

COURSE SYLLABUS

PRACTICUM II

TIME/LOCATION

Wednesday, 6:00-7:30pm College Park, Grand Island

INSTRUCTOR

Dr. Donald Belau

REQUIRED TEXTS: None

RECOMMENDED READINGS

Baird, B.N. (2008). *The Internship, Practicum, and Field Placement Handbook: A Guide for the Helping Professions,* Upper Saddle River, NJ: Prentice Hall.

Caine, R.N., & Caine, G. (1994). *Making connections: Teaching and the human brain.* Parsippany, NJ: Dale Seymour.

Casement, Patrick. (1991) Learning From the Patient. New York: The Guilford Press, 1991

- Crawford, R.L. (1994). Avoiding Counselor Malpractice. *The ACA Legal Series, Vol. 12, Theodore P. Remley, (Ed)*. Alexandria, VA: American Counseling Association
- Engels, W.E. & Associates (2004). *The Professional Counselor*, Alexandria, VA: American Counseling Association

Faiver, C., Eisengart, S. & Colonna, R. (2000). *The Counselor Intern's Handbook*, NY: Brooks/Cole.

- Friedman, D., & Kaslow, N.J. (1986). The development of professional identity in psychotherapists: Six stages in the supervision process. In F.W.Kaslow (Ed.), *Supervision and training: Models, dilemmas and challenges*, 29-50. New York: Haworth Press.
- Gibbs, Leonard (2006). Evidence-Based Practice for the Helping Professions: A Practical Guide with Integrated Multimedia,
- Kandel, E.R., Schwartx, J.H., & Jessell, T.M. (2000). Principles of neural science. New York: McGraw-Hill.
- Mitchell, Robert (2001). *Documentation in Counseling Records*, Alexandria, VA: American Counseling Association
- Pachis, B., Rettman, S. & Gotthoffer (2005) *Counseling On The Net: Tips, Resources, Activities, and URL's.* Boston: Allyn & Bacon.

Penn, L.S. (1990). When the therapist must leave: Forced termination of psychodynamic therapy. *Professional Psychology: Research and Practice*, 21, 379-384.

Pipher, Mary (2003) Letters To A Young Therapist, New York: Basic Books

PREREQUISITE

Successful completion of all academic course work; although with the advance approval of the instructor or MAC Assistant Dean, a student may also be enrolled in one 3 credit academic course.

COURSE DESCRIPTION AND OBJECTIVES

Intended as the "second step" of the introductory phase leading to internship, the Practicum II represents the second stage of three formal training phases for career professionals intending to work in the field of mental health as a counselor. Practicum II, COU 622 is

designed to afford students their second supervised opportunity to successfully apply the knowledge and skills acquired in the academic portion of their MAC program and during Practicum I, as well as to learn new capabilities, develop and refine their practical working mastery of mental health counseling theory and methods. It is also intended to facilitate the opportunity to continue learning how mental health practice is administratively managed and how services are delivered. Moving from a somewhat more basic phase involving extensive observation of professional technique and gradual case work under supervision, the Practicum II student continues these activities and refines the quality of their work directly with individual clients or families.

METHODS OF INSTRUCTION

The Learning Method of the Practicum involves *observation, listening* and *copying* assessment practices, case formulation, treatment planning and implementation of intended counseling strategies with clients, families and therapy groups as modeled-demonstrated by on-site supervisors. It includes also *indirect* case management

activity such as record keeping, work within agency or clinic structures, learning procedures to work with managed care companies and developing familiarity with the myriad of support activities necessary to effectively conduct counseling in various professional settings. The Practicum involves personal supervision by *on-site* supervisors who will train, model and critique performance. Gradually, it is intended the Practicum student will be given increased responsibility and assigned to work *directly with clients, families or groups* when deemed appropriate by the on-site supervisor who will then directly supervise the student during this phase of instruction.

The Practicum II also includes *faculty supervision* and instruction conducted through several mediums including a weekly seminar. In the seminar, conducted on campus, Practicum students have the opportunity to gain valuable additional experience and skill development through several learning processes, two of which involve *faculty performance critiques* and *collegial consultation*.

- Your faculty Practicum supervisor will observe your performance, including presentation of cases during seminar. Each presentation will be critiqued with respect to the quality of its content and the degree to which it adheres to professional standards of practice.
- In the manner of a professional consultation, colleagues attending the session will be expected to similarly critique presentations of one another, agreeing with or offering alternative case analysis, treatment recommendations and counseling technique suggestions.

The Practicum II involves on-site supervised experience which is to consist of a *minimum* of 100 clock hours that include:

- ☑ (1) a *minimum* of 40 clock hours of *direct* clinical work with clients;
- (2) a minimum of one hour per week of individual supervision with the on-site supervisor; and
- (3) a *minimum* of 1½ hours per week of faculty supervision via weekly internship conference seminars

ASSESSMENT OF LEARNING AND PERFORMANCE, GRADES Practicums are graded on a pass, fail basis. Successful completion of the course is based on demonstrated mastery of *academic knowledge and skills* and *professional competency*. This mastery will be judged by the instructor, both subjectively and objectively in a variety of ways, and

will consider many aspects of the students performance as assessed by: observation, written and oral presentations, on-site performance, attendance and participation in seminars and compliance with directions contained in this Syllabus and other instructions pertaining the Practicum. This evaluation will emphasize the student's work as evaluated by the on-site supervisor.

Practicum students will receive "feedback" regarding their performance. This will occur in a variety of ways, for example, during weekly individual supervision sessions with on-site supervisors, and in the form of seminar presentation critiques written to the student by their faculty supervisor. From time to time, formal as well as informal discussions will be held to appraise a student of performance strengths or concerns. These will be scheduled by the faculty supervisor and may occur during or after on-campus supervision seminars or through the medium of planned office visits. Written communication will also be a practical way to provide "feedback" via memorandum, letter or email.

PERFORMANCE REQUIREMENTS

The field of mental health is a challenging and rewarding profession. Like other health care occupations today, it is governed by a wide array of ethical as well as legal policies, laws and requirements. The Practicum, and the work of each student during their Practicum is

governed by those policies and requirements in the same fashion as any other professional who is engaged in the field of mental health practice.

7 A. Ethical Considerations:

It is always the professional obligation of the individual mental health practitioner in training to practice ethically. Doane College Practicum students are required as a minimum to:

- 1. Follow and comply with all federal laws, rules and regulations and those of the State of Nebraska and the Department of Health and Human Services Division of Regulation and Licensure.
- 2. Follow all of the principles and guidelines provided in the most current Code of Ethics as published by the American Counseling Association.
- 3. Inform your clients that you are a Doane College Master of Arts in Counseling intern-in-training, practicing under the supervision of (Name) your *on-site supervisor* and Dr. Belau, your Doane College *faculty supervisor*.
- 4. Safeguard confidentiality and right of privacy of:
 - a. Clients
 - b. Agencies
 - c. Staff
 - d. Fellow students
- 5. Become familiar with and proactively implement policies and practices enunciated in HIPPA, FERPA and other pertinent state and federal regulations.
- 6. Practice within your scope of practice and level of competence, that is, as a counselor-in-training under active supervision
- 7. Familiarize yourself with and abide by the policies and procedures of the clinic or agency where you are on-site.

B. Attendance; Conference Seminars and On-site Supervision

To comply with accreditation, Doane College, and state requirements:

- Practicum students are required to actively participate in a minimum of one (1) hour per week of supervision with their on-site supervisor.
- Students are also required to engage in one and one half (1¹/₂) hour each week of faculty supervision at Doane College through active participation in the Practicum/Internship seminar.

To fulfill this second requirement, the seminar is held on Wednesdays, from 6:00 pm to 7:30 pm. Practicum students are *required* to attend one session (1) each week during their internship.

In practical terms, each seminar is a "meeting of professional counselor colleagues" reviewing and discussing professional case assessments, case formulations, clinic practices and therapeutic interventions which they are conducting or have conducted with actual clients.

It is recognized that from time to time unforeseen events may prevent an student from attending a seminar. This absence is to be made up by attending an extra seminar after the student has completed their hours. If a student does not attend a seminar for more than three (3) consecutive weeks they are regarded as not practicing under appropriate supervision and are immediately suspended from their internship.

V C. Samples of clinical work:

Each *term*, Practicum II students are required to present a minimum of one (1) complete and organized sample of their clinical work during a weekly on-campus seminar. This "sample requires the Practicum student to select and organize the salient and relevant aspects of a clinical client/case situation in a professional synthesis.

This synthesis should draw on relevant data to present a theory-based hypothesis that parsimoniously organizes and explains the majority of the relevant data and dynamics of the case, is derived from an effective differential diagnosis, suggests an intervention strategy or treatment plan and leads to definable outcomes.

Several sequences or content formats might be used to effectively present a case formulation, clinical work sample. Following is a suggested outline that may be used for the presentation of the case to the weekly conference seminar:

- (a) Presenting Complaint or Issue: "What are we, the clinician and the client, concerned about here?"
- (b) Significant History: "What do I have to know about this person's background to understand and make sense out of their current situation?" What interventions have been previously tried?
- (c) Developmental functional or dysfunctional competencies: "Who is this person? How do they go about being a person? What is the developmental psychopathology that prevents this person from being more functionally competent in coping with their experience?"
- (d) Diagnosis: Your best use of the skills of differential diagnosis and the language of the DSM-IV-TR to explain *your* conceptualization of this person and their experience. A multiaxial approach is important. Describe the dynamics underlying the client's presenting behavior and complaint(s). What condition(s) or influences are causing the problem?
- (e) Intervention Strategy: "What is your treatment plan? What can you do to facilitate increased functional competency in this individual in the situation they are experiencing?" Define the counseling method(s) or intervention(s) you consider most likely to be effective and why.
- (f) Anticipated Outcome: "What do you expect to see if the client is getting better, i.e., becoming more functionally competent; what will that look like?"

∇ D. Professional ---Collegial Consultation

Practicum II students are expected to organize and present at weekly seminars clear, concise and relevant professional presentations of their clinical work.

Practicum students and Interns attending the seminar are expected to regard the presentation as a request for their consultation, and thereupon, assume the role of "consultant colleagues."

In this consultant role one is expected to provide critical review, commentary and evaluation of the work presented. Consultation includes *active* (verbal) demonstration of:

- a. An understanding of the presenter's case conceptualization and hypothesis: "Ask until you understand; confirm your understanding with the presenter to make certain you fully grasp their diagnostic hypothesis."
- b. A professional critique of the assumptions, hypothesis and intervention strategy. "Is this the most parsimonious and effective way to organize and understand the data?" Does the assessment and judgment of underlying dynamics make diagnostic sense? Are there *better* alternative conceptualizations or a better differential diagnosis?
- c. Do the therapeutic interventions and strategies of the presenting intern make sense? Are they clearly identified and justified? Are the counseling intervention strategies and techniques aligned with the case dynamics? "How does this strategy fit with the hypothesis? With best practices? With outcome based interventions? Can you offer a better fit?"
- d. Outcomes: "Are these the most likely or relevant signs of progress?"

∇ E. Writing Requirements:

There is one mandatory *writing* requirement which is to be completed by each Practicum II student during their practicum: a Treatment Plan.

Treatment Plan:

Once during the Practicum II, a formal Treatment Plan is to be submitted to the student's faculty supervisor. The format for the plan may be one which is used at the clinic or agency where the practicum is taking place or alternatively, may utilize a format copied from one provided by the supervisor. The plan you submit *must* include the following content:

Presenting Problem(s)

- □ What brings the client in for counseling
- □ Your estimate of the problem
- □ A functional analysis of the problem, including what elicits and what maintains the problem

Background, client history information:

- Disguised name
- Accurate age and occupation of the client.
- Client's education background
- Summary of family history
- Present marital status, or relationship with a partner
- □ Family, to include summary or Genogram of immediate and extended family.
- □ History of the problem
- □ What the client has attempted in the past to resolve matters
- □ Your estimate of the client's cognitive ability and adaptive behavior
- □ Involvement of substances if any
- Medical conditions that affect the problem or treatment

DSM Diagnostic Assessment using the APA Multiaxial format.

Axis I through V, as illustrated in DSM IV-TR.

Treatment Plan

- Define the key dysfunctional condition(s) presented by the client and as defined by your DSM assessment
- Stipulate for each condition(s) presented by the client and as defined by your DSM assessment the counseling technique and/or behavior intervention strategy to be used to address it.
- Specify the family or environmental conditions influencing client issues and how you will address them, i.e., appropriate systemic intervention(s).

The Treatment Plan you submit should be about an *actual case* you have treated, and is to be derived from a case that you have presented during an on-campus seminar. The identity of the individual, and family members, are to be disguised to maintain confidentiality. The dates of treatment and clinic or setting, client occupation and education, however, should be accurate.

Treatment plans are to be typed or if hand written, they must be legible. Professional appearance is important. They should be concise, but complete. If your clinic procedure includes working with the client to devise the plan, note that on the report.

V F. Colleague --- Plan Critiques

Constructive "feedback" is a valuable avenue for improving one's expertise. In the seminar we have a group of well educated graduate students, working at a masters degree level who can effectively provide a constructive critique of our treatment plans and referral letter, and who can improve their own skills in the process.

The faculty supervisor will duplicate the required Treatment Plan and distribute it to seminar class members for their critique. Following their review, members will return the Plan directly to the supervisor with their annotations and comments.

Writing effective treatment plans represents an essential capability for which the mental health practitioner must be reasonably skilled. Yet, while these tools are used extensively, training on the process is seldom addressed in the clinic or private practice. Writing and critiquing a Treatment Plan affords the opportunity for the student to benefit from the specific suggestions of their knowledgeable contemporaries, and enhance their own writing skill and ability to professionally appraise these instruments later in one's own practice.

Readers (collegial reviewers):

- Read and offer thoughtful, positive constructive, critique of each Treatment Plan and Referral Letter your are given.
- Return your written critique within two weeks.
- Annotate corrections directly on the Plan or Letter if they are relatively simple. Use red or discernable colored ink. A set of suggestions to improve understandability or technical aspects of the letter/plan should be attached.
- Your critique must not be overly brief, e.g., saying "good letter!" is not sufficient. If you thought it was an excellent letter or plan and cannot find any way to improve it, explain what was helpful so the author can continue to incorporate those elements into their style. (One to three pages of critiquing is sufficient the author likely cannot incorporate more feedback than that).

V G. Professional Development Plan

Practicum students are to give the MAC faculty supervisor a brief, written statement of their learning objectives periodically or under specific conditions during their training:

Option A: By the end of the second week of each term, or if changing practicum training sites, provide the faculty supervisor with a summary of goals for the term at that site or training setting where they are about to work. This summary must include a statement of: *what clinical competencies* are you planning to explore, develop, or master; and what you would like to get out of this term or at the new internship site. This can be from a half a page summary to a more elaborately thought out plan.

Option B: If you do not do a prospective "What will I try to learn" plan, at the end of the term you will need to submit a "retrospective plan". In this plan you will need to take three course learning objectives from the syllabus of each of the courses you have completed here in the Doane MAC Program and illustrate how that applied to your overall professional development at your site and describe specific clinical applications of each.

SUSPENSION OR RESTRICTION OF INTERNSHIP

A Practicum student may be suspended for cause. Conditions under which a practicum student will be suspended or restricted include, but are not limited to, instances where: a student fails to perform the responsibilities of their practicum in a professional manner, performs inadequately or conducts themselves in a manner that by any common sense standard is inimical. Suspension and restriction will also result when practicum student fails to

adhere to the policies and standards outlined in this Course Syllabus such as those stipulated in the Standards for Student Intern Conduct, and includes instances when a student does not follow oral and written directives which they are given by faculty and/or on-site supervisors.

Violation of Doane College standards and policies, as they are stated in the College Catalog or Graduate Program publications such as the MAC Student Handbook, may also result in suspension or restriction.

A Practicum student will be suspended or restricted when the student fails to adhere to professional standards of ethics and conduct, such as those stipulated in this Syllabus and those outlined by the American Counseling Association, or if an intern violates state or federal laws and regulations.

Other instances in which suspension or restriction will occur include those where a student: (a) fails to adhere to attendance requirements, such as missing three or more weeks of campus or on-site supervision; (b) fails to work successfully at an approved practicum site, including ineffective or unsatisfactory work with clients, failure to adequately demonstrate professional competency, or poor interpersonal skills and behavior.

A Practicum student will be suspended if a student: (1) has failed to register for the course; (2) does not have adequate liability insurance or if there is a limitation or discontinuation of liability insurance; (3) attempts to train under an unqualified or unapproved site supervisor; (d) undertakes a Practicum at a clinic, site or agency that has not been approved.

Suspensions or restrictions will be determined on a case by case basis by the Doane College Director of Clinical Supervision.

While suspended a student may *not* represent themselves as a Doane College Practicum student or as a Student-In-Training, may not see clients or function as a Doane College student at any practicum or internship site.

To be reinstated the student must meet with the Director of Clinical Placement and present a written request for reinstatement. The suspended or restricted student will be required to satisfactorily explain the absence, conduct, or condition of concern, and/or take other action as determined by the Director to correct any the problem that led to suspension or limitation which in the view of the Director rendered the Intern's practice inimical to themselves, the College or to have been in contravention of professional standards, college or course policies.

GENERAL INFORMATION:

Practical Requirements

- 1. A student must be *registered* in the Practicum course *before* undertaking any work on site; a student cannot collect hours before the first day of the term in which they are registered.
- 2. Students must provide a copy of current professional liability insurance in order to register for the practicum.

- 3. Students are expected to enroll in courses for each term in person during the "Formal Registration" dates for that term, as posted on the Doane College calendar. From time to time urgent circumstances may prevent a student from enrolling at the Formal Registration time. Students may present a written petition to the Assistant Dean explaining why they were not able to register at Formal Registration and request a late registration. No registrations will be accepted for a class after the beginning of the fifth (5th) week of a term.
- 4. A student engaged in a practicum must immediately notify the MAC program of any change in insurance status. Failure to immediately notify the program of change or discontinuation of insurance results in immediate suspension from the practicum.
- 5. MAC students must have a written, signed agreement with a practicum site supervisor, on file, before *representing themselves as a practicum student or as a student in training,* and before working with clients or recording *any* practicum hours.
- 6. To engage in a practicum, a student must have successfully completed all course work, the records of which must be on file with the Dean. The documents must include a signed agreement from the on-site supervisor.
- 7. Upon completion, a student must submit documentation of their Practicum to the Graduate Office within two weeks of completing their Practicum hours.

Content Practicum and Internship Logs

Accurate Record Keeping

Each student is to keep an accurate log of the time spent in the practicum. This record is to be submitted on the Doane College forms as illustrated in the Student Handbook; either the paper or the spreadsheet official version of the form is acceptable. All direct and indirect practicum activity is to be recorded on the form.

Additional Policies

At least 100 on-site hours are required for successful completion of the Practicum. As a minimum, forty percent (40%), of those hours must be "direct contact" mental health service with a client, couple, family or group.

Practicum students must document this time to include: individual supervision with the on-site supervisor that averages not less than one (1) hour per week; and (c) group supervision via the weekly internship conference seminar meeting that equals or exceeds a minimum of one and one half (1¹/₂) hours per week.

Definitions of Direct and Indirect Internship Training

"Direct Client Contact Hours" are defined as those hours spent directly with clients. The purpose or goal of the client meeting is mental health counseling or psychotherapy. Each of the parties, the counselor-intraining (Practicum student) and the client must understand the purpose of the meeting and that they intend to enter into a professional therapeutic relationship as defined and governed by the Ethical Code of the American Counseling Association. The practicum student engages in *direct* meeting sessions only with and/or under supervision of a licensed practitioner. The services provided in the client meeting are services defined and governed by Nebraska statutes which govern and regulate mental health counseling; they are services that require and can only be provided by a licensed mental health professional. Nebraska statutes regulate both the title and the practice of mental health counseling. Services that are called mental health counseling must be offered by a licensed professional, and the practice or function of professional mental health counseling without appropriate licensure or certification, no matter what it is called, is prohibited.

If a type of service is such that it can be provided by individuals who are not licensed as mental health professionals they are *not* Direct Client Contact Hours. If the services can be provided by "well trained" volunteers or by skilled teachers, community service workers or case managers, by family specialists or by family support workers, by the practicum site agency definition and by state law they are not mental health counseling services and are *not* Direct Client Contact Hours.

"Indirect Practicum Hours" are those hours required by the site or site supervisor in order for the student to be prepared for or after having provided direct client services. Some examples of Indirect Hours are: chart notes and record keeping, case conferences or staffing, chart review, client reception or telephone coverage, agency orientation or training. These are all functions directly related to providing mental health counseling services to the clients of this agency or practice. In-direct hours *do not* include hours spent at an elective training or workshop.

Program Overview and Limitation on what constitutes Indirect hours

The Master of Arts in Counseling Program is divided into two parts. The first part of the program consists largely of academic, in-class, independent and supervised study, and involves primarily study aimed at acquiring the basic knowledge and skills of the professional mental health counselor, and the development of a personal professional identity as a counselor. The MAC academic curriculum provides the students with a comprehensive and adequate exposure to the knowledge and skills of professional mental health counseling. However, this is only an initial and basic knowledge and skill set.

The second part of the program which occurs during the Practicum and Internship focuses on helping students successfully apply and practice the knowledge and skill gained from course instruction. This second part is intended to afford opportunity to operationalize one's identity and skill by experiencing and demonstrating a high degree of sound professional competency in the delivery of mental health counseling services.

It is expected that the professional mental health counselor will continue to pursue their own professional development throughout their career; in fact that continued pursuit is required by licensing laws in all states. There is always new research and more to learn. The pursuit of knowledge is encouraged and expected of the MAC student or graduate. However, during practicum, workshops and conferences taken independently while the student is in practicum, may occur in a time frame coinciding with the course, but if they are not a direct part of the prescribed on-site training or clinic activity and/or are not a part of the Doane curriculum ---they are regarded as a quest for knowledge and skill ---but *not* a part of the practicum. Such work is not credited to either indirect or direct practicum course hours.

STANDARDS FOR STUDENT CONDUCT CONDUCT

Doane College requires that all students adhere to the ethical principles of the counseling profession as set forth in: the American Counseling Association Code ethics; the regulations of the Nebraska Department of Health, Bureau of Examining Boards in accordance the Nebraska Mental Health Practice Certification Act; and the laws of the State of Nebraska and the United States of America.

Nebraska statutes prohibit independent practice in mental health by non-licensed individuals. Counselors-in-training must assure that they are practicing under adequate clinical and academic supervision. Regardless of previous credentials, education or past experience when entering the MAC program, participation in a *counselor training program* indicates that the student is committed to developing a professional identity as a mental health counselor and is intent on developing professional knowledge and skills necessary to achieve expertise in this career field.

The development of this identity and specific professional competency occurs throughout graduate-level training. It is appropriate for students, whatever their previous experience, to view themselves as counselors-in-training. Engagement in any relevant professional activities should be done in such a way that reflects and respects these commitments and maintains professional integrity.

In addition:

- 1. The program requires the highest standards of professional and personal conduct from all students.
- 2. Doane College requires each student to abide by the policies and procedures of the program and to comply with the program's standards.
- 3. A Practicum student, or their immediate family, may not establish or continue a therapeutic relationship with any faculty member, on-site supervisor, site training agency, program or colleague while registered in this course.
- 4. A student may not represent themselves as a Practicum student or as a counselor-in-training unless they are *registered* in this course and have arranged for and are actively working under the operational faculty supervision of the Director of Clinical Placement and/or Dean of the MAC Program.
- 5. Failure to comply with these standards of conduct will result in disciplinary action and may lead to suspension or dismissal from the program.

TIMEYou have selectively chosen the MAC program as the foundation for aLIMITSprofessional career.The Practicum is a rewarding, enjoyable part of your studies.It is a very challenging course intended to facilitate learning, professional growthand mastery. While students can work long hours and carry heavy loads of responsibility you cannot force

growth. Growth happens with time, experience, thought and desire. Keep in mind that this is a professional course designed to facilitate your effectiveness as a counselor in the complex process of *identifying* and then successfully addressing the needs of *clients*.

For this reason thirty hours (30) per week is generally the maximum time students may spend at a practicum site without becoming tired and wearing themselves out. It is usually the optimum time one can be engaged in intense case work and also continue to undertake collateral research and fulfill other family and academic commitments. In some cases, the practicum is, however, of such nature that more than thirty hours are needed. There are also occasional instances where students benefit from additional time in case work and can do so without adverse health and family problems. Therefore, the policy is that not more than 30 hours per week can be counted as direct or indirect hours. However, exceptions can be made on a case by case basis in which a maximum of 40 hours will be authorized, but only *after* personal discussion and written approval of the Director of Clinical Supervision.

OFFICIAL CONTACTS AND COMMUNICATIONS

Official correspondence and communication is sent to a student's Doane College email address, Check your email account frequently.

THE ON-CAMPUS SUPERVISION SEMINAR Study responsibility: There is a huge body of knowledge that you have explored throughout your academic course of study in the MAC program. Now, in your practicum, you will have the opportunity

to effectively select and apply those theoretical concepts or techniques directly with clients and supervisors in the field, and through case presentation and consultation on campus during faculty supervised seminars. This professional collegial setting provides the opportunity to practice and refine and *demonstrate* your *professional mastery* of the functions of a mental health counselor.

The on campus seminar is an essential element in the process. The faculty and college will carefully structure and teach within the context of the seminar, but learning and mastery is *your* responsibility. The opportunities afforded by cooperative collaborative consultation, with on-site supervisors, faculty and colleagues in the internship and participation in the on campus seminar is important.

The seminar is a venue in which questions can be raised and addressed, theories analyzed, and advanced professional learning facilitated. You are expected to attend and participate with other Practicum students and Interns.

- You are *encouraged* to raise questions during the seminar so that inquiry will disclose where clarification is needed, and afford opportunity to add depth and resolve questions likely held by more than one person.
- Your comments, personal-life experience, observations, and ideas *are* welcome and *beneficial* to everyone's learning. This is particularly true in this type seminar. However, when discussing specific mental health cases or individuals, whether you are referring to yourself, your family, acquaintances, or speaking about past or present cases ----do *not* identify who you are talking about.
- It is important to recognize that the function of an informal advisor and that of a personal friend is based on personal life experience; but the function of the *professional* mental health therapist is based on "professional experience," training, extensive academic study and involves knowledge based on research, science and professional literature, not just opinion.

It is important *you* be given personal attention. In addition to consultation by your colleagues *during seminar* sessions, to resolve questions not clarified in seminar, or to address something that concerns you, the faculty instructor will be available after class. But because time is often congested after each session, you may wish to make an appointment to visit with the instructor at another time. Appointments are encouraged. If you wish to contact the instructor, refer to the telephone numbers or email address listed on Page 1 of this Syllabus.

Seminar Scheduling and Cancellations: Because work at mental health clinics, agencies or approved training sites does not follow the College schedule, the on-campus faculty supervised seminar will be held on a continuous basis. Except for holidays, sessions will be held weekly during and between semesters.

Should bad weather or am unforeseen event cause an unexpected cancellation of a seminar session you will be notified through your Doane email account. However, if it is determined that a make-up session is necessary plans will be made to reschedule.