MHS 6830: INTERNSHIP IN COUNSELING

This syllabus is a representative sample for this course. Specific information such as texts, assignments, and schedule may vary by semester.

CATALOG DESCRIPTION

Prerequisites: MHS6801 and permission of instructor.

The internship provides students with a supervised opportunity to perform a broad range of counseling activities that regular employees, with similar or equivalent educational backgrounds, conduct in a given clinical setting.

COURSE RATIONALE

Because the stated endpoint of this course is the attainment of competency equivalent to that of an entry level professional counselor, students are expected to demonstrated considerably more personal, professional and clinical proficiency and effectiveness than is required by MHS 6801 (Advancecd Practicum). Accordingly, the internship experience should provide students the opportunity and guidance to not only enhance their clinical skills and knowledge base, but also to critically reflect on their clinical work, particularly the process of case conceptualization, cultural formulations, and professional-personal issues such as level of openness to feedback, new learning, and transference and countertransference.

This course consists of two components: (1) counseling practice under the *direct clinical supervision* of a site supervisor, and (2) *case consultation* and a seminar experience facilitated by the university instructor. The focus of clinical supervision-- which is provided at an assigned site(s)—is on formal, weekly and informal individual supervision sessions which provides both clinical guidance to interns on their specific cases, and which deals with ransference/countertransference and related issues. The focus of the weekly group seminar is on case consultation, i.e., on enhancing students' competencies in assessment, case conceptualization, cultural formulation, and treatment planning and implementation. This is accomplished primarily through formal student case presentations, feedback from seminar participants, individualized feedback from the instructor, and didactic instruction.

TEXT & SUPPLEMENTAL MATERIALS

Required: Sperry, L., Carlson, J. & Kjos, D. (2003). *Becoming an Effective Therapist*. Allyn & Bacon; handouts or other assigned reading from the professional counseling literature.

Suggested: Kottler, J & Carlson, J. (2003). *Bad Therapy: Master Therapists Share Their Worst Failures*. Brunner-Routledge

COURSE GOAL AND OBJECTIVES

COURSE GOAL: By the completion of the internship, a student should function with the equivalent competency of an adequately prepared, entry-level professional counselor.

COURSE OBJECTIVES: In order to achieve the stated course goal, the following course objectives are set forth in terms of general competencies and specific endpoints.

General competencies – the capacity for:

1. familiarity with the assigned clinical setting and provisions for clinical supervision, and adherence to its policies and procedures.

- 2. integration and application of clinical knowledge- including human development and psychopathology--and legal and ethical considerations in actual counseling and consultation practice
- 3. development of an effective, professional counseling relationship with clients and supervisors , other therapists, treatment teams and staff and individuals and agencies within the local community, including outreach.
- 4. utilization of supervision and consultation feedback in assessing, intervening and addressing clients' concerns.
- 5. self-reflection and self-directed change for continued personal development
- 6. continued development of an ethical orientation and the identity of a professional counselor who advocates for both clients and the profession

Specific endpoints– the capacity to independently:

- 1. initiate, maintain, and terminate counseling and psychotherapy services appropriately and effectively.¹
- 2. develop a coherent and tailored treatment plan based on an integrative assessment and case conceptualization, including diagnostic-based on a diagnostic evaluation and DSM-IV criteria—cultural and clinical formulations.
- 3. implement the tailored treatment plan and interventions, and then monitor, evaluate and revise the treatment plan and interventions to achieve realistic counseling outcomes
- 4. recognize and deal with transference and countertransference, termination issues, and other professional and ethical issues, and seek supervision and/or consultation when indicated.
- 5. prepare and make compelling clinical case presentations and write succinct, accurate clinical case reports and other case documentation, i.e., discharge summaries and session notes.

CACREP Competencies: 1b, 1c, 1d, 1e, 1f, 1g, 1h, 2f, 3a, 3b, 3c, 3d, 4e, 5a, 5b, 5c, 5e,5f, 5g, 6a, 6d, 6e,6g, 7a, 7b.

Mental Health: B1, B2, B3, C3, C4, C5, C7, C8, C9

LIABILITY INSURANCE

CACREP guidelines and Department of Counselor Education policy require that internship students secure their own professional liability insurance and must provide written verification of current coverage at the outset of the semester.

COURSE REQUIREMENTS

Clock Hours

\$ Completion of a minimum of 600 hours (a minimum of 300 hours each semester for a split internship) on site throughout the semester involved in counseling and related activities. It is expected that at least half of these

hours (a minimum 240 hours or 120 hours for split internship) will be direct, face-to-face contact in counseling with clients and that at least half of those hours are in individual counseling and some in group counseling. NB: The site supervisor is responsible for verifying hours for licensure.

Site Supervision

\$ Meet at least weekly with the site supervisor(s) for at least one hour of individual supervision. Seek out informal supervision and participate in available case conferences or group supervision at the site. The supervisor may require audio/videotapes and a case transcription or process notes.

Case Presentation in the Seminar

\$ Give a minimum of two formal case presentations in the weekly seminar. The 50-60 minute presentation/discussion will be based on a written case report--made available to all seminar participants—which follow the specified case prototype (Cf. Case of Juan in Sperry, et al, 2003). The presentation should include a video segment(s) illustrating a specific clinical challenge or issue. The presentations should be rehearsed and delivered in a formal, professional manner. In addition, a video tape (if the site prohibits videotaping an audio tape is acceptable) and typed transcription of an entire session with that client is to be submitted at the time of the case presentation.

Documentation

- \$First Seminar Meeting: Present written verification of current liability insurance coverage.
- \$ Third Seminar Meeting: Submit typed copy of your "Personal Plan for the Internship." This document should detail your specific plan for developing or enhancing general competencies and specific endpoints for this internship experience. as well as related professional and personal goals. The plan should include specific goals for individual supervision based on the written contract(s) with your site supervisor(s), as well as factors such as case conceptualization, cultural formulations, dealing with transference and countertransference, etc. Also submit copies of the rating forms based on the Course Objectives—completed by you and your supervisor(s).

 \$ Third Seminar Meeting: Submit, a typed draft of your "Supervision Contract."

 \$ Second Last Seminar Meeting: Submit, at the a 3-4 page reflection paper, summarizing your internship experience based on the journal you have kept of your internship experience.

 \$ Last Seminar Meeting: Submit, your "Activity Log" summarizing all professional counseling activities, i.e., clients seen, groups co-lead, workshops attended, etc., signed by your site supervisor. as well as Client Contact Forms
- \$ Last Seminar Meeting: Submit written evaluations on the site, site supervisor(s), and instructor as directed. \$Ongoing: (1) Keep a journal of your day-to-day internship experiences. (2) Maintain counseling notes, at your field site on every client (process and clinical chart notes) in accordance with policies of the site and ACA standards.

EVALUATION AND GRADING

The criterion for grading is the stated *course goal*: demonstrating a baseline or minimum level of competency equivalent to the professional and personal competency of an entry-level professional counselor. The attainment of that minimum level of competence is needed for a grade of B or above. Both site and seminar performance are considered in grade determination. Indicators of such competence are the stated *course objectives*, and specifically: the quality of formal case presentations and session transcriptions, reports, case conceptualization, cultural formulations, and written documentation; capacity to reflect on professional and personal issues, including transference and counter-transference; personal and professional development and competence; and level of seminar participation.

ATTENDANCE POLICY

Internship students are expected to attend and participate in every seminar session, just as they are expected to be at their assigned internship site during specified hours. Students who must be absent from the seminar because of extraordinary circumstances, such as illness or family emergencies, should notify the instructor to the class missed or as soon as possible thereafter. It is essential that you notify the instructor–directly or leave written phone message with department secretary- if you will be late or absent for the seminar. Such notification reflect both the level of professionalism and basic respect expected of all professional counselors. The stated policy over the years—as per MHS 6830 syllabi—has been that since professional behavior and respect is expected of internship students, unexcused absences may result in a failing grade in the Internship and a possible delay in graduation.

Tentative Seminar Schedule

Date	Topics/Preparation
1/13/04	Levels of Counselor Development; Becoming an Effective Therapist C-1
1/20/04	Case Report & Case Presentation Format
1/27/04	Fostering Engagement C2,3
2/03/04	Diagnostic Assessment C4
2/10/04	Family Assessment-handout
2/17/04	Clinical Formulation C5
2/24/04 3/02/04	Identifying Schemas -handout Monitoring Progress C6
3/09/04	NO CLASS Spring Break
3/16/04	Cognitive Strategies C7
3/23/04	Behavioral Strategies C7
3/30/04	Interpretation Strategies C8
4/06/04	Interventive Interview Strategies C9
4/13/04	Systemic Strategies C10
4/19/04	Psychoeducation Strategies C10
4/27/04	Termination/Wrap-Up C11
S = Sperry, Carlson, Kjos	