Appendix A: Annual Report Template

<u>The Chicago School of Professional Psychology</u> *Annual Report Template 2014-2015*

Name of Program: Clinical Mental Health Counseling University or Individual Report Level: MA in CMHC - Online

Program Learning Outcomes (Student Learning Assessment):

- PLO 1: Diversity and Advocacy: Graduates will demonstrate the knowledge, skills, and practices to deliver culturally appropriate counseling services, advocate for clients, and understand how to influence policy to enhance the practice of clinical mental health counseling.
- PLO 2: Foundations: Graduates will show a commitment to their identity as counselors through membership and activities in professional organizations, and through ethical behavior in their work with clients and other professionals.
- PLO 3: Counseling, Prevention, and Intervention: Graduates will demonstrate the knowledge, skills, and practices of culturally appropriate diagnosis, treatment, referral, and prevention of mental and emotional disorders.
- PLO 4: Assessment: Graduates will demonstrate the knowledge, skills, and practices of culturally appropriate and holistic clinical evaluation and assessment of normalcy and psychopathology.
- PLO 5: Diagnosis: Graduates will demonstrate the knowledge, skills, and practices of culturally appropriate diagnosis of both psychopathology and normal developmental challenges, including appropriate use of diagnosis during trauma-causing events.
- PLO 6: Research and Evaluation: Graduates will competently and critically evaluate clinical mental health counseling research, demonstrate understanding of evidence-based treatments and outcome evaluation, and apply appropriate models of program evaluation.

Program Maintenance Outcomes (Program Effectiveness Data):

- PMO 1: Integrate 2016 CACREP Standards and realign curriculum and assessment map by April 2015.
- PMO 2: Develop a comprehensive evaluation program to fulfill Section IV of the 2016 CACREP Standards.
- PMO 3: Develop Student Handbook and New Student Orientation to align with 2016 CACREP Standards Section I, M. and N.
- PMO 4: Complete initial draft of CACREP Self-Study.

Where are these outcomes published?

The PLOs are published in the TSCPP Academic Catalog and Student Handbook, as well as in the CMHC Program of Study and Guidebook. The PLOs are also identified in the CMHC Student Orientation and the CMHC Advising Forum. Also, each courses identifies the specific PLOs, CLOs, and MLOs addressed in each course. The CMHC-Online faculty have developed a comprehensive curriculum map and assessment map grounded in the 2016 CACREP Standards and the TCS PLOs.

Assessed Outcomes Outcomes assessed during AY 2014-15	Assessment Methods Describe the assessment methods used	Data Reviewed and Findings Provide a description of the data reviewed and a summary of the findings. Describe the process for evaluating/analyzing the findings	Action Steps Describe implemented/planned actions based on findings; include actions that should be started, stopped, or continued. Include budget implications if any.
PLO #1 Diversity and Advocacy: Graduates will demonstrate the knowledge, skills, and practices to deliver culturally appropriate counseling services, advocate for clients, and understand how to influence policy to enhance the practice of clinical mental health counseling.	Counselor Preparation Comprehensive Examination (CPCE); Signature assessments in CM521 – Lifespan Development, CM528 – Helping Relationships, and CM550 – Diversity and Multiculturalism.	Student performance on the CPCE and the competency scores for the signature assessment measuring PLO 1 exceed expectations. Faculty members and students also provided qualitative feedback indicating CM550 may need some revisions. Faculty have expressed concerns that the content is not comprehensive enough and needs to be updated to include topics, such as micro-aggression and current events.	Conduct additional course evaluations with students who have completed CM550 and faculty members who have taught the course. Determine if course is aligned fully with the 2016 CACREP Standards. Faculty will review course, signature assessment, and student/faculty feedback to determine what, if any, revisions are needed.
PLO #2 Foundations: Graduates will show a commitment to their identity as counselors through membership and activities in	Counselor Preparation Comprehensive Examination (CPCE); Signature assessments in CM500 – Intro to the Counseling Profession, CM528 – Helping Relationships, and CM550 – Diversity and Multiculturalism.	 Student performance on the CPCE and the competency scores for the signature assessment measuring PLO 2 exceed expectations. Students will need additional content reinforcement to be ready for the National Counselor Exam. 	 Provide additional material regarding Professional Orientation in CM 592 – Clinical Mental Health Counseling and in an optional NCE preparation course to be offered prior to Residency 2. Faculty will be reminded to integrate the four essential threads of the CMHC program (practical application, professional identity, ethical decision making, and

professional organizations, and through ethical behavior in their work with clients and other professionals.			multicultural competence) into every course.
PLO #3 Counseling, Prevention, and Intervention: Graduates will demonstrate the knowledge, skills, and practices of culturally appropriate diagnosis, treatment, referral, and prevention of mental and emotional disorders.	Counselor Preparation Comprehensive Examination (CPCE); Signature assessments in CM507 — Theories of Counseling, CM521 — Lifespan Development, and CM528 — Helping Relationships	The Demonstration Levels noted for the signature assessment for PLO 3 in CM 521 are developmentally appropriate but lower than the other competency demonstration levels in other courses. Faculty members and students have also provided qualitative feedback indicating the CM521 course is not delivering well and may need some revisions.	Conduct additional course evaluations with students who have completed CM521. Determine if course is aligned fully with the 2016 CACREP Standards. Faculty will review course, signature assessment, and student/faculty feedback to determine what, if any, revisions are needed.
PLO #4 Assessment: Graduates will demonstrate the knowledge, skills, and practices of culturally appropriate and	 Counselor Preparation Comprehensive Examination (CPCE); Signature assessments in CM528 – Helping Relationships 	 Student performance on the CPCE and the competency scores for the signature assessment measuring PLO 4 meets expectations despite students not having their assessment course (CM571) yet and only having limited exposure to assessment concepts in first year courses. 	 Complete development of CM571- Assessment and incorporate assessment material CM 578 – Research and Program Evaluation, CM564 – Career Development, CM536 – Group (including Residency 2), and field work courses. Revisit course sequence to ensure courses

holistic clinical evaluation and assessment of normalcy and psychopathology. PLO #5 Diagnosis: Graduates will demonstrate the knowledge, skills, and practices of culturally appropriate diagnosis of both psychopathology and normal developmental challenges, including appropriate use of diagnosis during trauma-	Not assessed yet in department	Not assessed yet in department	build upon one another, e.g. CM571 to occur before CM578. • Not assessed yet in department
during trauma- causing events.	Counselor Preparation	Students scored between almost one standard	Complete development of CM578-
Research and Evaluation: Graduates will competently and critically evaluate clinical mental health counseling research, demonstrate	Comprehensive Examination (CPCE)	deviation to one and a half standard deviations below the national mean for the research domain of the CPCE. Students have not completed CM 578 – Research and Program Evaluation, which is a second year course. Overall, performance on CPCE may reflect prerequisite research course for admission and emphasis on evidence-based practice in all courses.	Research and Program Evaluation and ensure course is aligned fully with the 2016 CACREP Standards.

understanding of evidence-based treatments and outcome evaluation, and apply appropriate models of program evaluation. PMOs	2014 Assessment Methods	Data Reviewed and Findings	Actions
PMO # 1 Integrate 2016 CACREP Standards and realign curriculum and assessment map by April 2015.	CACREP 2016 Standards Workload	 Curriculum Map; Assessment Map; Course Syllabi; Signature assignments; PLO rubrics Chair's curriculum workload specific to course development during Summer 2015. The following courses have been updated or developed to reflect the 2016 CACREP Standards which were released in late May 2015: CM 500, 507, 514, 521, 528, 530, 550, 543, 571, 578, 592, 598, and 599. The CMHC-Online Chair was spending 10 – 15 hours each week in course development oversight. 	 Start: Develop courses utilizing 2016 CACREP Standards and ensure alignment between the curriculum map, assessment map, courses, prospectuses, pre-course learning modules, and signature assignments. Stop: Ensure 2009 CACREP Standards are no longer in the curriculum map, assessment map, courses, and signature assignments. Continue: Monitor CACREP Standards and CACREP Board actions/clarifications to remain current. Attend CACREP trainings at ACA and ACES regional conferences to remain current. Create Curriculum Lead to assist Chair with Course Development project management. Curriculum lead will facilitate course development summits, conduct initial course reviews, ensure

PMOs	2014 Assessment Methods	Data Reviewed and Findings	timely submission of courses, and enhance course alignment. • Utilize Graduate Assistants, Curriculum Lead, and External Reviewer to ensure alignment with 2016 Standards. Actions
PMO # 2 Develop a comprehensive evaluation program to fulfill Section 4 of the 2016 CACREP Standards.	2016 CACREP Standards Section 4 – Evaluation in the Program	 Institutional Policies and Procedures; 2016 CACREP Standards, Program Policies and Procedures; Curriculum Map; Assessment Map; Course Syllabi; Signature assignments; PLO rubrics The CMHC faculty reviewed Section 4 and began developing a comprehensive, systematic assessment plan for monitoring individual student progress and evaluating the program. The faculty developed and implemented policies, procedures, an assessment map, PLO/CLO rubrics, the Dispositions and Skills Competency Assessment (DSCA), and a plan for skills remediation. The first step in the process was a comprehensive review of the 2016 CACREP Standard A. – The program needed "a documented, empirically based plan for systematically evaluating the program objectives, including student learning."	 Incorporate 2016 CACREP Section 4 into a comprehensive evaluation process. Standard D Disseminate annual report on website and notify students and faculty of report location. Modify TSCPP annual report to fulfill 2016 CACREP requirements. Standard E Post data on (1) the number of graduates for the past academic year, (2) pass rates on credentialing examinations, (3) completion rates, and (4) job placement rates as soon as available. In the meantime, note the absence of the data until first cohort completes program in 2017. Modify CM 521 and 550 based on student and faculty feedback. Modify CM 528 in the following ways: Reduce residency orientations from two to one session. Continue service learning opportunities and expand service learning debriefings.

- Implemented Tk20 in all CMHC- Online courses.
- o Standard B. " demonstrate the use of the following to evaluate the program objectives: (1) aggregate student assessment data that address student knowledge, skills, and professional dispositions; (2) demographic and other characteristics of applicants, students, and graduates; and (3) data from systematic follow-up studies of graduates, site supervisors, and employers of program graduates."
 - Faculty members meet biannually for assessment summit and bi-weekly for faculty meetings
- Standard C. "evidence of the use of program evaluation data to inform program modifications"
 - Faculty members meet biannually for assessment summit and bi-weekly for faculty meetings.
 - The following courses were modified based on program evaluation data: CM500, CM507, and CM521. CM521 and CM550 has been identified for future revision.

- Eliminate the requirement for students to notate in their residency journal what activities met distinct CACREP 2016 standards.
- Pursue a more stable and useful video recording platform; GTM was not a good option.
- Provide an optional day or half day of team building activities at the start of the residency experience.
- Change the composition of the suicide assessment lab session.
- Rework the days to attempt to provide more assimilation and unstructured time.

Stop: Cease utilizing 2009 CACREP Standards.

Continue:

- Standard A. Utilize and adapt Benchmark Assessment Chart.
- Standard B., F., and G. Utilize Tk20, student evaluations, CMHC Dispositions and Skills Assessment instrument (DSCA), and other data points to track student progress and potential program modification needs.
- Vet DSCA with other counselor educators in the U.S. and Canada at professional conferences, such as ACA in Montreal in March 2016 and

- o Standard D. "disseminate an annual report that includes...(1) a summary of the program evaluation results, (2) subsequent program modifications, and (3) any other substantial program changes. The report is published on the program website in an easily accessible location, and students currently in the program, program faculty, institutional administrators, and personnel in cooperating agencies (e.g., employers, site supervisors) are notified that the report is available."
 - Annual report completed each year as part of TCSPP program review.
- Standard E. "post on the program's website in an easily accessible location the following specific information for each entry-level specialty area and doctoral program: (1) the number of graduates for the past academic year, (2) pass rates on credentialing examinations, (3) completion rates, and (4) job placement rates."
 - This data is not yet available; however, there needs to be mention on the website that this information is not yet

- the ACES regional conferences in the Fall of 2016. Submit DSCA development for peer review with a national counseling journal.
- Standard C., F., G., and H. Meet as a faculty bi-annually for assessment summit and bi-weekly for faculty meetings. Utilize formal and informal evaluations inform program modification as documented in minutes of both types of meetings. Engage students in course development process and seek student input on each course during and upon completion of each course.
- Standard I. and J. Utilize the TCSPP written procedures for administering the process for student evaluations of faculty each term.

	available due to the
	newness of the program.
o Stand	ard F. – "faculty systematically
asses	ses each student's progress
throu	ghout the program by
exam	ning student learning in
relation	on to a combination of
know	ledge and skills. The
asses	sment process includes the
follow	ring: (1) identification of key
perfo	rmance indicators of student
learni	ng in each of the eight core
areas	and in each student's
respe	ctive specialty area(s), (2)
meas	urement of student learning
condu	icted via multiple measures
and o	ver multiple points in time,
and (3	3) review or analysis of data."
•	Faculty utilize the
	Benchmark Assessment
	chart and multiple data
	points, including signature
	assessments via Tk20,
	student evaluations, CMHC
	Dispositions and Skills
	Competency Assessment
	instrument (DSCA), the CPCE
	scores, and course grades to
	track student progress.
o Stand	ard G. – "systematically
asses	ses each student's professional
dispo	sitions throughout the
progr	am. The assessment process
includ	les the following: (1)
	·

idomtification of loss confersional	
identification of key professional	
dispositions, (2) measurement of	
student professional dispositions	
over multiple points in time, and (3)	
review or analysis of data."	
■ Faculty utilize CMHC	
Dispositions and Skills	
Competency Assessment	
instrument (DSCA) at	
specific benchmarks to	
assess each student's	
professional dispositions	
throughout the program.	
 Standard H "systematic process in 	
place for the use of individual	
student assessment data in relation	
to retention, remediation, and	
dismissal"	
Each term, faculty review	
retention, remediation, and	
dismissal data for the	
previous and current term.	
This data informs	
interventions and ongoing	
program improvement.	
 Faculty members identify 	
and collaborate to establish	
remediation plans for	
students at each bi-weekly	
faculty meeting.	
The Academic Development	
Plan Manager reviews each	
student who has an ADP at	
bi-weekly faculty meetings	

as well. The ADP Manager, faculty advisors, and Student Ambassadors work in a team format to support students on ADPs. Standard I. and J. - Written procedures for administering the process for student evaluations of faculty. "Students have regular, systematic opportunities to formally evaluate counselor education program faculty." ■ The CMHC Online program follows the TSCPP policy regarding course evaluations in the Student Handbook: http://catalog.th echicagoschool.edu/content .php?catoid=51&navoid=28 20#course-evaluations Standard K. – "Students have regular, systematic opportunities to formally evaluate practicum and internship supervisors." Not applicable yet; however, the Director of Applied Professional Practice is developing the evaluation forms. Modifications will be made to CM 528 and Residency 1 based on faculty and student feedback. Student feedback was elicited via large group sharing at the close of residency, an anonymous online survey distributed at the end

- of CM 528, and through their final course reflective journal entry. Faculty feedback was elicited both while at residency during daily debriefings and at the end of the CM 528 course in a faculty meeting.
- A major accomplishment of the department, particularly the Director of Applied Professional Practice, was the development of the Dispositions and Skills Competency Assessment (DSCA), which is described below:
 - The CMHC online program developed the Dispositions and Skills Competency Assessment (DSCA) is a tool to measure student progress in clinically oriented competencies across the curriculum. Benchmark levels are assessed at set points during the students' progression through the CMHC online program. The DSCA has three parts: Part 1 -Professional Behavior and Dispositions, Part 2 - Basic Professional Practice Skills and Behaviors, and Part 3 - Advanced Professional Practice Skills and Behaviors. Each section has specific criteria on which students are assessed; each criterion was developed and validated using extant literature, CACREP 2016 standards, the 2014 ACA Code of Ethics, Program Learning Outcomes, and the ACA 2015 Multicultural competencies. At the writing of this

report, the program has compiled	
data on the Fall 2014 and Spring	
2015 cohorts utilizing parts 1 and 2	
of the DSCA.	
 Summary of Part 1- The Professional 	
Behavior and Dispositions data of	
the DSCA assesses student growth	
and development on 20 distinct	
knowledge points, behaviors, and	
dispositions related to the overall	
ability to function as a counseling	
professional. Some examples in Part	
1 include professional ethics,	
professionalism, emotional stability	
and self-control,	
engagement/motivation to learn	
and grow, seeking support and	
consultation, and integration of	
evidence. Part 1 of the DSCA is first	
compiled after students have	
completed their first semester of	
coursework and systematically	
assess each student's progress	
throughout the program. At the first	
collection point data is compiled	
individually, then aggregated from	
input by all faculty members with	
whom the students have had	
courses. See Appendix C for all DSCA	
data collection points.	
 Competency levels for the DSCA are 	
assessed on a leveled scale from 0-5,	
with the understanding that	
competency acquisition is a	

dev	elopmental, time oriented	
pro	cess and students will begin at 0-	
1, w	vith the end goal of attaining	
leve	el 5 competency in most areas	
whe	en all clinical training is complete.	
All e	effort is made within the	
pro	gram to ensure inter-rater	
relia	ability is achieved, and students	
are	evaluated based on the level of	
con	npetency they are demonstrating	
at t	he moment.	
o The	average student competency	
leve	el for part 1 of the DSCA was 1.92	
at t	he end of their first semester in	
the	CMHC Program. Students	
ave	raged a score of 2.05 at the	
ons	et of residency, demonstrating	
min	nimal gains in level between the	
first	t measurement and the	
asse	essment done in Unit 2 of their	
CM	528 Skills	
Dev	velopment/Residency Course. By	
the	end of residency, students'	
ave	rage competency had increased	
to t	he 2.85 level. This data	
illus	strates an overall trajectory of	
gro	wth in measured competencies.	
This	s data also deeply illustrates the	
dev	elopment of dispositions and	
skill	ls during the residency process	
o Par	t 2- Basic Professional Practice	
Skil	ls and Behaviors of the DSCA	
asse	esses student growth and	
dev	elopment on 20 distinct skills	

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and behaviors related to competent
clinical practice as a professional
counselor. Some examples in Part 2
include reflection of feelings and
meaning, counseling focus, risk and
abuse assessment, challenging, and
group leadership. Part 2 of the
DSCA is first completed after the
initial instructor/student face to face
role-play and feedback session prior
to attending Residency 1.
 The average student competency
level for part 1 of the DSCA was 0.92
when measured in Unit 2 of their
CM 528 Skills
Development/Residency Course. By
the end of residency, students'
average competency had increased
to the 1.78 level. This data
illustrates an overall trajectory of
growth in the measured Basic
Professional Practice Skills and
Behaviors competencies.
At regular benchmarks throughout
the program, students must
demonstrate proficiency at a given
level on the DSCA in order to
progress to the next level of clinical
skill training.
As per the CMHC DSCA policy, any
student achieving a 0 on any skill
and/or attaining an average score
below 2 in the Basic Professional
Practice Skills and Behaviors section

		of the DSCA at the conclusion of residency 1 is automatically referred to faculty for a Dispositions and Skills Development Plan (DSDP) review. The summer 2015 residency 1 faculty conducted a review of all students' progress during residency and recommended a DSDP be implemented for one student based on the qualitative and quantitative reports. An individualized, developmental plan was written to address needed areas for remediation. The student met with faculty, reviewed all elements of the plan, and agreed to carry out the requirements. Prior to registration for CM543 – Group and Residency 2, the student will need to complete all components of the plan, demonstrate growth in target areas, and attain acceptable DSCA scores based on a recorded and transcribed role-play.	
PMO # 3 Develop Student Handbook and New Student Orientation to align with 2016 CACREP Standards	Sec. I, Standard M Before or at the beginning of the first term of enrollment in the academic unit, the program provides a new student orientation during which a student handbook is disseminated and	 Handbook/ guidebook content, orientation content, orientation attendance, and completion of orientation assessment. A new student orientation was created by a team of faculty, staff, and students. The collaborative Prezi included all the required elements from Section 1., Standard M. of the 2016 CACREP Standards, as well as the 	 Start: Adapt Program Guidebook to serve as CACREP aligned handbook. Stop: Cease utilizing 2009 CACREP Standards. Continue: Providing access to Student Handbook and New Student Orientation as part of the Welcome letter form the program

Section I, M. and N.

- discussed, students' ethical and professional obligations and personal growth expectations as counselors-in-training are explained, and eligibility for licensure/certification is reviewed.
- Sec. I, Standard N. The student handbook includes (1) the mission statement of the academic unit and program objectives, (2) information about professional counseling organizations, opportunities for professional involvement, and activities appropriate for students, (3) matriculation requirements, (4) expectations of students, (5) academic appeal policy, (6) written endorsement policy explaining the procedures for recommending students for credentialing and employment, and (7) policy for student retention, remediation, and dismissal from the program.
- elements covered in Standard N. The orientation session can be reviewed at http://prezi.com/c7axvq7tf-id/?utm_campaign=share&utm_medium=copy
- The new orientation includes content slides, links to policies and resources, videos of current faculty and students, and pictures from the first residency that occurred in July 2015.
- An orientation quiz was initiated with the Spring 2015 cohort. Nineteen students completed the ten-question orientation quiz with an average score of 92% proficiency.
- The orientation quiz was strengthened utilizing student and faculty feedback, as well as the 2016 CACREP Standards. The CMHC program launched the first iteration of its online CMHC Orientation. Students in the Summer 2015 cohort completed a 14 question orientation quiz and scored an average of 95% proficiency.

- chair, the New Student Orientation, and within the CM 500 course.
- Students will complete the new student orientation, which includes the CMHC Orientation, and pass a quiz in CM 500 on the content with a proficiency of at least 80%.
- Continue developing and implementing scripted advising model, which supports student onboarding and retention.

PMO # 4 Complete initial draft of CACREP Self-Study.	CACREP 2016 Standards	Institutional policies and procedures; program policies and procedures; curriculum map, assessment map; course syllabi; faculty expertise; roles, responsibilities, and professional activity; student data; and program data. Due to the much later than anticipated release of the 2016 CACREP Standards, the CMHC faculty had to focus on course revision and did not have time to initiate a self-study draft.	 Start: Create draft of CACREP self-study utilizing 2016 CACREP Standards. Hire new faculty member to serve as accreditation specialist. Stop: Remove 2009 CACREP Standards from all program materials. Continue: Monitor CACREP Standards and CACREP Board actions/clarifications to remain current. Attend CACREP trainings at ACA and ACES conferences to remain current. Implement 2016 CACREP standards program wide
			program wide.

Table 1: PLO by Cohort (Fall 2014 – Summer 2015)

	PLO 1: Diversity and Advocacy	PLO 2: Foundations	PLO 3: Counseling, prevention, and Intervention	PLO 4: Assessment	PLO 5: Diagnosis	PLO 6: Research and Evaluation
Cohort 1 F2014	2.34	2.62	2.18	2.00		
Cohort 2 Sp2015	2.19	2.15	2.08	2.00		
Cohort 3 Smr2015		2.25	2.20			

Table 2: PLO by Class (Fall 2014 – Summer 2015)

	PLO 1: Diversity and Advocacy	PLO 2: Foundations	PLO 3: Counseling, prevention, and Intervention	PLO 4: Assessment	PLO 5: Diagnosis	PLO 6: Research and Evaluation
CM500		2.25				
CM507			2.32			
CM521	2.27		1.89			
CM528	2.50	2.89	2.33	2.00		
CM550	2.25	2.25				

Table 3: CPCE Scores by Cohort (July 2015) – Standardized Scores/Standard Deviations from National Mean

	PLO 1: Diversity and Advocacy	PLO 2: Foundations	PLO 3: Counseling, prevention, and Intervention	PLO 4: Assessment	PLO 5: Diagnosis	PLO 6: Research and Evaluation	Total Score
Cohort 1 F2014	9.69/-0.68	8.54/-1.09	8.18/-1.21	9.54/-0.74	Not Assessed	8.92/-0.95	70.15/-6.00
Cohort 2 Sp2015	7.67/-1.40	8.00/-1.28	7.94/-1.30	8.00/-1.28	Not Assessed	7.33/-1.51	64.33/-8.06
Cohort 3 Smr2015	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Note: Red font indicates students had not completed corresponding course work.

Table 4: ADP Outcomes (Fall 2014 – Summer 2015)

	New ADPs offered to students	ADP invitation accepted by student	Students who have left the program before accepting ADP	Students who left the program with ADP in progress	Students with a successful ADP completion
Fall II 2014	6	4	2	2	0
Spring I 2015	0	0	0	0	2
Spring II 2015	3	2	1	1	1
Summer I 2015	0	0	0	0	0
Summer II 2015	2	1	0	1	0
Fall I 2015	1	1	0	0	0

Fall II	5	3	1	0	1 complete; 3 in
2015					progress
Totals	17	11	4	4	4 complete; 3 in
					progress

Narrative:

Tables 1 and 2 examine the PLO competency scores for the CMHC-Online students. Table 1 provides data for the first three cohorts. The faculty members have determined signature assessments in each course that are linked to PLOs. The CMHC Program Competency Rubric (Appendix D) measures the nine 2016 CACREP Standards which are in turn linked to the six PLOs. Students within the first year of the program are developmentally appropriate if they are scoring between Demonstration Level 1 - 2 on each CLO across first year signature assessments. The cohorts as a whole are scoring above a Demonstration Level 2 on the competency rubric for most signature assessments in the first year. The one PLO that is developmentally appropriate but lower than the other competency demonstration levels is PLO3 in CM521 – Lifespan Development. Faculty members and students have also provided qualitative feedback indicating this course is not delivering well and may need some revisions.

Table 3 provides the CPCE Scores from July 2015 for the Fall 2014 and Spring 2015 cohorts. The raw scores were converted to standardized scores/standard deviations from the national mean. Students from the Fall 2014 and Spring 2015 cohorts completed the Counselor Preparation Comprehensive Examination (CPCE) at the beginning of their first residency in July 2015 as a benchmark assessment and were advised not to study for the CPCE. Prior to taking the exam, the Fall 2014 cohort had completed courses in professional orientation, lifespan development, counseling theory, psychopathology, and diversity and multiculturalism; whereas, the Spring 2015 cohort had completed courses in professional orientation, lifespan development, and counseling theory. The Fall 2014 cohort scored reasonably well for only having competed five courses of their graduate program and consistently scored better than the spring cohort, who still performed well despite only having three courses completed. Consistently, in content areas in which students had taken courses, the students scored within 1.5 standard deviations of the national mean of students who are taking the exam at the end of their graduate program. Scores for PLO3 were the lowest and represent three content areas on the CPCE, two of which none of the students had completed coursework (career development and group work).

In 2014-2015, the CMHC-Online program has utilized the ADP remediation process to intervene and remediate with students who have struggled academically or professionally, according to the TCS ADP guidelines. Remediation activities have included: increased advising sessions, meetings with instructors of current course, student tutoring and mentoring sessions, TCS writing seminars, and Graduate Student Success program enrollments. The Table 4 displays the results of these ADP efforts.

What change(s) have you made this year? (PMR):

CMHC – Online supported the on-ground campus' PMR to adjust the curriculum to add a second 3-credit internship course. While the on-ground campuses opted to reduce their elective pool to six credits to accommodate the addition of a second 3-credit internship course, students in the online program need a minimum of nine hours of elective course to be able to create a program of study that will meet licensure requirements across multiple states. The flexibility in course planning is essential for the CMHC program to maintain alignment with the curriculum requirements of 43 states and DC. The CMHC Online faculty examined the existing core courses and determined that the Addictions and Substance Abuse course (CM585) was the best course to move to the elective pool to maintain an elective pool of nine credits. At this current time, 12 states require or will most likely require an addiction/substance abuse course; however, students in those states can take the course as an elective course. The only other course required by less than 15 states was psychopathology. At this current time, 14 states require or will most likely require a psychopathology course in addition to a diagnosis course.

The Online program surveyed the Fall 2014 cohort and of the thirteen students surveyed only one student believed he could complete the internship requirements within one semester as previously prescribed in the CMHC curriculum. Most students need at least 28 weeks to complete the required 600 hours of supervised practice. The changes strengthened the likelihood for graduates to meet state practicum and internship requirements to earn their professional counselor license.

Students currently enrolled in the CMHC Online program had the option to complete the program with a single internship course or transition into the two-internship courses program of study. Each student received individual advising to determine which program of study was the best fit for the student's future licensure and career goals. All CMHC-Online students opted to change to the two-internship program of study and will have an option to begin fieldwork early in the program to ensure there are not graduation delays.

Rationale:

• The CMHC programs across all the three campuses may investigate changing the admission criteria. The current admission criteria requires two pre-requisites, including a Psychology course with a B or higher and a research course with a B or higher. The psychology course requirement is unnecessary and does not predict success in a counseling program nor does the requirement align with 2016 CACREP Standards regarding admission criteria (Section 1, L.).

Results expected next year:

- Modify CM 521 Lifespan Development, CM528 Helping Relationships (including Residency 1), and CM 550 Diversity and Multiculturalism resulting in higher Demonstration Levels on the CMHC Competency Rubric and the DSCA.
- Modify course sequence allow course to build upon one another, e.g., CM 571 Assessment provides foundational statistical skills needed in CM 578 Research and Program Evaluation.
- Adapt Program Guidebook to serve as CACREP aligned handbook and continue to strengthen CMHC new student orientation and onboarding, including utilizing a scripted advising model.
- Utilize student and faculty input to enhance curriculum development process and implement curriculum lead to align curriculum with 2016 CACREP Standards and deliver courses in timely manner. Ensure alignment between the curriculum map, assessment map, courses, prospectuses, pre-course learning modules, and signature assignments.
- Hire new faculty member to serve as CMHC Accreditation Specialist. Secure necessary state accreditations for an on-ground presence so students can complete fieldwork in home states. Create draft of CACREP self-study utilizing 2016 CACREP Standards.
- Vet The Dispositions and Skills Competency Assessment (DSCA) with other counselor educators in the U.S. and Canada at professional conferences, such as ACA in Montreal in March 2016 and the ACES regional conferences in the Fall of 2016. Submit DSCA development for peer review with a national counseling journal.