

**West Virginia University
College of Applied Human Sciences
School of Counseling & Well-Being**

**Counseling M.S. Program
On-Line
Clinical Rehabilitation & Mental Health Counseling**



Student Handbook 2023

(Revised July 2023)

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Program Description

The master’s program in clinical rehabilitation and mental health counseling provides a comprehensive, planned program of study for entry into the counseling profession. It is fully accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The on-line and on-campus programs have been designated as "Program of Excellence" by the West Virginia Board of Trustees. The on-line program staff consists of four faculty, all of whom have a wealth of practical rehabilitation and mental health counseling experience and advanced counseling degrees and certifications. The on-line counseling program at West Virginia University has professionally trained and graduated counselors for over 50 years.

WVU’s counseling program offers three specializations: clinical rehabilitation and mental health counseling (on-line), school counseling (on-campus), and clinical mental health (on-campus), ***Students in the on-line program may not enroll in courses in the on-campus program.*** ***Students in the on-campus program may not enroll in courses in the on-line program.***

Comprehensive Mission Statement

The master's program in counseling at West Virginia University advances the land grant mission of the University in a rural state by providing a strong practitioner training program focused on the unique needs of the Appalachian region and other diverse communities. We are committed to preparing entry-level clinical mental health, school, and rehabilitation counselors to work competently and ethically within a pluralistic society. Our central organizing approach to counseling rests in understanding the cultural and human development needs of individuals, couples, families, families, groups, and those experiencing disability or social inequality across the lifespan.

Program Objectives

To ensure a high-quality program, the counseling faculty has developed twelve program objectives. The objectives are applicable to both the school and clinical programs, as well as the rehabilitation program unless otherwise noted:

1. Professional Orientation and Identity – Students will demonstrate an understanding of counseling as a profession, develop a professional identity, and demonstrate their ability to function effectively within the ethical guidelines established by both the American Counseling Association and the American School Counselors Association, in settings rendering counseling and related services to diverse populations
2. Counseling Theory – Students will learn a range of counseling theories that are applicable when working in a pluralistic society with individuals, groups, couples, families, children, and those experiencing disability in the counseling process, and demonstrate the ability to apply this knowledge in a therapeutic manner within rural and diverse communities.
3. Helping Relationships – Students will develop skills to work with individuals, groups, couples, families, children, and those experiencing disability that promote therapeutic change and demonstrate their ability to evaluate progress in meeting counseling objectives.
4. Social and Cultural Diversity – Students will develop an awareness of the impact of social and cultural factors on human behavior and recognize the role of individual differences in establishing and working toward counseling objectives.
5. Human Growth and Development – Students will learn stages of development throughout the life span and the importance of assessing and considering developmental goals when working with both children and adults.
6. Career Development – Students will learn the role of career development theory as applied to working with both children and adults and the impact of economic and cultural factors on career decisions, job performance, and lifestyle.
7. Group Dynamics – Students will learn the purpose and function of groups, group dynamics, and the application of counseling theories and leadership skills within the group

setting to promote decision making and growth.

8. Assessment – Students will learn to determine appropriate assessment techniques when working with individuals, groups, couples, families, children, and those experiencing disability and to utilize relevant information within the counseling process.
9. Research and Program Evaluation – Students will develop the ability to read and evaluate professional research literature and incorporate such information into their professional development.
10. Specialization – Students will develop specific knowledge relevant to the student’s area of interest (e.g., addictions, mental health, children, school, rehabilitation) and will learn from their area of interest how to provide professional services including assessment, prevention, referral, and program development, implementation, management, and evaluation.
11. Experiential Learning – Students will demonstrate the knowledge and skills necessary to be an effective professional counselor through supervised practicum and internship experiences.
12. Personal Growth and Understanding – Students will be provided the opportunity to explore values and beliefs as they pertain to their evolving roles as professional counselors and develop a level of self-understanding that leads to an integrated personal approach to counseling and client advocacy.

Counseling as a Career

Nature of the Work

Counselors assist people with personal, family, educational, mental health, and career decisions and problems. Their duties depend on the individuals they serve and on the settings in which they work.

School counselors support students in their academic, career, and social-emotional development. Additionally, they use interviews, counseling sessions, assessments, and additional resources to help students understand their abilities, interests, talents, and personality characteristics. They help translate these into realistic academic and career options. They may run career information centers and career education programs. High school counselors often advise on college admission requirements, entrance exams, and financial aid, and vocational fields (e.g., technical school, apprenticeship programs). They help students develop job-finding skills for part-time and summer employment and prepare students for the world of work. They also help students understand and deal with their social, behavioral, and personal problems. They work with students individually, in small groups, and in large-group settings. In classrooms, school counselors help students develop interpersonal, decision-making, problem-solving, and related skills. Counselors provide consultation, and collaborate with school community members (e.g., principals, parents, teachers, school psychologists, school nurses, social workers). Professional school counselors design, manage, deliver, and assess comprehensive school counseling programs that serve all students in culturally sustaining ways.

Clinical mental health/rehabilitation counselors work with individuals, families, and groups to address and treat mental and emotional disorders, and to promote optimum mental health. They are trained in a variety of therapeutic techniques used to address a wide range of issues, including depression, addiction and substance abuse, suicidal impulses, stress management, problems with self-esteem, issues associated with aging, job and career concerns, educational decisions, issues related to mental and emotional health, and family, parenting, and marital or other relationship problems. Mental health counselors often work closely with other mental health specialists, such as psychiatrists, psychologists, clinical social workers, psychiatric nurses, and school counselors.

Employment

Substance abuse, behavioral, and mental health counselors held about 327,500 jobs in 2020. By 2030, that number is expected to be around 402,600, a 23% increase. Approximate employment numbers in 2020 were distributed among the counseling specialties as follows:

Substance abuse and behavioral disorder, and mental health counselors (total)	327,500
School counselors	118,000
Rehabilitation counselors	104,500
Marriage and family therapists	60,850

For the regional area that West Virginia University services, the single industry most employing these occupations is Outpatient Care Centers. This industry employs 22,189 workers in the counseling occupations—employment which is expected to increase by 2,482 jobs over the next ten years.

Educational, vocational, and school counselors work primarily in elementary and secondary schools and postsecondary (e.g., college) settings. Other types of counselors work in a wide variety of public and private establishments, including healthcare facilities, workforce readiness agencies, vocational rehabilitation centers, social agencies; correctional institutions, and residential care facilities (e.g., recovery houses for individuals transitioning from correctional facilities, sober living homes, group homes for children, the elderly, and persons experiencing a disability). Some substance abuse and behavioral counselors work in residential therapeutic communities. Counselors also work in organizations engaged in community improvement and social change and in state and local government agencies. A growing number of counselors are self-employed and work in group or private practices. This growth has been helped by laws allowing counselors to receive payments from insurance companies and the growing recognition that counselors are well-trained professionals.

Job Outlook

Overall employment of counselors is expected to grow faster than the average for all occupations. Projected job growth varies by specialty, but job opportunities should be favorable because job openings are expected to exceed the number of graduates from counseling programs, especially in rural areas. The field is expected to grow at 3 times the rate of other forms of employment over the next few years. In the region serviced by West Virginia University, 21,346 additional new workers in counseling occupations will be needed for this industry due to

separation demand, that is, to replace workers in this occupation and industry that retire or move into a different occupation. Employment growth for rehabilitation counselors is projected to be at 11% between 2021 and 2031 with about 9,900 openings projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force, such as to retire.

Employment Change

Employment in the aggregate is projected to rise by 11%; the field of Substance Abuse/Mental Health Counseling by **29%**, much faster than the average for all occupations. Employment growth is expected as people continue to seek addiction and mental health counseling and as schools recognize the need to support students social and emotional development post Covid-19 pandemic. The United States Bureau of Labor Statistics reports that the number of Mental Health Counseling jobs in 2021 was 351,000. The Bureau predicts that the number of counselors in 2021-2031 will be grow by 22%, much faster than average. That's an additional 77,500 jobs.

Earnings

The median annual wage for substance abuse, behavioral disorder, and mental health counselors was \$48,520 in May 2021. The median pay for school counselors in 2021 was \$60,510 per year. Many school counselors decide to pursue credentialing as a licensed professional counselor (LPC), providing opportunities to provide counseling in school and clinical settings. Annual mean wages in the industries employing the largest numbers of educational, vocational, and school counselors were as follows:

Elementary and secondary schools	\$57,630
Individual and Family Services	\$43,630
Local Government	\$53,630
Healthcare and social assistance	\$46,510

Our History and Future

The program of study in which you are participating has a long history reflecting ongoing changes to meet the needs of emerging societal issues as well as evolutionary professional standards. In 2014, WVU approved the establishment of the Clinical Rehabilitation and Mental Health Counseling program. This program will build upon the rehabilitation counselor education program that has been in existence for decades. The following will give you background on how we have evolved to this point. Be proud to be a part of a long-standing program of excellence.

The Beginning

In August of 1955, the seventh grant for establishing a graduate rehabilitation counselor education program under PL 565 was awarded to WVU. This was in response to The Vocational Rehabilitation Amendments (federal legislation) that established funding sources for college and

university training of rehabilitation professionals. William McCauley was then a senior counselor in Morgantown and chaired the organizing committee to start the program. He was hired to coordinate the program and 6 traineeships were provided that first semester in a class of ten.

Mr. McCauley went on to federal employment with the then Health, Education and Welfare Commissioner Mary Switzer and subsequently became Executive Director of the National Rehabilitation Counseling Association. He started a legacy of leadership that has been the hallmark of education at WVU. He also set the tone of public vocational rehabilitation agency-university partnership that exists today.

Our program was housed as an experimental program in an interdepartmental structure in the Graduate School. This meant it was an independent entity with courses contributed by the College of Arts and Sciences, College of Education, School of Social Work and Department of Psychology.

In 1974, we became one of the first programs accredited by the Council on Rehabilitation Education (CORE). Our last accreditation review was completed in 2010 for a term of 8 years.

Building on Our Legacy

Much has changed since those early days of the WVU Interdepartmental Training Program in Rehabilitation Counseling, yet the heart of the training effort remains strong. Our program is now a MS in Clinical Rehabilitation and Mental Health Counseling and is located in the College of Applied Human Sciences. Our identity has remained distinct and continues to benefit from a wealth of resources in our parent department, Counseling, Rehabilitation Counseling and Counseling Psychology. We share departmental resources with two programs; a master's degree program in counseling (specializing in clinical mental health and school) accredited by the Council on Accreditation of Counseling and Related Programs; and a doctoral program in Counseling Psychology accredited by the American Psychological Association.

In addition, we enjoy the company of other strong research and training resources. Historically these have included the WV Rehabilitation Research and Training Center and the Job Accommodation Network. WVU is also home to a Center for Excellence in Disabilities.

In 2015, our program received the only **Program of Excellence designation** awarded to a master's degree program during a review that is conducted by the WVU Board of Governors. Needless to say, we are proud and humbled – and know that this says as much about the quality of our students and graduates as it does faculty or coursework.

Professional degree and certificate programs at West Virginia University are reviewed on a five-year assessment cycle established by the WVU Board of Governors. Each year, approximately one-fifth of all academic programs at WVU are reviewed. The basis of a program review is a self-study performed by an individual unit as part of their ongoing program assessment activities. The "Program of Excellence" designation is based on various attributes, including national

Our Current Program of Study

The CRMHC program was accredited as a dual specialty program in clinical rehabilitation counseling and clinical mental health counseling by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) in July 2017. One of only 23 such programs in the country, the WVU program was awarded full accreditation until 2024.

This means students can report having graduated from a CACREP program with a specialization in Clinical Rehabilitation Counseling and one in Clinical Mental Health Counseling. These distinctions are important in application for certifications, licensure, and for some employment sites.

This is one in a long line of firsts for the program. In August of 1955, one of seven federal grants available for establishing a graduate rehabilitation counselor education program under PL 565 was awarded to WVU. This was in response to the Vocational Rehabilitation Amendments (federal legislation) that established funding sources for college and university training of rehabilitation professionals. The rehabilitation counselor education program started in 1955 with the first students enrolled in January 1956 and the first graduating class in 1957.

In 1974, it was one of first programs accredited by the Council on Rehabilitation Education (CORE). Students admitted Fall 1975 were the first who could report having graduated under the status of CORE accreditation.

PLEASE NOTE: The dual specialization designation will end in 2023. At that time, we will transition to a clinical mental health counseling program with an area of emphasis in rehabilitation counseling. If you graduate after the decision is made, you may not be dually specialized.

Defining the Counseling Specializations

Clinical Rehabilitation Counseling

According to the Commission on Rehabilitation Counselor Accreditation' scope of practice statement "Rehabilitation counseling is a systematic process which assists persons with physical, mental, developmental, cognitive, and emotional disabilities to achieve their personal, career, and independent living goals in the most integrated setting possible through the application of the counseling process. The counseling process involves communication, goal setting, and beneficial growth or change through self-advocacy, psychological, vocational, social, and behavioral interventions. The specific techniques and modalities utilized within this rehabilitation counseling process may include, but are not limited to:

- assessment and appraisal
- diagnosis and treatment planning
- career (vocational) counseling
- individual and group counseling treatment interventions focused on facilitating adjustments to the medical and psychosocial impact of disability
- case management, referral, and service coordination
- program evaluation and research

- interventions to remove environmental, employment, and attitudinal barriers
- consultation services among multiple parties and regulatory systems
- job analysis, job development, and placement services, including assistance with employment and job accommodations
- the provision of consultation about and access to rehabilitation technology

Historically, rehabilitation counselors primarily served working-age adults with disabilities. Today, the need for rehabilitation counseling services extends to persons of all age groups who have disabilities. Rehabilitation counselors also may provide general and specialized counseling to people with disabilities in public human service programs and private practice settings.

The demand for rehabilitation counselors nationally exceeds the supply by at least 25% and the number of people needing rehabilitation services will rise as advances in medical technology saves more lives and human services needs more complex. We are also working in a wide variety of locations, from vocational rehabilitation agencies to mental health centers, employee assistance programs, substance abuse treatment centers and so forth. Rehabilitation services are provided to the older person, the child with a learning disability, the factory worker with a cocaine addiction, the inmate in prison, the person with a psychiatric problem, the executive who abuses alcohol, the nurse with back pain, the individual with an amputation, and the person with a head injury (examples only).

Our graduates work for state vocational rehabilitation agencies from Alaska to Florida. Because all state rehabilitation agencies follow the same general procedures for providing services, a rehabilitation counselor has greater geographical mobility and is able to move throughout the United States and its territories with less difficulty finding employment. You will also find rehabilitation counseling graduates working in the Veterans' Administration and Social Security Administration.

The Veterans Affairs Department has reported a need for more sophisticated workforce planning tools to ensure its Vocational Rehabilitation and Employment Program has staff with the skills to address the increasingly complicated needs of veterans returning from Iraq and Afghanistan. A report from the General Accounting Office indicated that "Many [wounded service members] are surviving with multiple serious injuries and illnesses, including amputations, traumatic brain injury, and post-traumatic stress disorder," ... While some service members will be able to remain on active duty, others will need comprehensive services as they transition into civilian life and work." Fifty-four percent of the 57 VR&E offices nationwide told GAO that they didn't have enough counselors to meet demand, and 40 percent said they needed more employment coordinators. Thirty percent of the offices reported counselors' skills only moderately met the needs of the veterans they served, while 30 percent said the same skills gap existed with respect to their employment coordinators.

Clinical Mental Health Counseling

According to the Commission on Accreditation of Counseling and Related Education Program (CACREP) Clinical Mental Health Counseling programs prepare graduates to work with clients across a spectrum of mental and emotional disorders, as well as to promote mental health and wellness. Clients may be seen individually, in couples, families, or group settings. Clinical Mental Health Counselors are knowledgeable in the principles and practices of diagnosis, treatment, referral, and prevention and often work in interdisciplinary teams with other health professionals (e.g., psychiatrists, social workers, MDs). Employment opportunities may include private practice, community-based mental health centers, hospitals, and other treatment centers.

Clinical mental health counseling is a distinct profession with national standards for education, training, and clinical practice. Clinical mental health counselors are highly skilled professionals who provide flexible, consumer-oriented therapy. They combine traditional psychotherapy with a practical, problem-solving approach that creates a dynamic and efficient path for change and problem resolution.

Clinical mental health counselors offer a full range of services, including:

- Assessment and diagnosis
- Psychotherapy
- Treatment planning and utilization review
- Brief and solution-focused therapy
- Alcoholism and substance abuse treatment
- Psychoeducational and prevention programs
- Crisis Management

In today's managed care environment, clinical mental health counselors are uniquely qualified to meet the challenges of providing high quality care in a cost-effective manner. CMHCs have a foundational skillset that is distinct from those of other behavioral health disciplines. Their training in addressing the needs of the whole person and in wellness and prevention makes them well situated to lead the effort in integrating health care.

New federal regulations allow qualifying mental health counselors to serve as mental health practitioners, providing services without referral, under the TRICARE program. This is big news, as TRICARE serves between 9 and 10 million service members, retirees, and family members.

Job duties are also expanding in other sectors. Employment of mental health counselors is projected to grow 29 percent from 2012 to 2022, 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. <http://www.bls.gov/ooh/community-and-social-service/mental-health-counselors-and-marriage-and-family-therapists.htm>

Counselors typically earn less than psychiatrists or psychologists do, but that's one thing that makes them attractive to insurance companies. The average mental health counseling salary was \$42,590 in 2010. 80% made between \$24,840 and \$65,660.

Faculty and Staff

Dr. Christine Schimmel coordinates all counseling specializations at WVU. Additionally, there are four full time faculty teaching in our program and one dedicated staff person. The ratio of faculty to students is approximately 1:12 and every student is assigned a faculty advisor.

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Expectations of the Program of Study

Evaluation Structure

There are specific knowledge, skills and perception standards expected of those pursuing and engaged in counseling. In order to ensure that we are providing you with the support and training you need to succeed and to graduate counselors who will operate at the highest levels of competencies, we have created a structure for evaluation of your progress.

Traditionally, the primary assessment in education has been grades and your grade point average. We do have a standard of grading but we are going beyond them to follow the standards being promoted in the counseling education arena. The following is a summary of what you will be reviewing in this section.

- **Grade Point Average.** You must have a 3.0 GPA to graduate from the program. Each course is designed to meet specific knowledge and skill areas. If you are not achieving proficiency in any assignment, you will be expected to remediate that assignment. Your grade will not change but you must show competency in all standards and that minimum is a grade of B or achievement of 80% correct. Any course in which you have received a grade of C will require remediation (see page 35). A grade of D or F requires review by the full faculty to determine the most appropriate course of action, which may mean termination from the program.
- **Learning Outcome Portfolio.** You will maintain a professional portfolio for review by faculty and members of our advisory group. There are ten items or artifacts that correspond with specific skill areas that are defined by CACREP in for the specializations of Clinical Rehabilitation Counseling and Clinical Mental Health Counseling. You must achieve proficient in all of these artifacts to graduate.
- **Clinical Reviews.** Your clinical experiences are evaluated by your site supervisors and instructors. These are done at the midpoint and final week of the semester. The evaluations focus on your ability to undertake the role and function of a rehabilitation counselor, specifically the skill areas that are outlined in the skill areas of the standards for the specializations of Clinical Rehabilitation Counseling and Clinical Mental Health Counseling. They build upon the acquisition of knowledge in these areas. Again, you should receive proficient evaluations at a minimum to graduate.
- **Professional Disposition and Behaviors Reviews.** Each semester, program faculty members, as well as adjuncts and other department faculty teaching counseling courses, evaluate all CRMHC students in their courses using *The Counseling Competencies Scale—Revised*© (CCS-R) is an empirically tested assessment instrument designed to measure counselor competencies in the domains of (a) counseling skills and therapeutic relationships and (b) professional dispositions and behaviors, which aligns with CACREP Standards. Students must achieve proficiency in each area prior to graduation.

This is a progressive process. You will be undertaking coursework that contains processes for gaining knowledge and skills as well as challenging perceptions that have been determined to be

essential for a practicing counselor, and one who works in rehabilitation and/or mental health counseling. During each semester you are being evaluated on your grades, professional disposition and the artifacts you have submitted for the key performance indicators associated with the core standards for counseling as well as those for the specializations of clinical rehabilitation counseling and clinical mental health counseling. As you enter preparation for the first clinical experience, practicum, the members of the faculty will assess each of these areas to determine that you are meeting the standards at the proficient or proficient/emerging (80%) level. You will also participate in the CPCE on the eight core standards common to all counselors. If you need additional attention in specific areas, those will be developed with your practicum instructor and advisor.

Once you have completed the practicum, your progress in each of the above areas will be reviewed once again as well as the clinical assessments. If those are at the proficient level, you will move into the internship experience, your culminating clinical experience. Prior to graduation, the faculty members will review all the evaluation components as part of the approval for graduation.

Please keep in mind that the members of your faculty are committed to your success and recognize some people may need extra time to achieve the standards of the counseling field. If progress continues to be insufficient, we will meet with you to discuss a plan of action.

Knowledge Areas and Outcomes

We operate as an educational program accredited by the Council on Accreditation of Counseling and Related Education Programs (CACREP). As such, we address the specific knowledge and outcome expectations. We are now attending to the both the criteria for Clinical Rehabilitation Counseling criteria and the Clinical Mental Health Counseling programming set forth by CACREP.

There are **eight common core areas** that represent the foundational knowledge required of *all* entry-level counselor education graduates.

1. PROFESSIONAL COUNSELING ORIENTATION AND ETHICAL PRACTICE

- a. history and philosophy of the counseling profession and its specialty areas
- b. the multiple professional roles and functions of counselors across specialty areas, and their relationships with human service and integrated behavioral health care systems, including interagency and interorganizational collaboration and consultation
- c. counselors' roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams
- d. the role and process of the professional counselor advocating on behalf of the profession
- e. advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients
- f. professional counseling organizations, including membership benefits, activities, services to members, and current issues
- g. professional counseling credentialing, including certification, licensure, and accreditation practices and standards, and the effects of public policy on these issues
- h. current labor market information relevant to opportunities for practice within the

counseling profession

- i. ethical standards of professional counseling organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling
- j. technology's impact on the counseling profession
- k. strategies for personal and professional self-evaluation and implications for practice
- l. self-care strategies appropriate to the counselor role
- m. the role of counseling supervision in the profession

2. SOCIAL AND CULTURAL DIVERSITY

- a. multicultural and pluralistic characteristics within and among diverse groups nationally and internationally
- b. theories and models of multicultural counseling, cultural identity development, and social justice and advocacy
- c. multicultural counseling competencies
- d. the impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of others
- e. the effects of power and privilege for counselors and clients
- f. help-seeking behaviors of diverse clients
- g. the impact of spiritual beliefs on clients' and counselors' worldviews
- h. strategies for identifying and eliminating barriers, prejudices, and processes of intentional and unintentional oppression and discrimination

3. HUMAN GROWTH AND DEVELOPMENT

- a. theories of individual and family development across the lifespan
- b. theories of learning
- c. theories of normal and abnormal personality development
- d. theories and etiology of addictions and addictive behaviors
- e. biological, neurological, and physiological factors that affect human development, functioning, and behavior
- f. systemic and environmental factors that affect human development, functioning, and behavior
- g. effects of crisis, disasters, and trauma on diverse individuals across the lifespan
- h. a general framework for understanding differing abilities and strategies for differentiated interventions
- i. ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the lifespan

4. CAREER DEVELOPMENT

- a. theories and models of career development, counseling, and decision making
- b. approaches for conceptualizing the interrelationships among and between work, mental well-being, relationships, and other life roles and factors
- c. processes for identifying and using career, avocational, educational, occupational and labor market information resources, technology, and information systems
- d. approaches for assessing the conditions of the work environment on clients' life

experiences

- e. strategies for assessing abilities, interests, values, personality and other factors that contribute to career development
- f. strategies for career development program planning, organization, implementation, administration, and evaluation
- g. strategies for advocating for diverse clients' career and educational development and employment opportunities in a global economy
- h. strategies for facilitating client skill development for career, educational, and life-work planning and management
- i. methods of identifying and using assessment tools and techniques relevant to career planning and decision making
- j. ethical and culturally relevant strategies for addressing career development

5. COUNSELING AND HELPING RELATIONSHIPS

- a. theories and models of counseling
- b. a systems approach to conceptualizing clients
- c. theories, models, and strategies for understanding and practicing consultation
- d. ethical and culturally relevant strategies for establishing and maintaining in-person and technology-assisted relationships
- e. the impact of technology on the counseling process
- f. counselor characteristics and behaviors that influence the counseling process
- g. essential interviewing, counseling, and case conceptualization skills
- h. developmentally relevant counseling treatment or intervention plans
- i. development of measurable outcomes for clients
- j. evidence-based counseling strategies and techniques for prevention and intervention
- k. strategies to promote client understanding of and access to a variety of community-based resources
- l. suicide prevention models and strategies
- m. crisis intervention, trauma-informed, and community-based strategies, such as Psychological First Aid
- n. processes for aiding students in developing a personal model of counseling

6. GROUP COUNSELING AND GROUP WORK

- a. theoretical foundations of group counseling and group work
- b. dynamics associated with group process and development
- c. therapeutic factors and how they contribute to group effectiveness
- d. characteristics and functions of effective group leaders
- e. approaches to group formation, including recruiting, screening, and selecting members
- f. types of groups and other considerations that affect conducting groups in varied settings
- g. ethical and culturally relevant strategies for designing and facilitating groups
- h. direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term

7. ASSESSMENT AND TESTING

- a. historical perspectives concerning the nature and meaning of assessment and testing in counseling
- b. methods of effectively preparing for and conducting initial assessment meetings
- c. procedures for assessing risk of aggression or danger to others, self-inflicted harm, or suicide
- d. procedures for identifying trauma and abuse and for reporting abuse
- e. use of assessments for diagnostic and intervention planning purposes
- f. basic concepts of standardized and non-standardized testing, norm-referenced and criterion-referenced assessments, and group and individual assessments
- g. statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations
- h. reliability and validity in the use of assessments
- i. use of assessments relevant to academic/educational, career, personal, and social development
- j. use of environmental assessments and systematic behavioral observations
- k. use of symptom checklists, and personality and psychological testing
- l. use of assessment results to diagnose developmental, behavioral, and mental disorders
- m. ethical and culturally relevant strategies for selecting, administering, and interpreting assessment and test results

8. RESEARCH AND PROGRAM EVALUATION

- a. the importance of research in advancing the counseling profession, including how to critique research to inform counseling practice
- b. identification of evidence-based counseling practices
- c. needs assessments
- d. development of outcome measures for counseling programs
- e. evaluation of counseling interventions and programs
- f. qualitative, quantitative, and mixed research methods
- g. designs used in research and program evaluation
- h. statistical methods used in conducting research and program evaluation
- i. analysis and use of data in counseling
- j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation

Clinical Rehabilitation Counseling

Students who are preparing to work as rehabilitation counselors will demonstrate the professional knowledge, skills, and practices necessary to address a wide variety of circumstances within the rehabilitation counseling context. Disability, as used below, includes physical, psychiatric, addiction, sensory, and developmental impairments. In addition to the common core curricular experiences outlined in Section II.F, programs must provide evidence that student learning has occurred in the following domains:

1. FOUNDATIONS

- a. history and development of rehabilitation counseling
- b. theories and models related to rehabilitation counseling

- c. social science theory that addresses psychosocial aspects of disability
- d. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning
- e. neurobiological and medical foundation and etiology of addiction and co-occurring disorders
- f. etiology and effects of disabilities and terminology relevant to clinical rehabilitation counseling
- g. screening and assessment instruments that are reliable and valid for individuals with disabilities

2. CONTEXTUAL DIMENSIONS

- a. roles and settings of rehabilitation counselors
- b. relationships between clinical rehabilitation counselors and medical and allied health professionals, including interdisciplinary treatment teams
- c. rehabilitation service delivery systems, including housing, independent living, case management, public benefits programs, educational programs, and public/proprietary vocational rehabilitation programs
- d. rehabilitation counseling services within the continuum of care, such as inpatient, outpatient, partial hospitalization and aftercare, and the rehabilitation counseling services networks
- e. operation of an emergency management system within rehabilitation agencies and in the community in relation to accommodating individuals with disabilities
- f. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD)
- g. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders
- h. impact of crisis and trauma on individuals with disabilities
- i. impact of biological and neurological mechanisms on disability
- j. effects of co-occurring disabilities on the client and family
- k. effects of discrimination, such as handicapism, ableism, and power, privilege, and oppression on clients' life and career development
- l. classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation
- m. effects of the onset, progression, and expected duration of disability on clients' holistic functioning (i.e., physical, spiritual, sexual, vocational, social, relational, and recreational)
- n. transferable skills, functional assessments, and work-related supports for achieving and maintaining meaningful employment for people with disabilities
- o. role of family, social networks, and community in the provision of services for and treatment of people with disabilities
- p. environmental, attitudinal, and individual barriers for people with disabilities
- q. assistive technology to reduce or eliminate barriers and functional limitations
- r. legislation and government policy relevant to rehabilitation counseling
- s. cultural factors relevant to rehabilitation counseling
- t. professional issues that affect rehabilitation counselors, including independent provider status, expert witness status, forensic rehabilitation, and access to and practice privileges

within managed care systems

u. record keeping, third party reimbursement, and other practice and management issues in rehabilitation counseling

v. professional organizations, preparation standards, and credentials relevant to the practice of clinical rehabilitation counseling

w. legal and ethical considerations specific to clinical rehabilitation counseling

3. PRACTICE

a. diagnostic interviews, mental status examinations, symptom inventories, psychoeducational and personality assessments, biopsychosocial histories, assessments for treatment planning, and assessments for assistive technology needs

b. career- and work-related assessments, including job analysis, work site modification, transferrable skills analysis, job readiness, and work hardening

c. strategies to advocate for persons with disabilities

d. strategies for interfacing with medical and allied health professionals, including interdisciplinary treatment teams

e. strategies to consult with and educate employers, educators, and families regarding accessibility, Americans with Disabilities Act compliance, and accommodations

Clinical Mental Health Counseling

Students who are preparing to specialize as clinical mental health counselors will demonstrate the knowledge and skills necessary to address a wide variety of circumstances within the context of clinical mental health counseling.

1. FOUNDATIONS

a. history and development of clinical mental health counseling

b. theories and models related to clinical mental health counseling

c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning

d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders

e. psychological tests and assessments specific to clinical mental health counseling

2. CONTEXTUAL DIMENSIONS

a. roles and settings of clinical mental health counselors

b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders

c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks

d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD)

e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders

- f. impact of crisis and trauma on individuals with mental health diagnoses
- g. impact of biological and neurological mechanisms on mental health
- h. classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation
- i. legislation and government policy relevant to clinical mental health counseling
- j. cultural factors relevant to clinical mental health counseling
- k. professional organizations, preparation standards, and credentials relevant to the practice of clinical mental health counseling
- l. legal and ethical considerations specific to clinical mental health counseling
- m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling

3. PRACTICE

- a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management
- b. techniques and interventions for prevention and treatment of a broad range of mental health issues
- c. strategies for interfacing with the legal system regarding court-referred clients
- d. strategies for interfacing with integrated behavioral health care professionals
- e. strategies to advocate for persons with mental health issues

Course of Study

Graduates of this program at WVU who started their course of study on or after Fall 2015 will be awarded a Master of Science degree in Clinical Rehabilitation & Mental Health Counseling after successful completion of the required 63 credit hours of coursework. The courses required in the program meet the requirements set forth by CACREP for Clinical Rehabilitation Counseling and follow the CACREP standards for Clinical Mental Health Counseling. Students can undertake to complete their coursework either full- or part-time. Through the e-campus program, they can also take some courses on campus.

E-Campus Program

Our program provides our students with all the benefits of a traditional classroom – based learning online. You receive faculty-delivered instruction via the Internet. We know online learning is most effective when delivered by teachers experienced in their subject matter. So we strive to make sure our full-time faculty members teach the vast majority of your classes. In the last few years, only one or two courses a year have been taught by adjunct faculty but rest assured, they are qualified to do the job.

The courses are delivered in an asynchronous format, which means we use the time-delayed capabilities of the Internet. Asynchronous courses are still instructor-facilitated but are not conducted in real time, which means that students and teacher can engage in course-related activities at their convenience rather than during specifically coordinated class sessions. In asynchronous courses, learning does not need to be scheduled in the same way as synchronous learning, allowing students and instructors the benefits of anytime, anywhere learning.

Each course is delivered in weekly modules (think classroom lecture). Each module contains text-based lectures, videos, and audio recordings. You communicate via e-mail, threaded discussions, news groups and file attachments. All assignments are submitted within the online system.

WVU uses a web-based course management system called WVU eCampus. You can access this through your MIX system or ecampus.wvu.edu

Mountaineer Information Xpress, or MIX, is a web platform for WVU students and faculty. It provides e-mail addresses for all students, serves as a centralized location to register online for classes, check grades, find out about current campus events, chat online with classmates, and receive targeted messages. It is accessible from anywhere a user happens to be, at any time of the day or night. Students can access MIX through the web at <http://www.mix.wvu.edu>. For additional information on MIX, visit <http://www.mix.wvu.edu> and review frequently asked questions.

Advising and Registration

The advisor is the student's primary source of registration information, general program information, specific information about the rehabilitation profession, and selection of any desired elective courses. The advisor should be used regularly as a resource, and in the event that a student's interests develop along the lines of a faculty member other than his/her advisor, the student may request an advisor change. The student should contact the program coordinator concerning an advisor change, as appropriate forms must be completed and both the old and new advisors must approve the change.

Registration is usually processed two months before the start of the next semester, resulting in all registration activities, following the initial processing with the advisor. Registration for the first semester of the program is usually completed in June/July by group mail and with initial advisement sessions on campus, during the first few days of classes to clarify concerns, meet advisors, etc. Students normally are notified of acceptance from March to early. They are asked to notify the program coordinator within 15-30 days regarding their intent to accept their admittance to the program.

Transfer of Coursework

A student may wish to transfer a graduate level course from another institution into the program. Credit earned at other institutions of higher education can **ONLY** be credited toward graduate degrees at WVU if the institution is accredited at the graduate level. **The coursework cannot be older than eight (8) years when a person graduates from our program** (example, if you are graduating in 2024, a course taken in September of 2014 in another program will not be credited for graduation).

The maximum transfer credit permitted is 12 semester hours in a degree program requiring 42 or more semester hours. The student must fill out the *Transient Application for Graduate Studies* form. To evaluate the course transfer, the student must provide a course syllabus, course description and official transcript showing the awarded grade. The student's advisor and

program coordinator will evaluate the course for an equivalent WVU course. Both the advisor and the school director must sign the form for official approval.

Note: In accordance with CACREP guidance statements regarding transfer of credits, To safeguard against potential threats to ethical practice and clinical competencies, transfer students complete all clinical courses, where counseling skills, client interaction, and clinical competencies are supervised and evaluated, within the CACREP-accredited program from which they plan to graduate. At WVU, this is the list of courses that are required: COUN 501 Counseling Theories and Techniques I, COUN 606 Counseling Theories and Techniques II, COUN 609 Group Counseling Theories and Techniques, REHB 672 Practicum, and REHB 675 Internship.

It should also be noted that while enrolled in the degree program at WVU **students should not take a course at another institution unless approved by their advisor and program coordinator in advance.** This approval must be in writing. Students will need to submit a course description and syllabus for approval consideration. This policy ensures students do not take a course that will not count for an equivalent WVU course in this program.

Tracking Learning Outcomes

Your assessment as a student will include addressing key learning outcomes across time during your course of study. This is a collection of experience-based materials and reflective information associated with the various dimensions of your clinical preparatory work, philosophy, abilities and perceptions. It is more than a collection of your course syllabi and your resume but will include those. You will address your clinical preparation as it relates to both rehabilitation counseling and mental health counseling. The portfolio will be created online through Tevera, the system allows you to maintain it post-graduation.

The development of this body of information begins as the graduate student enters the program and continues throughout their program of study. A session will be held between graduate students and their advisors during their first semester of coursework to review the portfolio process. The advisor is responsible for tracking the developmental process and providing feedback. The full faculty will annually review your progress using this assessment tool, among others.

Learning Outcomes

Course grades are global assessments of student learning and may not provide sufficient data regarding student learning across the myriad of learning outcome standards that are considered essential for preparation of students to enter the counseling profession. Our accrediting body, the Council for Accreditation of Counseling and Related Education Programs (CACREP) requires that faculty members evaluate student progress across time in the eight core standards for all counseling professions, as well as in the specialization areas of clinical rehabilitation counseling and clinical mental health counseling.

The following is an explanation of those standards, as well as the process we are using to capture information of student learning outcomes on key performance indicators.

Methodology. We are using a sampling approach to evaluate progress of key performance indicators of student learning outcomes in each of the eight core areas and in the respective specialty areas associated with this degree program, clinical rehabilitation counseling and clinical mental health counseling. The key performance indicators will measure a sampling of individual and collective student learning conducted via multiple measures and over multiple points in time. The key performance indicators were chosen by members of the CRMHC faculty and reflect areas of performance in each category that reflect the intent of the WVU program to include demonstration of:

1. The ability to conceptualize, articulate and exhibit a personal approach to ethics in counseling that is in keeping with the expectations of the standards set forth in the most current versions of Professional Ethical Standards of the American Counseling Association and the Commission of Rehabilitation Counselor Certification.
2. Self-awareness in the advocacy of programing that promotes optimal wellness and growth of the human spirit, mind or body
3. An understanding of and ability to communicate theories of individual development and transitions across the lifespan.
4. The appropriate use of knowledge and skills in implementing career development and decision-making models.
5. The appropriate use of knowledge and skills in theories and techniques of counseling.
6. An ability to facilitate a group counseling session that shows evidence of a knowledge of theories and methods of group counseling, matching promising or evidenced based interventions with specific populations, and measuring effectiveness.
7. An understanding of the concepts of assessment techniques through an analysis of the appropriate use of an instrument.
8. An ability to design an ethically and culturally relevant program evaluation and reporting strategy.
9. The ability to research, analyze and develop a case study that shows proficiency in applying the principles and practices of rehabilitation counseling; demonstrating appropriate use of assistive technology and job accommodation principles; and demonstrating appropriate use of diagnostic materials.
10. The ability to research, analyze and develop a case study that shows proficiency in applying principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans.

The **Learning Outcome Portfolio** is outlined below with the associated CACREP standard; objective of the assessment; associated specific standard in that category that was chosen to be assessed as a performance indicator of student learning; the assignments chosen to assess the performance across two checkpoints; and the course in which the assignment is located.

1. Professional Foundation and Ethical Practice

Objective. The student will demonstrate the ability to conceptualize, articulate and exhibit a personal approach to ethics in counseling that is in keeping with the expectations of the standards set forth in the most current versions of Professional Ethical Standards of

the American Counseling Association and the Commission of Rehabilitation Counselor Certification. Core Standard 2.G.1.j. *Ethical standards of professional organizations and credentialing bodies, and applications of ethical and legal considerations in professional counseling.*

CHECKPOINT #1 Assignment: Personal Ethics in Counseling. COUN 664 Ethics in Counseling

CHECKPOINT #2 Assignment: Ethical Practice in Clinical Experience. REHB 675 Clinical Experience/Internship

2. Social and Cultural Diversity

Objective. The student will demonstrate self-awareness in the advocacy of programing that promotes optimal wellness and growth of the human spirit, mind or body. Core Standard 2.G.2.e. *Counselors' roles in developing cultural self-awareness, promoting cultural social justice, advocacy and conflict resolution, and other culturally supported behaviors that promote optimal wellness and growth of the human spirit, mind, or body.*

CHECKPOINT #1 Assignment: Advocating for Change. COUN 634 Cultural Issues in Counseling

CHECKPOINT #2 Assignment: Advocacy Presentation for Mental Health/Wellness for People with Disabilities. REHB 672 Counseling Practicum

3. Human Growth and Development

Objective. The student will demonstrate an understanding of and ability to communicate theories of individual development and transitions across the lifespan. Core Standard 2.G.3.a. *Theories of individual and family development and transitions across the lifespan.*

CHECKPOINT #1 Assignment: Interviewing Person with a Disability in a Developmental Stage. REHB 612 Disability Across the Lifespan

CHECKPOINT #2 Assignment: Educational Presentation for Mental Health/Wellness for People with Disabilities. REHB 672 Counseling Practicum

4. Career Counseling

Objective. The student will demonstrate appropriate use of knowledge and skills in implementing career development and decision-making models. Core Standard 2.G.4.a. *Career development theories and decision-making models.*

CHECKPOINT #1 Assignment: Personal Theoretical Approach to Career Counseling Practice. COUN 620 Career Counseling and Job Development

CHECKPOINT #2 Assignment: Counseling Skills Practice: Career Counseling. REHB 672 Counseling Practicum

5. Helping Relationships

Objective. The student will demonstrate appropriate use of knowledge and skills in theories and techniques of counseling. Core Standard 2.G.5.c. *Essential interviewing and counseling skills.*

CHECKPOINT #1 Assignment: Counseling Techniques and Microskills. COUN 501 Counseling Theories and Techniques 1

CHECKPOINT #2 Assignment: Counseling Skills Video Sessions. REHB 672 Clinical Practice

6. Group Work

Objective. The student will demonstrate an ability to facilitate group counseling sessions that shows evidence of a knowledge of theories and methods of group counseling, matching promising or evidenced based interventions with specific populations, and measuring effectiveness. Core Standard 2.G.6.a. *Principles of group dynamics, including group process components, developmental stage theories, group members' roles and behaviors, and therapeutic factors of group work.*

CHECKPOINT #1 Assignment: Small group facilitation and participation. On Campus Group Facilitation and Growth Group. COUN 609 Group Counseling Theories and Techniques

CHECKPOINT #2 Assignment: Group Facilitation in Clinical Experience. REHB 675 Clinical Practice

7. Assessment

Objective. The student will show evidence of understanding the concepts of assessment techniques through an analysis of the appropriate use of an instrument. Core Standard 2.G.7.b. *Basic concepts of standardized and non-standardized testing and other assessment techniques, including norm-referenced and criterion-referenced assessment, environmental assessment, performance assessment, individual and group test and inventory methods, psychological testing and behavioral observations.*

CHECKPOINT #1 Assignment: Instrument Critique. COUN 505 Theory and Practice of Human Appraisal

CHECKPOINT #2 Assignment: Mental Health Case Study Conceptualization/ Assessment Choices. 665 Diagnosis and Treatment Planning

8. Program Evaluation

Objective. The student will proficiently demonstrate an ability to design an ethically and culturally relevant program evaluation and reporting strategy. Core 2.G.8.f. *Ethical and culturally relevant strategies for interpreting and reporting the results of research and/or program studies.*

CHECKPOINT #1 Assignment: Program Evaluation of a clinical counseling program.
REHB 680 Research Seminar

CHECKPOINT #2 Assignment: Proposal for a Mental Health/Wellness Group Counseling Intervention for People with Disabilities/ Evaluation Component. 609 Group Counseling Theories and Techniques

Clinical Rehabilitation Counseling Specialization (CRC)

Objective. The student is able to research, analyze and develop a case study that shows proficiency in applying the principles and practices of rehabilitation counseling; demonstrating appropriate use of assistive technology and job accommodation principles; and demonstrating appropriate use of diagnostic materials. CRC D. 1. *Applies the principles and practices of rehabilitation counseling concerning issues such as etiology, diagnosis, treatment, and referral for clients with disabilities, including clients with co-occurring disabilities.*

CHECKPOINT #1 Assignment: Rehabilitation Medical Case Study. REHB 610 Medical Aspects of Rehabilitation

CHECKPOINT #2 Assignment: Rehabilitation Services Case Study. REHB 624 Rehabilitation Client Services

CMHC) Clinical Mental Health Counseling Specialization

Objective. The student is able to research, analyze and develop a case study that shows proficiency in applying principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans. CMHC G.1. *Knows the principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans.*

CHECKPOINT #1 Assignment: Mental Health Case Study. COUN 665 Diagnosis and Treatment Planning

CHECKPOINT #2 Assignment: Mental Health Case Presentation. REHB 675 Clinical Practice

Clinical Reviews

You will receive another handbook that addresses the clinical experiences within our program; those include the practicum and internship. These are essential culminating experiences and are a part of the review process for our program. Proficiency is the minimum standard.

Professional Disposition Review

Each semester, program faculty members, as well as adjuncts and other department faculty teaching counseling courses, evaluate all CRMHC students in their courses using the *The Counseling Competencies Scale—Revised*© assessment in a new online format in Tevera.

The Counseling Competencies Scale—Revised© (CCS-R) is an empirically tested assessment instrument designed to measure counselor competencies in the domains of (a) counseling skills and therapeutic relationships and (b) professional dispositions and behaviors, which aligns with CACREP (2016) Standards.

The CCS-R© is offered as an option to your Tevera membership and is required for our program. Journal articles associated with validity of the assessment instrument include:

Lambie, G. W., & *Ascher, D. L. (2016). A qualitative evaluation of the Counseling Competencies Scale with clinical supervisors and their supervisees. *The Clinical Supervisor*, 35(1), 98-116.

Swank, J. M., & Lambie, G. W. (2016). Development of the Research Competencies Scale. *Measurement and Evaluation in Counseling and Development*, 49(2), 91-108.

Swank, J. M., & Lambie, G. W. (2012). The assessment of CACREP core curricular areas and students learning outcomes using the Counseling Competencies Scale. *Counseling Outcomes Research and Evaluation*, 3(2), 116-127.

In the case that a student is deemed to need intervention, the program faculty members meet together to develop a program of remediation or a therapeutic referral plan for the student. This plan is then presented to the student in a private meeting.

Program Resources

Teaching and Learning Technology Center

The *Teaching and Learning Technology Center* (TLTC) offers a wide variety of learning and instructional resources to our college's faculty and staff. The center offers a variety of audio-visual and visual equipment for learning and instructional purposes. In addition to the resources provided by the TLTC, Verizon donated funds for facilities and equipment for interactive video-conferencing, taping of classes and computers for classroom use. We also have access to staff committed to the e-Campus initiatives.

WVUOnline

WVUOnline facilitates the distance education at WVU. They provide seamless access to academic courses, lifelong learning opportunities, student services, and library materials through a personalized yet convenient process. This service includes on-line registration and cashiering as well as on-line multi-media, and/or technology enhanced courses. <http://online.wvu.edu>

Library Services

Supporting the work of students and faculty are the *WVU Libraries*, serving as the: Major information resource center for the State of WV; Statewide regional depository for Federal government information for printed and electronic information (GPO Access); WV arm of the National Library of Medicine Network; Home for more than 4.5 million archives documenting the history and culture of the people of WV and Appalachia; etc. The ten separate libraries contain 900,000 monographs, annually subscribe to 134 state and national newspapers and 11,925 serials and hold more than 4.5 million archival documents and 2.7 million microform documents. These invaluable resources and the accompanying services that the WVU Libraries provide must be preserved and made easily available to students and citizens of the state via new and renovated facilities and emerging technologies. <http://www.libraries.wvu.edu/>

Distance education students can access all the WVU Libraries resources electronically which includes an extensive online full journal article database. Students can also order print books and/or journal articles from the library and they will be sent to the student free of charge. In addition, a librarian is added to each online course to help access scholarly publications and answer questions.

Student Support Services

Newly admitted students can find information about setting up their WVU student accounts, obtaining financial aid, setting up their WVU portal for registration, finding textbooks, and more at <https://www.wvu.edu/admissions/resources/admitted-students>

Free Software

All current WVU employees, students and emeritus faculty can download Microsoft Office for their personally-owned computers through the University's Office 365 license. The software can be installed on as many as five computers and five mobile devices. Students: Please note that you'll have to add @mail.wvu.edu to your username to install and activate. (MIX addresses won't work) When you leave WVU, the software will cease to function, and you will have to purchase a license. Available through <https://it.wvu.edu/services/student-resources>

Diversity Efforts

We are committed to creating a diverse learning environment for our students and recruiting people from diverse backgrounds into our program of study. WVU has made a commitment to this effort. The Division of Diversity, Equity, and Inclusion promotes and hosts a variety of diversity initiatives. More information can be found at <https://diversity.wvu.edu/>

Student Retention

Students must review the graduate school catalog for conditions of retention. Additional conditions unique to the Clinical Rehabilitation and Mental Health Counseling program are:

- (1) Students must conduct themselves in an ethical and professional fashion at all times. Dismissal from the program may be recommended if, in the opinion of the program faculty, the student is found to lack qualities that are desirable in a counselor, or if the student engages in improper behavior. This decision may be appealed to University grievance procedures.
- (2) If a student receives **a grade of C or lower, in a core course, that student's performance will be reviewed by the program faculty. It is the student's responsibility to bring the issue to the attention of their advisor immediately.** The faculty, in consultation with the instructor, will require the student to demonstrate skill or knowledge competencies at a level equivalent to a grade of B for that course. If the grade is a C, there will be a remediation activity (see page 35 for more on remediation); for a grade of D, the student will retake the course unless their GPA is too low to continue in the program; if the grade is an F, the student will be removed from the program. The university places graduate students on Academic Probation when their GPA falls below a 2.8. These decisions may be appealed via University grievance procedures.
- (3) Students must adhere to the rules of the University in relation to Academic Rights and Responsibilities found in the *WVU Student Handbook – The Mountie*. Section 3.5.2.6 provides details regarding the charges and the appeals process for issues related to Academic Dishonesty. We require students complete a plagiarism test with a minimum grade of 80 prior to entering the program. You should also review *Plagiarism: What It is and How to Recognize and Avoid It* <http://www.indiana.edu/~wts/wts/plagiarism.html#original>
- (4) Practicum and internship: A student must have a GPA of 3.0 or higher and have completed all required coursework satisfactorily prior to taking practicum and internship. Faculty and field supervisors will determine if the completion of field experiences is satisfactory. Where performance is unsatisfactory, the student will be required to repeat the practicum or internship (not necessarily in the same semester) or have it extended until competence is achieved. Participation in agency functions, including all professional conduct requirements of that agency, as well as counseling and other skills, is evaluated by faculty and site supervisors. Note: if you are required to remediate the internship experience and your progress was deemed unsatisfactory, you are required to complete the 600 hours.
- (5) The program uses two codes of ethics as guidelines for conduct. One is the *Code of Ethics for Rehabilitation Counselors* published by the Commission on Rehabilitation Counselor Certification found at <https://www.crc certification.com/cve-cwa-cca-code-of-ethics> The other is the *American Counseling Association Code of Ethics* (2014) found at <http://www.counseling.org/resources/aca-code-of-ethics.pdf> Students may also be dismissed from the program if they violate rules or practices of the institution where they are assigned practicum or internship as well as in the classroom or related activities. If the student is given the opportunity to complete another clinical experience, none of the previous site hours will be counted toward the total required for graduation.
- (6) At any point in the program, instructors can submit a student *Counseling Competencies Scale—Revised*© (CCS-R) assessment to the full program faculty. Four categories are reviewed including, professional responsibility, competence, comportment, and integrity. If determined to be necessary, the issues will be discussed with the student and a remediation plan will be initiated. If deemed to be operating at an insufficient fitness level, students can be asked to leave the program.

Note: Tevera is partnering with the University of Central Florida and Glenn Lambie, Ph.D. to integrate and deliver *The Counseling Competencies Scale—Revised*© (CCS-R) assessment in a new online format, helping counseling programs measure key competencies aligned CACREP

Accessibility Services

Students are personally responsible for applying in a timely manner to the WVU Office of Accessibility Services (OAS) regarding their need for accommodations upon admission to WVU and/or acceptance into a WVU Online & Extended Campus class. Students must contact OAS at the beginning of each semester to arrange for academic accommodations. Students requesting accommodations must submit an application and contact our office to speak with an Accessibility Specialist. More information can be found at: <https://accessibilityservices.wvu.edu/>

Impaired Student Policy

It is recognized everyone can encounter personal problems that can interfere with work performance. It is, therefore, the purpose of this procedure to outline steps that can be taken in order to assist a person whose performance may be impacted by problems caused through alcohol or substance abuse or other addictions, emotional distress, mental and/or emotional problems, mental illness or other reasons.

This policy may be enacted when it is believed that the functioning of a student is impaired due to substance dependence or abuse, mental health condition, emotional problems, or other circumstances that cause the student to be unable to properly perform their tasks and responsibilities.

Impaired Student Procedures

If it is believed that the student is unable to function appropriately and as prescribed in our written code of ethics, they will be referred by the Coordinator to an agency or individual for an assessment. The substance of the assessment process is strictly confidential. However, as it is necessary for the Coordinator to have knowledge of any recommendations of the assessment facility, the student will need to sign a release of information form so these recommendations may be released to the program coordinator.

The cost of the evaluation and any treatment recommended by the evaluating facility will be borne by the student. It is the responsibility of the student to follow the recommendations of the assessment. The recommendations may include but are not limited to:

- Treatment for substance use or mental health disorder/issues at a center that is agreed upon by both the student and the Coordinator.
- A medical examination by a competent health care professional.
- Counseling for personal, emotional or marital problems.

If the recommendations are not followed, the student may be dismissed from the program. It is possible that the recommendations of the evaluation and/or treatment program would be that the student be given a leave of absence. It is also possible that the Department or Program believes it is best for the individual to be placed on an involuntary leave of absence. In either case, the leave of absence could be for a period of time of up to two (2) years. If this leave of absence would result in a period of time greater than what is customarily allowed to complete a program, the student may petition for an extension of time.

It is the concern of the Program, as well as the Department, that services provided by counselors-in-training be of the highest caliber. Therefore, because of ethical considerations, it may be appropriate to prohibit a student from participating in any and all practica until acceptance into the practicum is petitioned by the student. The coordinator may seek the advice of the faculty, the school director and the professional treatment individual working with the student before such permission is given. The purpose of the petition is to allow the student to demonstrate their ability to participate in a practicum in an appropriate and ethical manner.

The student has the right to appeal decisions that are made during the process. If the student disagrees with the treatment recommendations of the evaluation facility, they may seek out another evaluation from a different facility. The cost is paid for by the student. In addition, in order for an evaluation as accurate and complete as possible, release forms need to be signed so that any/all individuals who are providing an evaluation will have access to the same information upon which to base their evaluation.

If there are conflicting recommendations, the coordinator of the program may request that the student seek a third evaluation. If the student believes that all of the facts were not brought forth during the evaluation, they may seek a hearing with the Coordinator. The coordinator may invite to the hearing people who are able to help in the examination of the situation. Among those invited could be the student's advisor, the practicum instructor, faculty members who are knowledgeable in the area of substance abuse, a representative of the assessment facility, fellow students, and others who would be beneficial to the process. The student would be allowed to invite whomever they would wish.

The student also has the right to appeal any decision to dismiss them from the program within 14 days of the decision. In order to protect the rights of the student, this information is considered confidential and may not be released outside of the department or to the assessment and/or referral agencies without written permission signed by the student and witnessed by another.

If, after following the steps outlined above, a reoccurrence of the behavior happens within 12 months, the student is dismissed from the program.

Other Academic Policies

Professional Recommendations or Endorsements by Faculty

During your course of study or after, you may call upon members of the faculty to provide a professional recommendation. This could be for a job, furthering your education, or certification/licensure. We are often called upon in background checks. Students completing the

program in good standing may expect to be endorsed by the program faculty for purposes of appropriate certification, license, or other credentials. Please note that we may use data from your professional portfolio reviews, competency assessments, as well as class participation, and related accomplishments.

The members of the faculty will only provide employment endorsement consistent with a graduate's program track and field placement experience. A graduate who has completed internship in the areas of clinical rehabilitation and clinical mental health counseling will not be endorsed for a counseling position in an unrelated area such as school counseling or psychologist. We can also only make recommendations based on the coursework required in the program during your participation.

At times credentialing requires an applicant to have an endorsement by a site supervisor as well as program approval. Assistance is provided in locating field supervisors through the program office.

Communication

You will receive an email account at WVU. It will be a MIX account that is accessible through your e-campus site. Make sure you review this account regularly as this is the only method for communicating with students outside of the e-campus “classrooms.” Faculty recommend checking this email account daily throughout any semester in which you are enrolled in coursework, at a minimum. ***Faculty and staff have been directed to follow University policy and ONLY use student MIX accounts to communicate academic information with students. BE SURE TO CHECK YOUR EMAIL.***

Statement of Personal Integrity

The profession of clinical mental health adheres to the current ethical principles of counselors, as stated by the American Counseling Association, the American School Counselor Association, the Commission on Rehabilitation Counselor Certification, and the legal codes regulating the profession within each state. In undergoing training to become a counselor, all trainees must also adhere to these ethical principles and legal codes. At various practicum and internship placements, and upon review for certification and licensure after graduation, counselors undergo scrutiny regarding their personal background (background checks) and issues of personal integrity. The following questions represent the types of questions asked:

- Has disciplinary action, in writing, of any sort ever been taken against you by a supervisor, educational or training institution, health care institution, professional association or licensing/certification board?
- Are there any complaints currently pending against you before any of the above bodies?
- Has there ever been a decision in a civil suit rendered against you relative to your professional work, or is any such action pending?
- Have you ever been suspended, terminated or asked to resign by a training program, practicum site or employer?
- Have you ever been convicted of an offense against the law (including DUI) other than a minor traffic violation?
- Have you ever been convicted of a felony?

If you answered “yes” to any of the above questions, you may encounter difficulties receiving an offer of admission to our graduate program, securing clinical practicum positions during training, obtaining an approved clinical internship, or becoming a licensed counselor. As such, a person who answered “yes” to any of these questions should strongly consider whether the time and effort involved in seeking and obtaining a graduate degree in clinical mental health is in their best interest.*

*Policy modified from [WVU Clinical Psychology Guidelines & Policies](#)

Expected Technical Competence

The instructors who design the courses are responsible for pedagogical strategies and the design of the materials in the courses. As they provide instruction, they are accountable for having the knowledge and developing effective strategies for delivering that knowledge and skill development.

Our students, as online learners, are in charge of selecting learning strategies appropriate to their goals and preferences. Do you prefer to read the lectures or listen? Do you review the material more than once, taking notes as you go along? You will need to find your resources to complete the assignments, using those provided by the instructor and university but also locating other resources on your own.

You also are required to build up social interaction in your community, among your fellow students and with the instructor to build on what you are learning. You have to manage your own learning, there may be no specific time to be in class so you must implement time management strategies. We expect students to be online interacting in discussion sessions throughout the course of each class period or module that lasts one week.

Students must also exhibit digital competency, the ability to locate, select and evaluate online information – as well as be able to utilize software, hardware and communication tools. You will be communicating virtually, which is different than the way we often communicate in our familiar face-to-face world.

Our students report rich interactions with their peer and we find responses are often more thoughtful because you have time to contemplate your response to an instructor or student. Consider this an opportunity to develop your critical thinking and communication skills – crafting thoughtful arguments and well-researched responses. It provides you a way of developing the intellectual component of your interactions with others.

Incomplete Grades

The following is a statement directly from the University policy. Of particular interest is the sentence - *Please note that the policy is that the coursework should be completed within the following semester.* An instructor must award a grade at the end of the extended semester that is based on the amount and quality of work completed at that time.

A grade of I (Incomplete) is a temporary grade assignment used when unforeseen, non-academic circumstances arise that prohibit students from completing the last course assignments or examinations at the end of the semester. The grade of Incomplete is typically assigned because of an excused absence from the final examination, or because assignments are unavoidably incomplete, as determined by the instructor.

Generally, the student will have been active in the course up until the last day of the 13th week of classes and earned at least a D- to be eligible to request an incomplete.

- An instructor may not assign a grade of I without the student's agreement and an **Incomplete Contract**. If a student has not requested an Incomplete, or the request for an Incomplete grade has been denied, the instructor should assign the grade earned in the course.
- Within the Incomplete Contract, the instructor is required to indicate a grade earned for the course assuming no additional work will be completed. Should the signed contract not be fulfilled, the instructor must either submit a grade of F or the grade indicated in the contract.
- If the student is unable to complete the work during the following term for non-academic reasons, the term of the contract may be extended with permission of the Dean. Additionally, the term of the contract can be extended if the instructor is not available or a portion of the course, for some legitimate reason, cannot be completed within the original time frame.
- An Incomplete grade not changed by the end of the next regular term; (fall and spring semesters) will be replaced with a grade of IF, and the class must be retaken to satisfy degree requirements as necessary. Under legitimate, extraordinary circumstances, with supporting documentation and the approval of the Dean, an instructor can submit a grade change for an IF within five years of when the course was taken.
- All grades of I must either be resolved or replaced with an IF in order to graduate from West Virginia University.

An Incomplete Contract and directions are located at <https://undergraduate.wvu.edu/strategies/academic-policy-committee/forms>

Course Remediation

It is expected that students will attain grades of "A" or "B" in their coursework. **A grade of "C" or lower means you have not achieved mastery of the coursework.**

Any grade of "C" requires remediation of the coursework. We include specific assignments in this category because it is essential that you show mastery of all elements of your course of study. Therefore, the instructor will assign you a remediation task(s) for ANY assignment in which you receive a grade of C or lower.

The instructor of record, in consultation with the entire program faculty, will determine an appropriate process for remediation. Remediation includes identifying problem areas of learning and requiring additional coursework, readings, or assignments, or it may mean you audit the course when it is offered next. A student may be required to engage in remediation of

assignments until faculty conclude that mastery of a skill has been achieved. Any grade of “D” requires that you retake the course.

A grade of “F” means you will be removed from the program; any circumstances to be considered for an exception will be reviewed by the members of the faculty. If the course is a requirement for any additional coursework, you will not be able to proceed until the requirement is completed. In addition, the University has set a minimum GPA expectation for graduation at 3.0.

Grievance Procedures

It is expected that students will try to resolve disagreements or problems with the individuals involved (other students, faculty, staff, or administration). If this is not successful, the advisor should be consulted for advice and/or possible mediation. If this process proves unsatisfactory, students have the option to present concerns to the Program Coordinator who will then attempt to advise, mediate and/or solve the concern.

If satisfaction is not achieved, the School of Counseling & Well Being Director is the next point of contact. In this case, Dr. Amy Kennedy Root is the Director. She can be reached at amy.kennedy@mail.wvu.edu or call 304. 293-0380.

Students may then petition the School Director in writing to form an Appeals Committee that consists of three faculty members. If the student desires to appeal further, they may then petition in writing to the Dean of the College of Applied Human Sciences, West Virginia University, 802 Allen Hall, Morgantown, WV 26506.

The WVU Graduate Catalog provides time requirements for completing these activities.
<http://catalog.wvu.edu/graduate/>

Graduation Requirements

Once you have completed coursework and are in your internship semester, it’s time to start thinking about graduation. There are a few items for you to remember and they are listed below for you.

First, you will need to have successfully completed all coursework for the program as outlined in your handbook. There are also the requirements associated with *Counseling Competencies Scale—Revised*© (CCS-R) assessment and professional portfolio reviews.

Master’s Degree Time Limit

Master’s degree students are permitted to continue in a program for a maximum of eight years following their term of admission to the program. Students who have been inactive for two or more years or who exceed eight years following their term of admission are required to apply for readmission to the University and their graduate program.

Graduate course work used to meet degree requirements must be satisfactorily completed within a period of eight years immediately preceding the conferring of the degree. Courses completed in

the same term as degree conferral (fall, spring, summer) eight years previously are considered to fall within the 8-year limit. A course completed more than eight years prior to the term of degree conferral must be revalidated if it is to be used toward meeting degree requirements.

Revalidation can be accomplished through the following procedure:

- The current instructor of the course determines the method used to revalidate the course. The student may, for example, be required to complete specific activities (such as repeating all or some of the course or completing a set of readings). The instructor then assesses the student's knowledge of course material (through such means as a written or oral examination, a paper, a project, or some other assessment) and determines if the student's knowledge is adequate to justify revalidation of the course.
- The instructor submits a description of the revalidation method and results of the assessment to the college or school dean or designee.
- The college or school dean or designee submits a letter describing the revalidation process and supporting the revalidation to the Associate Provost for Graduate Academic Affairs.
- The Associate Provost informs the Office of the Registrar that the course has been revalidated.

Application for Graduation

At the time of registration for the enrollment period in which all degree requirements are expected to be met, or at the latest within two weeks after such registration, each candidate is to submit an Application for Graduation online through your MIX account. You must complete a Request to Graduate form that you will receive from the department. The candidate must complete all requirements at least one week before the end of that enrollment period. If the degree is not actually earned during that term, the student must submit a new Application for Graduation when registering for the term in which completion is again anticipated.

Colleges and schools are responsible for seeing that master's and doctoral students meet the minimum requirements of the University as well as any additional college or school requirements. Deans' offices are responsible for maintaining all student records necessary to certify students for graduation. Attendance at the spring commencement is voluntary. Anyone not planning to attend should leave a complete mailing address with the Office of Admissions and Records so that the diploma can be mailed.

You have to be enrolled in at least one credit hour during the semester you graduate IF you are completing coursework or other requirements of the program, to include completing tasks for courses in which you received an Incomplete grade. If you have completed ALL requirements during the previous semester but were unable to graduate, then you do not have to be enrolled in a course.

Summary of WVU's Master's Degree Requirements

1. Shortly after admission to the program (usually within the first nine- to 12-semester hours of coursework), the advisor and the student produce a Plan of Study.
2. The student completes requisite coursework and other program requirements.

3. The student confers with the advisor to see if all requirements can be met by the end of the semester in which they plan to graduate. This should be done no later than the beginning of the final semester. Verify you have been registered for at least one credit hour for the semester.
4. The student registers for at least one credit hour. *No one may graduate who is not registered as a student during the term of graduation.*
5. Student applies online for Graduation through MIX account by the deadline provided by the department via email. Paper applications are no longer accepted.

Professional Advancement Following Graduation

A Master's Degree in Clinical Rehabilitation and Mental Health Counseling is considered to be a resilient degree, providing background for work in agencies and treatment centers, as well in private practice. While intense in its coverage of material related to professional counseling, the degree is considered to be just the beginning of lifelong professional development.

Continuing education following graduation is essential in order to remain up-to-date with counseling theories and techniques, complementary practices and to stay relevant to the concerns of clients. As such, participation in professional associations, continuing education and even further graduate study is encouraged.

Professional Credentialing

Rehabilitation Counselor Certification

Graduates of our CRMHC program are eligible to take the examination for certification as rehabilitation counselors (CRC). It is highly recommended that students apply for certification. This must be done approximately five months prior to any one of the three exam dates offered each year.

Information and application forms for certification are available from:

Commission on Rehabilitation Counselor Certification <http://www.crc certification.com>

1699 E. Woodfield Road Suite 300

Schaumburg, IL 60173

Phone: 847-944-1325

Fax: 847-944-1346 Email: info@crc certification.com

National Board for Certified Counselors

There is another certification examination that may be required for licensure in your state. Please check with your licensing board. NBCC's examinations are used both for state licensure and national certification, which are different types of credentials with different purposes. Their website is <http://www.nbcc.org/exam>

Professional Counselor Licensure

Program graduates are typically eligible to apply for licensure as a professional counselor in West Virginia and other states which license counselors, following 2 years of professional

experience or 3,000 hours. Students should check with the Licensure Boards of the states of interest in order to determine the eligibility requirements of the particular state. Some states require specific coursework not required in the WVU program. Students interested in licensure in those states should plan their program of study accordingly.

Please note: **In WV, the directions on the website have indicated applicants take the NBCC exam yet the licensing regulations include the CRCC exam as a qualifying exam.** Please check with your state licensing board. *It is the students' responsibility to investigate requirements of any licensing board prior to starting our program and work with their advisors to create a specific plan to meet the expectations.*

The address of the licensing board in West Virginia is:

West Virginia Board of Examiners in Counseling
815 Quarrier Street, Suite 212, Charleston, West Virginia 25301
Toll-Free:(800) 520-3852 Charleston Area:(304) 558-5494 Fax:(304) 558-5496
<http://www.wvbec.org/>

If you are interested in licensure in another state, visit <http://www.nbcc.org/directory/Default.aspx> for information on requirements. Expectations for each state are different. Please let us know early so we can help you design both your coursework and the practicum/internship experiences to meet the educational requirements of the state licensing board.

NOTE: The Tevera system will maintain the information about licensure for you as part of your membership.

Professional Associations

Many individuals find involvement in professional associations help them in their development and job search. There are many state and national associations available to rehabilitation and mental health counselors. Below is a listing of some of these:

American Counseling Association (ACA) 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. ACA has been instrumental in setting professional and ethical standards for the counseling profession. The association has made considerable strides in accreditation, licensure, and national certification. ACA has 56 chartered branches in the U.S., Europe, and Latin America. There are 17 chartered divisions, one of these is the American Rehabilitation Counseling Association. <http://www.counseling.org/>

Student Membership. ACA Master's Level students receive liability insurance coverage as part their membership. For just over half the price of full professional membership, students gain access to all of the career and professional resources available to practicing counselors, helping you prepare for your counseling career. To aid your coursework, ACA provides 24-hour electronic access to our

journal, literature, and other research resources. ACA is here to help you prepare for the next chapter in your professional career.

Student Membership- Individuals who are enrolled at least half-time in a college or university program. See more at: <http://www.counseling.org/membership/aca-and-you/students>

The American Rehabilitation Counseling Association (ARCA) is an organization of rehabilitation counseling practitioners, educators, and students who are concerned with improving the lives of people with disabilities. Its mission is to enhance the development of people with disabilities throughout their life span and to promote excellence in the rehabilitation counseling profession. ARCA's goal is to provide the type of leadership that encourages excellence in the areas of rehabilitation counseling practice, research, consultation, and professional development. It is affiliated with the American Counseling Association. There are no state chapters. <http://www.arcaweb.org/>

Benefits of Membership

- *Rehabilitation Counseling Bulletin*, a quarterly scholarly publication.
- A quarterly newsletter highlighting legislative and professional activities.
- Opportunities for professional growth and leadership.
- Special publications on current professional concerns.
- Access to professional liability insurance.
- Accredited continuing education opportunities for CRC's
- Opportunities for student members to network join student associations, scholarly competitions, serve on professional committees.
- Listserv alerting rehabilitation counselors to legislative actions and ARCA activities.

Student membership: Application Brochure: <http://www.arcaweb.org/wp-content/uploads/ARCA-2014Brochure.pdf>

The American Mental Health Counselors Association (AMHCA) is the professional membership organization that represents the clinical mental health counseling profession. Clinical membership in AMHCA requires a master's degree in counseling or a closely related mental health field and adherence to AMHCA's National Standards for Clinical Practice. Rapid changes in the health care marketplace make it more necessary than ever for AMHCA members to make their voices known to this Congress. Through a set group of standards and ethics for mental health counselors, AMHCA is dedicated to training and cultivating excellent practitioners. We want to break through walls of stigma and show how excellent mental health counselors change lives and improve mental health. AMHCA offers many different ways for counselors to improve their excellence in any field they work in. <http://www.amhca.org/?page=facts>

Student Membership: <http://www.amhca.org/?page=studentbenefits>

Benefits
FREE Liability Insurance

Access to the Journal of Mental Health Counseling
The Advocate Magazine
Access to AMHCA Communities and Blogs
Access to all AMHCA webinars
AMHCA White Papers and Emerging Clinical Practice Briefs
Connect with others in the Graduate Student Community *Coming soon!*
Special pricing for the Annual Conference
Connect with the Graduate Student Committee and student activities
Student Resources
Chance to apply for student scholarships and awards.

International Association of Rehabilitation Professionals (IARP). IARP unites rehabilitation professionals across North America and beyond to promote the availability of effective, interdisciplinary services for persons with disabilities. IARP serves a diverse membership practicing in the fields of long term disability and disability management consulting, case management and managed care, forensics and expert testimony, life care planning, and Americans with Disabilities Act (ADA) consulting. West Virginia and Virginia have combined as one state chapter of IARP. <http://www.rehabpro.org/>

Student Membership includes all the benefits of Associate Membership in IARP PLUS membership in IARP's Special Interest Sections!

National Rehabilitation Association (NRA). Not long after Congress passed the National Rehabilitation Act of 1920, NRA began its commitment to individuals with disabilities. As the oldest and strongest advocate for the rights of individuals with disabilities, their mission is to provide advocacy, awareness and career advancement for professionals in the fields of rehabilitation. Membership in special interest divisions is an option. Membership in NRA also includes membership in individuals' home state. <http://nationalrehab.org/>

Student membership: A graduate student must be enrolled in a minimum of six semester hours or equivalent. In order to receive the student rate, status must be verified by a major professor. As a student, you will receive the *Rehabilitation Journal*, containing scholarly articles, Contemporary Rehab, a newsletter from the NRA connecting members with state of the art practices and happenings in the field of rehab and Washington Wires.

National Rehabilitation Counseling Association (NRCA). NRCA is a professional association which began in 1958 and is a division of NRA. NRCA represents professionals in the field of rehabilitation counseling in a wide variety of work settings. Includes *Journal of Applied Rehabilitation Counseling* <http://nrca-net.org/>

Student membership: Enrolled full or part-time at an accredited institution in a curriculum leading to a Master's degree in Rehabilitation Counseling, Rehabilitation Psychology, or related field.

National Clearinghouse on Rehabilitation Training Materials (NCRTM). More information on rehabilitation associations and organizations is located on the web site of NCRTM. They host

the Rehabilitation Recruitment Center, a unique resource of job listings in the public rehabilitation program. The service is free to public rehabilitation agencies, educational institutions with accredited rehabilitation programs, and individuals seeking employment in public rehabilitation.

<http://www.ncrtm.org/>

The Association of Addiction Professionals (NAADAC) represents the professional interests of more than 85,000 addiction counselors, educators and other addiction-focused health care professionals in the United States, Canada and abroad. NAADAC's members are addiction counselors, educators and other addiction-focused health care professionals, who specialize in addiction prevention, treatment, recovery support and education. An important part of the healthcare continuum, NAADAC members and its 47 state affiliates work to create healthier individuals, families and communities through prevention, intervention, quality treatment and recovery support.

Student Membership: Open to those individuals currently enrolled in a college/university or state government approved training facility with a minimum of three credit hours in addiction studies and students involved in a full or part-time internship are also eligible for student membership. Student members must not be currently licensed or certified as an addiction professional or practicing as an addiction professional.

<http://www.naadac.org>

Resources for Job Searches

There are several ways to locate employment as a clinical rehabilitation and/or mental health counselor. *A Facebook group has been designated for the WVU Rehabilitation Counselor Education Program.* Employers and students post information, including job announcements on this forum. Faculty often update students on career opportunities.

In addition:

- National Rehabilitation Information Center: Employment
<http://www.naric.com/?q=en/content/employment-0>
- Openings within the Veterans' Administration can be found at <http://www.va.gov/jobs/> and other federal job openings are maintained at <http://www.usajobs.gov/> and <http://www.fedworld.gov/jobs/jobsearch.html>
- The American Counseling Association maintains a Career Center at http://www.counseling.org/AM/Template.cfm?Section=CAREER_CENTER
- [Myplan.com](http://www.myplan.com) Accounts are free and provide you with access to dozens of additional features, including a free career assessment test, the CareerMatch™ system, discussion forums, online communities, and the portfolio manager.

- In addition, we maintain a listing of job openings on our department web site http://www.cehs.wvu.edu/crc/career_opportunities.html

Appendix

Appendix A: Plan of Study Options-Fall Cohort

Appendix B: Plan of Study Options- Spring Cohort

APPENDIX A FALL COHORT**WVU M.S. Clinical Rehabilitation and Mental Health Counseling****Program of Study: Full time Fall Cohort**

PRINT STUDENT NAME: _____

Semester	Course	Credit Hours
Fall 1	16 weeks	
REHB 600	Introduction to Rehabilitation & Mental Health Counseling	3
REHB 610	Medical Aspects of Rehabilitation	3
REHB 680	Research Seminar	3
COUN 501	Counseling Theories & Techniques I (immersion week)	3
Spring 1	16 weeks	
REHB 612	Disability Across the Lifespan (Human Development)	3
REHB 620	Career Development and Job Placement	3
COUN 505	Theory and Practice of Human Appraisal	3
COUN 606	Counseling Theories & Techniques II	3
Summer 1	6 weeks/6weeks	
COUN 634	Cultural Issues in Counseling	3
COUN 668	Crisis, Trauma and Grief Counseling	3
	12 weeks	
COUN 640	Addictions Counseling	3
COUN 645	Couples and Family Counseling	3
Fall 2	16 weeks	
COUN 664	Ethical Issues in Counseling	3
REHB 624	Rehabilitation Client Services	3
COUN 665	Diagnosis and Treatment in Mental Health	3
REHB 672	Counseling Practicum (150 site hours)	3
Spring 2	16 weeks	
COUN 609	Group Counseling Theories and Techniques (immersion week)	3
REHB 675	Clinical Practice/Internship (300/300 site hours)	12

Please note: Enrolling in four courses in a summer session is beyond practical for anyone working a full-time job or otherwise committed for significant hours during a week. For a student to engage in 4 courses in the shorter week sessions, there must be time each week for 16 hours of class engagement and 32-48 hours for assignments/testing for a total commitment of 48-64 hours. And that goes on for 12 weeks with only one week of rest before the fall semester starts. More options are on page 2, along with additional signature lines.

Student please initial here to indicate you have read the above material: _____
Signature page and optional course delivery is on page 2.

I have elected to pursue this full-time plan of study, in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Students may consider enrolling in only 2 courses in the first summer and add two courses in the summer after internship. This reduces the workload stressors as well. Options are:

Option 1

Summer 1	6 weeks/6 weeks	
COUN 634	Cultural Issues in Counseling	3
COUN 668	Crisis, Trauma and Grief Counseling	3
Summer 2	12 weeks	
COUN 640	Addictions Counseling	3
COUN 645	Couples and Family Counseling	3

Option 2 if you are planning a substance use disorder treatment program for an internship site

Summer 1	6 weeks/12 weeks	
COUN 634	Cultural Issues in Counseling	3
COUN 640	Addictions Counseling	3
Summer 2	12 weeks/6 weeks	
COUN 668	Crisis, Trauma and Grief Counseling	3

I have elected to pursue the full-time plan of study as modified in (circle one) **Option 1** or **Option 2** in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

WVU M.S. Clinical Rehabilitation and Mental Health Counseling

Program of Study: Part time Fall Cohort

PRINT STUDENT NAME: _____

Semester	Course	Credit Hours
Fall 1 16 weeks		
REHB 600	Introduction to Rehabilitation & Mental Health Counseling	3
REHB 610	Medical Aspects of Rehabilitation	3
COUN 501	Counseling Theories & Techniques I (immersion week)	3
Spring 1 16 weeks		
REHB 612	Disability Across the Lifespan (Human Development)	3
REHB 620	Career Development and Job Placement	3
COUN 606	Counseling Theories & Techniques II	3
Summer 1 6 weeks/6 weeks		
COUN 634	Cultural Issues in Counseling	3
COUN 668	Crisis, Trauma and Grief Counseling	3
Fall 2 16 weeks		
COUN 664	Ethical Issues in Counseling	3
REHB 624	Rehabilitation Client Services	3
REHB 680	Research Seminar	3
Spring 2 16 weeks		
COUN 609	Group Counseling Theories and Techniques (immersion week)	3
COUN 505	Theory and Practice of Human Appraisal	3
Summer 2 12 weeks		
COUN 640	Addictions Counseling	3
COUN 645	Couples and Family Counseling	3
Fall 3 16 weeks		
COUN 665	Diagnosis and Treatment in Mental Health	3
REHB 672	Counseling Practicum (150 site hours)	3
Spring 3 16 weeks		
REHB 675	Clinical Practice/Internship (300/300 site hours)	12
		63 credit hours

NOTE: Immersion weeks are mandatory and must be attended DURING the semester in which a student has enrolled in the associated course.

I have elected to pursue the 3-year part time plan of study in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

WVU M.S. Clinical Rehabilitation and Mental Health Counseling**Program of Study: Part time (4 years) Fall Cohort**

PRINT STUDENT NAME: _____

Semester	Course	Credit Hours
Fall 1	16 weeks	
REHB 600	Introduction to Rehabilitation & Mental Health Counseling	3
COUN 501	Counseling Theories & Techniques I (immersion week)	3
Spring 1	16 weeks	
REHB 612	Disability Across the Lifespan (Human Development)	3
COUN 606	Counseling Theories & Techniques II	3
Summer 1	6 weeks/6 weeks across the 12 week summer schedule	
COUN 634	Cultural Issues in Counseling	3
COUN 668	Crisis, Trauma and Grief Counseling	3
Fall 2	16 weeks	
REHB 610	Medical Aspects of Rehabilitation	3
REHB 680	Research Seminar	3
Spring 2	16 weeks	
REHB 620	Career Development and Job Placement	3
COUN 505	Theory and Practice of Human Appraisal	3
Summer 2	12 weeks	
COUN 640	Addictions Counseling	3
Fall 3	16 weeks	
COUN 664	Ethical Issues in Counseling	3
REHB 624	Rehabilitation Client Services	3
Spring 3	16 weeks	
COUN 609	Group Counseling Theories and Techniques (immersion week)	3
Summer 2	12 weeks	
COUN 645	Couples and Family Counseling	3
Fall 4	16 weeks	
COUN 665	Diagnosis and Treatment in Mental Health	3
REHB 672	Counseling Practicum (150 site hours)	3

Spring 4	16 weeks	
REHB 675	Clinical Practice/Internship (300/300 site hours)	12
		63 credit hours

NOTE: Immersion weeks are mandatory and must be attended DURING the enrolled course semester.

Student initial here that you read the above material: _____ Signature page follows.

I have elected to pursue the 4-year part time plan of study in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Modifications to Plan of Study

You may be interested in modifying the plan of study in consultation with your advisor. The following courses are often considered for changes due to primary interest as a counselor, work schedules or other planned events. These must be done with your advisor to ensure you meet all prerequisite course requirements (such as COUN 501 Counseling Theories and Techniques 1) and are in alignment with our comprehensive assessment plan.

Summer courses – you can modify these four courses with the exception that Cultural issues in Counseling must be in the first summer you enroll in classes. The spring cohort model also has the option for you to enroll in REHB 620 Career Development and Job Placement in the summer.

Changes: _____

Fall and Spring Courses – for instance, depending on the type of site you choose for your Counseling Practicum, you may want to switch the timing of **REHB 624 Rehabilitation Client Services** and **COUN 665 Diagnosis and Treatment in Mental Health**.

Changes: _____

I have elected to pursue the 4-year part time plan of study with modifications as listed, in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

APPENDIX B SPRING COHORT

WVU M.S. Clinical Rehabilitation and Mental Health Counseling**Program of Study: Full time 2-year Spring Cohort**

PRINT STUDENT NAME: _____

Semester	Course	Credit Hours
Spring 1	16 weeks	
REHB 600	Introduction to Rehabilitation & Mental Health Counseling	3
REHB 612	Disability Across the Lifespan (Human Development)	3
COUN 501	Counseling Theories & Techniques I (immersion week)	3
COUN 505	Theory and Practice of Human Appraisal	3
Summer 1	12 weeks/6weeks	
REHB 620	Career Development and Job Placement	3
COUN 634	Cultural Issues in Counseling	3
Fall 1	16 weeks	
REHB 610	Medical Aspects of Rehabilitation	3
REHB 680	Research Seminar	3
COUN 606	Counseling Theories & Techniques II	3
COUN 664	Ethical Issues in Counseling	3
Spring 2	16 weeks	
REHB 624	Rehabilitation Client Services	3
COUN 665	Diagnosis and Treatment in Mental Health	3
REHB 672	Counseling Practicum (150 site hours)	3
COUN 609	Group Counseling Theories and Techniques (immersion week)	3
Summer 2	12 weeks/6 weeks	
COUN 640	Addictions Counseling	3
COUN 668	Crisis, Trauma and Grief Counseling	3
Fall 2	16 weeks	
REHB 675	Clinical Practice/Internship (300/300 site hours)	12

COUN 645	Couples and Family Counseling	3
TOTAL		63

More options are on page 2, along with additional signature lines.

I have elected to pursue this full-time plan of study, in consultation with my advisor.

Student Signature: _____ **Date:** _____

Advisor Signature: _____ **Date:** _____

If you are planning to select a site that provides addiction and recovery counseling for your Counseling Practicum experience, you may need to enroll in Addictions Counseling in the first semester.

Option 2

Summer 1	6 weeks/12 weeks	
COUN 634	Cultural Issues in Counseling	3
REHB 620	Career Development and Job Placement	3
COUN 640	Addictions Counseling	3
Summer 2	12 weeks	
Summer 2	6 weeks	
COUN 668	Crisis, Trauma and Grief Counseling	3

I have elected to pursue the full-time plan of study as modified in **Option 2**, in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

WVU M.S. Clinical Rehabilitation and Mental Health Counseling**Program of Study: Part time 2.5-year Spring Cohort****PRINT STUDENT NAME:**

Semester	Course	Credit Hours
Spring 1	16 weeks	
REHB 600	Introduction to Rehabilitation & Mental Health Counseling	3
COUN 501	Counseling Theories & Techniques I (immersion week)	3
REHB 612	Disability Across the Lifespan (Human Development)	3
Summer 1	12 weeks/6weeks	
REHB 620	Career Development and Job Placement	3
COUN 634	Cultural Issues in Counseling	3
Fall 1	16 weeks	
REHB 610	Medical Aspects of Rehabilitation	3
COUN 606	Counseling Theories & Techniques II	3
REHB 680	Research Seminar	3
Spring 2	16 weeks	
COUN 505	Theory and Practice of Human Appraisal	3
REHB 624	Rehabilitation Client Services	3
COUN 665	Diagnosis and Treatment in Mental Health	3
Summer 2	12 weeks/6 weeks	
COUN 640	Addictions Counseling	3
COUN 668	Crisis, Trauma and Grief Counseling	3
Fall 2	16 weeks	
REHB 672	Counseling Practicum (150 site hours)	3
COUN 645	Couples and Family Counseling	3
COUN 664	Ethical Issues in Counseling	3
Spring 3	16 weeks	
REHB 675	Clinical Practice/Internship (300/300 site hours)	12
COUN 609	Group Counseling Theories and Techniques (immersion week)	3
TOTAL		63

I have elected to pursue this part-time plan of study, in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

WVU M.S. Clinical Rehabilitation and Mental Health Counseling**Program of Study: Part time 3.5-year Spring Cohort**

Print Student Name

Semester	Course	Credit Hours
Spring 1	16 weeks	
REHB 600	Introduction to Rehabilitation & Mental Health Counseling	3
COUN 501	Counseling Theories & Techniques I (immersion week)	3
Summer 1	12 weeks/6weeks	
REHB 620	Career Development and Job Placement	3
COUN 634	Cultural Issues in Counseling (first half)	3
Fall 1	16 weeks	
REHB 610	Medical Aspects of Rehabilitation	3
COUN 606	Counseling Theories & Techniques II	3
Spring 2	16 weeks	
REHB 612	Disability Across the Lifespan (Human Development)	3
COUN 505	Theory and Practice of Human Appraisal	3
Summer 2	6 weeks (2nd half)	
COUN 668	Crisis, Trauma and Grief Counseling	3
Fall 2	16 weeks	
REHB 680	Research Seminar	3
COUN 664	Ethical Issues in Counseling	3
Spring 3	16 weeks	
REHB 624	Rehabilitation Client Services	3
COUN 665	Diagnosis and Treatment in Mental Health	3
Summer 3	12 weeks	
COUN 640	Addictions Counseling	3
Fall 3	16 weeks	
REHB 672	Counseling Practicum (150 site hours)	3
COUN 645	Couples and Family Counseling	3

Spring 4	16 weeks	
REHB 675	Clinical Practice/Internship (300/300 site hours)	12
COUN 609	Group Counseling Theories and Techniques (immersion week)	3
TOTAL		63

Modifications to delivery can be made on page 2 – in consultation with advisor.

I have elected to pursue this part-time plan of study, in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Modifications to Schedule

I have elected to pursue this part-time plan of study with the following modification made in consultation with my advisor.

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Mental Health Provider Referral List

Engaging in personal growth and mental wellness is an important part of becoming a professional counselor. Therefore, seeking counseling is an activity we encourage all students to do. Here, we provide a list of mental health providers local to the Morgantown, WV area, in no order. While many of you are not local to Morgantown, note that many of these providers offer telehealth options. You are encouraged to seek mental health support in your own area if none of these resources are a good option.

Michelle Lewis, LCSW
Integrative Wellness, Morgantown
<http://icswv.com>
304-685-4773
Trauma, Grief, Veterans

Amy Wilson-Strange, Ph.D., Licensed Psychologist
Family Matters, Lost Creek
304-745-5065
<http://wvfamilymatters.com/home.html>
Play Therapy, young children, adolescents

Tony Onorato, MA, LPC, AADC, ALPS
APO Counseling, Morgantown
304-284-8438
<http://apocounseling.com/who>
Males, Adolescents, athletically inclined kiddos, Stress, Anxiety, Grief, Addictions, Mental Performance

Lauren Swann, MA, LPC, NCC
Hamner Psychological Services, Bridgeport
304-842-7007
<https://www.hamnerpsychological.com/>
Adolescents, Trauma, EMDR Certified

JP Pishner, MP, LPC, NCC, CT, ALPS
APEX Counseling, Morgantown
304-381-3659
<http://apexcounseling.org/>
Trauma, Anger, Anxiety, Behavioral addictions

Laura Walls, MA, LPC, NCC
APEX Counseling, Morgantown
304-381-3659
<http://apexcounseling.org/>
Trauma, Children, Kiddos who have been victims

Emily Reel - MA, LPC, ALPS, AADC-S, MAC, SAP
APEX Counseling, Morgantown
304-381-3659

<http://apexcounseling.org/>

College students, Substance Abuse, Family and Parenting

Erika Laurenson, M.A., NCC, LPC, ALPS
Clear Connections Counseling

<https://clearconnectionsww.com/>

Trauma, Mood Disorders, Relationship Issues

Kristin Johnson-Gibeaut, MA, NCC, LPC, CTT
Clear Connections Counseling

<https://clearconnectionsww.com/>

Trauma, PTSD, Dissociative Disorders

Gillian Kraft, MSW, LCSW

Clear Connections Counseling

<https://clearconnectionsww.com/>

OCD, Eating Disorders

Narayan Gold, Ph.D.

Matthew Keller, Ph.D.

Taylor Allen, Ph.D.

(and others)

Stillwater Counseling

Two Locations in Morgantown, WV

<https://www.stillwatercounseling.org/>

Brenda Everette, MA, LPC, NCC, CTT

Other providers

Trauma, Veterans, Depression, Grief, Adjustment

Unbound Counseling, LLC

425 Industrial Ave, Ste. 201

Morgantown, WV 26505

(304)-241-1854

<https://www.unboundcounseling.org/>