson College Graduate Appeal of Academic Dismissal Policy.

Appeal Policy

Placement on Academic Probation

All graduate students enrolled in programs in the Dyson College of Arts and Sciences, except non-matriculated students and those enrolled in programs that have adopted their own probation and dismissal policies, will be placed automatically on academic probation if the following occurs:

The student's cumulative quality point average ("CQPA") falls below 3.00 or a "B" average and it is mathematically impossible that the student could achieve a 3.00 CQPA within one semester.

Students whose CQPA is such that it is mathematically impossible for them to achieve a 3.00 CQPA within one semester will not be placed on probation and instead will be dismissed automatically from the program in which they are enrolled.

Notification of Probation

Ordinarily, a student who has been placed on academic probation will receive written notice of his or her probationary status as soon as practicable from the program director (or his or her designee). However, academic probation is automatic if the requisite condition is met and therefore is not contingent upon receipt of such written notice. It is the student's responsibility to verify his or her academic standing before each semester and to make inquiries of the program director if clarification is needed.

Probationary Semester

In order to be restored to the status of good academic standing and to be eligible to continue in the program in which he or she is enrolled, a student on academic probation is required to meet the condition of probation as described in the Condition of Academic Probation section below. Normally, a student must satisfy the condition of academic probation within one semester (the "Probationary Semester"). The two summer sessions together may constitute a Probationary Semester if the student accrues the number of credits applicable to the student's normal status as a part-time student (not less than 6 credits) or full-time student (not less than 9 credits) during the two summer sessions.

Condition of Academic Probation

In order to be restored to good academic standing by the end of the Probationary Semester, the student's CQPA must be 3.0 or higher.

A student who fails to satisfy the condition of academic probation within the time permitted, i.e., the Probationary Semester, will be dismissed automatically from the program in which he or she is enrolled.

The condition of academic probation, and the time period within which the condition must be satisfied, i.e., the Probationary Semester, are final and may not be appealed.

APPENDIX

Counselor Competencies Scale—Revised (CCS-R)[©]

(Lambie, Mullen, Swank, & Blount, 2015)

The instrument is used with permission, and is adapted to meet the developmental needs of the students (i.e. “harmful” → “detrimental”).

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The *Counselor Competencies Scale—Revised* (CCS-R) assesses counselors’ and trainees’ skills development and professional competencies. Additionally, the CCS-R provides counselors and trainees with direct feedback regarding their demonstrated ability to apply counseling skills and facilitate therapeutic conditions, and their counseling dispositions (dominant qualities) and behaviors, offering the counselors and trainees practical areas for improvement to support their development as effective and ethical professional counselors.

Scales Evaluation Guidelines

- **Exceeds Expectations/Demonstrates Competencies (5)** = the counselor or trainee demonstrates **strong** (i.e., *exceeding* the expectations of a beginning professional counselor) knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).
- **Meets Expectations/Demonstrates Competencies (4)** = the counselor or trainee demonstrates **consistent** and **proficient** knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s). A beginning professional counselor should be at the “Demonstrates Competencies” level at the conclusion of his or her practicum and/or internship.
- **Near Expectations/Developing towards Competencies (3)** = the counselor or trainee demonstrates **inconsistent** and **limited** knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).
- **Below Expectations/Insufficient/Unacceptable (2)** = the counselor or trainee demonstrates **limited** or **no evidence** of the knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).
- **Detrimental (1)** = the counselor or trainee demonstrates detrimental use of knowledge, skills, and dispositions in the specified counseling skill(s), ability to facilitate therapeutic conditions, and professional disposition(s) and behavior(s).

* For the purposes of our evaluation, we have substituted the word *detrimental*.

Directions: Evaluate the counselor’s or trainee’s counseling skills, ability to facilitate therapeutic conditions, and professional dispositions and behaviors per rubric evaluation descriptions and record rating in the “score” column on the left.

CACREP (2016) Standards relating to the *Counselor Competencies Scale–Revised (CCS-R)*

CACREP (2016) Common Core Standards

- Strategies for personal and professional self-evaluation and implications for practice (Section II, *Standard 1.k.*).
- Self-care strategies appropriate to the counselor role (Section II, *Standard 1.l.*).
- Multicultural counseling competencies (Section II, *Standard 2.c.*).
- A general framework for understanding differing abilities and strategies for differentiated interventions (CACREP, 2016, Section II, *Standard 3.h.*).
- Ethical and culturally relevant strategies for establishing and maintaining in-person and technology-assisted relationships (Section II, *Standard 5.d.*).
- Counselor characteristics and behaviors that influence the counseling processes (Section II, *Standard 5.f.*).
- Essential interviewing, counseling, and case conceptualization skills (Section II, *Standard 5.g.*).
- Developmentally relevant counseling treatment or intervention plans (Section II, *Standard 5.h.*).
- Processes for aiding students in developing a personal model of counseling (Section II, *Standard 5.n.*).
- The counselor education program faculty has a systematic process in place for the use of individual student assessment data in relation to retention, remediation, and dismissal. (Section 4, *Standard H.*).
- Professional practice, which includes practicum and internship, provides for the application of theory and the development of counseling skills under supervision. These experiences will provide opportunities for students to counsel clients who represent the ethnic and demographic diversity of their community (Section III, *Professional Practice*).
- Entry-Level Professional Practice and Practicum (Section III, Professional Practice, p. 13).
 - A. Students are covered by individual professional counseling liability insurance policies while enrolled in practicum and internship.
 - B. Supervision of practicum students includes program-appropriate audio/video recordings and/or live supervision of students’ interactions with clients.

- C. Formative and summative evaluations of the student's counseling performance and ability to integrate and apply knowledge are conducted as part of the student's practicum.
- F. Students must complete supervised counseling practicum experiences that total a **minimum of 100 clock hours** over a full academic term that is a minimum of 10 weeks.
- G. Practicum students must **complete at least 40 clock hours of direct service** with actual clients that contributes to the development of counseling skills.
- H. Practicum students have weekly interaction with supervisors that averages **one hour per week of individual and/or triadic supervision** throughout the practicum by (1) a counselor education program faculty member, (2) a student supervisor who is under the supervision of a counselor education program faculty member, or (3) a site supervisor who is working in consultation on a regular schedule with a counselor education program faculty member in accordance with the supervision agreement.
- I. Practicum students participate in an average of **1½ hours per week of group supervision** on a regular schedule throughout the practicum. Group supervision must be provided by a counselor education program faculty member or a student supervisor who is under the supervision of a counselor education program faculty member.

CACREP (2016) Specialty Standards

- **Clinical Mental Health Counseling**
Techniques and interventions for prevention and treatment of a broad range of mental health issues (3. Practice, *Standard b.*).
- **Marriage, Couple, and Family Counseling**
Techniques and interventions of marriage, couple, and family counseling (3. Practice, *Standard c.*).
- **School Counseling**
Techniques of personal/social counseling in school settings (3. Practice, *Standard f.*).

Part I: Counseling Skills & Therapeutic Conditions

#	Score	Primary Counseling Skill(s)	Specific Counseling Skills and Therapeutic Conditions Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Detrimental (1)
1.A		Nonverbal Skills	Includes Body Position, Eye Contact, Posture, Distance from Client, Voice Tone, Rate of Speech, Use of silence, etc. <i>(attuned to the emotional state and cultural norms of the clients)</i>	Demonstrates effective nonverbal communication skills, conveying connectedness & empathy (85%).	Demonstrates effective nonverbal communication skills for the majority of counseling sessions (70%)	Demonstrates inconsistency in his or her nonverbal communication skills.	Demonstrates limited nonverbal communication skills.	Demonstrates poor nonverbal communication skills, such as ignores client &/or gives judgmental looks.
1.B		Encouragers	Includes Minimal Encouragers & Door Openers such as "Tell me more about...", "Hmm"	Demonstrates appropriate use of encouragers, which supports development of a therapeutic relationship (85%).	Demonstrates appropriate use of encouragers for the majority of counseling sessions, which supports development of a therapeutic relationship (70%)	Demonstrates inconsistency in his or her use of appropriate encouragers.	Demonstrates limited ability to use appropriate encouragers.	Demonstrates poor ability to use appropriate encouragers, such as using skills in a judgmental manner.
1.C		Questions	Use of Appropriate Open & Closed Questioning <i>(e.g., avoidance of double questions)</i>	Demonstrates appropriate use of open & close-ended questions, with an emphasis on open-ended question (85%).	Demonstrates appropriate use of open & close-ended questions for the majority of counseling sessions (70%).	Demonstrates inconsistency in using open-ended questions & may use closed questions for prolonged periods.	Demonstrates limited ability to use open-ended questions with restricted effectiveness.	Demonstrates poor ability to use open-ended questions, such as questions tend to confuse clients or restrict the counseling process.
1.D		Reflecting_a Paraphrasing	Basic Reflection of Content – Paraphrasing <i>(With couples and families, paraphrasing the different clients' multiple perspectives)</i>	Demonstrates appropriate use of paraphrasing as a primary therapeutic approach (85%).	Demonstrates appropriate use of paraphrasing (majority of counseling sessions; 70%).	Demonstrates paraphrasing inconsistently & inaccurately or mechanical or parroted responses.	Demonstrates limited proficiency in paraphrasing or is often inaccurate.	Demonstrates poor ability to paraphrase, such as being judgmental &/or dismissive.
1.E		Reflecting_b Reflection of Feelings	Reflection of Feelings <i>(With couples and families, reflection of each clients' feelings)</i>	Demonstrates appropriate use of reflection of feelings as a primary approach (85%).	Demonstrates appropriate use of reflection of feelings (majority of counseling sessions; 70%).	Demonstrates reflection of feelings inconsistently & is <i>not</i> matching the client.	Demonstrates limited proficiency in reflecting feelings &/or is often inaccurate.	Demonstrates poor ability to reflective feelings, such as being judgmental &/or dismissive.
1.F		Reflecting_c Summarizing	Summarizing content, feelings, behaviors, & future plans <i>(With couples and families, summarizing relational patterns of interaction)</i>	Demonstrates consistent ability to use summarization to include content, feelings, behaviors, and future plans (85%).	Demonstrates ability to appropriately use summarization to include content, feelings, behaviors, and future plans (majority of counseling sessions; 70%).	Demonstrates inconsistent & inaccurate ability to use summarization.	Demonstrates limited ability to use summarization (e.g., summary suggests counselor did <i>not</i> understand clients or is overly focused on content rather than process).	Demonstrates poor ability to summarize, such as being judgmental &/or dismissive.
1.G		Advanced Reflection (Meaning)	Advanced Reflection of Meaning, including Values and Core Beliefs <i>(taking counseling to a deeper level)</i>	Demonstrates consistent use of advanced reflection & promotes discussions of greater depth during counseling sessions (85%).	Demonstrates ability to appropriately use advanced reflection, supporting increased exploration in session (majority of counseling sessions; 70%).	Demonstrates inconsistent & inaccurate ability to use advanced reflection. Counseling sessions appear superficial.	Demonstrates limited ability to use advanced reflection &/or switches topics in counseling often.	Demonstrates poor ability to use advance reflection, such as being judgmental &/or dismissive.

#	Score	Primary Counseling Skill(s)	Specific Counseling Skills and Therapeutic Conditions Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Detrimental (1)
1.H		Confrontation	Counselor challenges clients to recognize & evaluate inconsistencies.	Demonstrates the ability to challenge clients through verbalizing inconsistencies & discrepancies in the clients' words &/or actions in a supportive fashion. Balance of challenge & support (85%).	Demonstrates the ability to challenge clients through verbalizing inconsistencies & discrepancies in the clients' words &/or actions in a supportive fashion (can confront, but hesitant) or was <i>not</i> needed; therefore, appropriately <i>not</i> used (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to challenge clients through verbalizing inconsistencies & discrepancies in clients' words &/or actions in a supportive fashion. Used minimally/missed opportunity.	Demonstrates limited ability to challenge clients through verbalizing discrepancies in the client's words &/or actions in a supportive & caring fashion, &/or skill is lacking.	Demonstrates poor ability to use confrontation, such as degrading client, harsh, judgmental, &/or aggressive.
1.I		Goal Setting	Counselor collaborates with clients to establish realistic, appropriate, & attainable therapeutic goals (<i>With couples and families, goal setting supports clients in establishing common therapeutic goals</i>)	Demonstrates consistent ability to establish collaborative & appropriate therapeutic goals with clients (85%).	Demonstrates ability to establish collaborative & appropriate therapeutic goals with client (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to establish collaborative & appropriate therapeutic goals with clients.	Demonstrates limited ability to establish collaborative, appropriate therapeutic goals with clients.	Demonstrates poor ability to develop collaborative therapeutic goals, such as identifying unattainable goals, and agreeing with goals that may be Detrimental to the clients.
1.J		Focus of Counseling	Counselor focuses (or refocuses) clients on their therapeutic goals (<i>i.e., purposeful counseling</i>)	Demonstrates consistent ability to focus &/or refocus counseling on clients' goal attainment (85%).	Demonstrates ability to focus &/or refocus counseling on clients' goal attainment (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to focus &/or refocus counseling on clients' therapeutic goal attainment.	Demonstrates limited ability to focus &/or refocus counseling on clients' therapeutic goal attainment.	Demonstrates poor ability to maintain focus in counseling, such as counseling moves focus away from clients' goals
1.K		Facilitate Therapeutic Environment_a: Empathy & Caring	Expresses accurate empathy & care. Counselor is "present" and open to clients. (<i>includes immediacy and concreteness</i>)	Demonstrates consistent ability to be empathic & uses appropriate responses (85%).	Demonstrates ability to be empathic & uses appropriate responses (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to be empathic &/or use appropriate responses.	Demonstrates limited ability to be empathic &/or uses appropriate responses.	Demonstrates poor ability to be empathic & caring, such as creating an unsafe space for clients.
1.L		Facilitate Therapeutic Environment_b: Respect & Compassion	Counselor expresses appropriate respect & compassion for clients	Demonstrates consistent ability to be respectful, accepting, & compassionate with clients (85%).	Demonstrates ability to be respectful, accepting, & compassionate with clients (majority of counseling sessions; 70%).	Demonstrates inconsistent ability to be respectful, accepting, & compassionate with clients.	Demonstrates limited ability to be respectful, accepting, &/or compassionate with clients.	Demonstrates poor ability to be respectful & compassionate with clients, such as having conditional respect.

_____ : Total Score (*out of a possible 60 points*)

Part 2: Counseling Dispositions & Behaviors

#	Score	Primary Counseling Dispositions & Behaviors	Specific Counseling Disposition & Behavior Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Detrimental (1)
2.A		Professional Ethics	Adheres to the ethical guidelines of the ACA, ASCA, IAMFC, APA, & NBCC; including practices within competencies.	Demonstrates consistent & advanced (<i>i.e., exploration & deliberation</i>) ethical behavior & judgments.	Demonstrates consistent ethical behavior & judgments.	Demonstrates ethical behavior & judgments, but on a concrete level with a basic ethical decision-making process.	Demonstrates limited ethical behavior & judgment, and a limited ethical decision-making process.	Demonstrates poor ethical behavior & judgment, such as violating the ethical codes &/or makes poor decisions
2.B		Professional Behavior	Behaves in a professional manner towards supervisors, peers, & clients (e.g., emotional regulation). Is respectful and appreciative to the culture of colleagues and is able to effectively collaborate with others.	Demonstrates consistent & advanced respectfulness and thoughtfulness, & appropriate within <i>all</i> professional interactions.	Demonstrates consistent respectfulness and thoughtfulness, & appropriate within <i>all</i> professional interactions.	Demonstrates inconsistent respectfulness and thoughtfulness, & appropriate within professional interactions.	Demonstrates limited respectfulness and thoughtfulness & acts inappropriate within some professional interactions.	Demonstrates poor professional behavior, such as repeatedly being disrespectful of others &/or impedes the professional atmosphere of the counseling setting / course.
2.C		Professional & Personal Boundaries	Maintains appropriate boundaries with supervisors, peers, & clients.	Demonstrates consistent & strong appropriate boundaries with supervisors, peers, & clients.	Demonstrates consistent appropriate boundaries with supervisors, peers, & clients.	Demonstrates appropriate boundaries inconsistently with supervisors, peers, & clients.	Demonstrates inappropriate boundaries with supervisors, peers, & clients.	Demonstrates poor boundaries with supervisors, peers, & clients; such as engaging in dual relationships.
2.D		Knowledge & Adherence to Site and Course Policies	Demonstrates an understanding & appreciation for <i>all</i> counseling site and course policies & procedures.	Demonstrates consistent adherence to <i>all</i> counseling site and course policies & procedures, including strong attendance and engagement.	Demonstrates adherence to most counseling site and course policies & procedures, including strong attendance and engagement.	Demonstrates inconsistent adherence to counseling site and course policies & procedures, including attendance and engagement.	Demonstrates limited adherence to counseling site and course policies & procedures, including attendance and engagement.	Demonstrates poor adherence to counseling site and course policies, such as failing to adhere to policies after discussing with supervisor / instructor.
2.E		Record Keeping & Task Completion	Completes <i>all</i> weekly record keeping & tasks correctly & promptly (e.g., case notes, psychosocial reports, treatment plans, supervisory report).	Completes <i>all</i> required record keeping, documentation, and assigned tasks in a through, timely, & comprehensive fashion.	Completes <i>all</i> required record keeping, documentation, and tasks in a competent & timely fashion.	Completes <i>all</i> required record keeping, documentation, and tasks, but in an inconsistent & questionable fashion.	Completes required record keeping, documentation, and tasks inconsistently & in a poor fashion.	Failure to complete paperwork &/or tasks by specified deadline.
2.F		Multicultural Competence in Counseling Relationship	Demonstrates respect for culture (e.g., race, ethnicity, gender, spirituality, religion, sexual orientation, disability, social class, etc.) and awareness of and responsiveness to ways in which culture interacts with the counseling relationship.	Demonstrates consistent & advanced multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates inconsistent multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates limited multicultural competencies (knowledge, self-awareness, appreciation, & skills) in interactions with clients.	Demonstrates poor multicultural competencies, such as being disrespectful, dismissive, and defensive regarding the significance of culture in the counseling relationship.
2.G		Emotional Stability & Self-control	Demonstrates self-awareness and emotional stability (<i>i.e., congruence between mood & affect</i>) & self-control (<i>i.e., impulse control</i>) in relationships with clients.	Demonstrates consistent emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates inconsistent emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates limited emotional stability & appropriateness in interpersonal interactions with clients.	Demonstrates poor emotional stability & appropriateness in interpersonal interactions with client, such as having high levels of emotional reactivity with clients.

#	Score	Primary Counseling Dispositions & Behaviors	Specific Counseling Disposition & Behavior Descriptors	Exceeds Expectations / Demonstrates Competencies (5)	Meets Expectations / Demonstrates Competencies (4)	Near Expectations / Developing towards Competencies (3)	Below Expectations / Unacceptable (2)	Detrimental (1)
2.H		Motivated to Learn & Grow / Initiative	Demonstrates engagement in learning & development of his or her counseling competencies.	Demonstrates consistent and strong engagement in promoting his or her professional and personal growth & development.	Demonstrates consistent engagement in promoting his or her professional and personal growth & development.	Demonstrates inconsistent engagement in promoting his or her professional and personal growth & development.	Demonstrates limited engagement in promoting his or her professional and personal growth & development.	Demonstrates poor engagement in promoting his or her professional and personal growth & development, such as expressing lack of appreciation for profession &/or apathy to learning.
2.I		Openness to Feedback	Responds non-defensively & alters behavior in accordance with supervisory &/or instructor feedback.	Demonstrates consistent and strong openness to supervisory &/or instructor feedback & implements suggested changes.	Demonstrates consistent openness to supervisory &/or instructor feedback & implements suggested changes.	Demonstrates openness to supervisory &/or instructor feedback; however, does <i>not</i> implement suggested changes.	Demonstrates a lack of openness to supervisory &/or instructor feedback & does <i>not</i> implement suggested changes.	Demonstrates <i>no</i> openness to supervisory &/or instructor feedback & is defensive &/or dismissive when given feedback.
2.J		Flexibility & Adaptability	Demonstrates ability to adapt to changing circumstance, unexpected events, & new situations.	Demonstrates consistent and strong ability to adapt & "reads-&-flexes" appropriately.	Demonstrates consistent ability to adapt & "reads-&-flexes" appropriately.	Demonstrated an inconsistent ability to adapt & flex to his or her clients' diverse changing needs.	Demonstrates a limited ability to adapt & flex to his or her clients' diverse changing needs.	Demonstrates a poor ability to adapt to his or her clients' diverse changing needs, such as being rigid in work with clients.
2.K		Congruence & Genuineness	Demonstrates ability to be present and "be true to oneself"	Demonstrates consistent and strong ability to be genuine & accepting of self & others.	Demonstrates consistent ability to be genuine & accepting of self & others.	Demonstrates inconsistent ability to be genuine & accepting of self & others.	Demonstrates a limited ability to be genuine & accepting of self & others (incongruent).	Demonstrates a poor ability to be genuine & accepting of self & others, such as being disingenuous.

Counselor's or Trainee's Name (print)

Date

Supervisor's Name (print)

Date

Date CCS-R was reviewed with Counselor or Trainee:

Counselor's or Trainee's Signature

Date

Supervisor's Signature

Date

*** Note: If the supervising instructor/clinical supervisor is concerned about the counselor's or trainee's progress in demonstrating the appropriate counseling competencies, he or she should have another appropriately trained supervisor observe the counselor's or trainee's work with clients to provide additional feedback to the counselor or trainee.**