

University of Nebraska at Kearney

# Clinical Mental Health Counseling

October 27, 2021

# Table of Contents

## Clinical Mental Health Counseling

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### **Clinical Mental Health Counseling** 2020-21

1 Effective Clinical Mental Health Counselors .....	2.
1.1 Knowledge, Skills, & Dispositions .....	2.

### Mission

1

#### Goal

##### Effective Clinical Mental Health Counselors

The UNK Clinical Mental Health Counseling program prepares professional clinical mental health counselors to meet the highest CACREP standards for delivering counseling in a wide variety of community and agency settings. Students in Clinical Mental Health Counseling are eligible to obtain the appropriate national certification (e.g., NCC) and Nebraska state licensure (LMHP/LPC/LIMHP). • Possess knowledge of the development of the mental health counseling movement. • Understand the general roles, duties, and expectations of the mental health counselor. • Know the specialized legal and ethical responsibilities and functions of the mental health counselor. • Possess an understanding of cultural diversity as it relates to mental health counseling. 41 • Possess an understanding of the relationship of mental health counseling to other health and human services. • Be familiar with the factors related to the management of mental health services. • Be familiar with the treatment procedures of mental and emotional disorders. • Know specific models for assessing psychopathological behavior and be familiar with the DSM diagnostic categories. • Be knowledgeable about the effects and side effects of the commonly used psychotropic drugs. • Be familiar with case management procedures and the steps for developing a treatment plan. • Be familiar with procedures for referral and possess consultation skills for use with other mental health professionals. • Understand factors related to client advocacy and patients' rights. • Be familiar with several approaches to individual, group, marital, couple, and family counseling.

1.1

#### Outcome

##### Knowledge, Skills, & Dispositions

Counseling Discipline: Graduates will demonstrate knowledge of the CACREP core and clinical mental health counseling program areas including: • Counseling culturally diverse populations and multicultural competencies • Human development theories, the impact of atypical development resilience/wellness factors, crisis/trauma, and neurobiological behavior including the role of psychopharmacological medications • Theories of addiction and addictive behaviors • Career development, theories, and assessments • Major individual, group, couple, and family counseling theories and their use in the conceptualization of client concerns • Statistical concepts related to assessment and research Clinical Competence: Graduates will gain the ability to perform a wide range of therapeutic services for diverse

client populations in a variety of settings including:

- Theoretical concepts, skills, and strategies to counsel and/or advocate for culturally diverse clients
- Applies human development to develop differentiated interventions to treat various client populations
- Diagnostic process and role of psychopharmacological medications and applies that knowledge in the prevention and treatment of mental and/or emotional disorders
- Strategies for prevention, intervention and treatment of addiction
- Skills and strategies of career development in addressing client concerns
- Individual, couple, family, and group counseling theories, assessments, and interviewing skills to address client concerns
- Administering assessments including diagnostic interviews and mental status exams
- Differentiated interventions and evidence-based practices to treat various client populations

**Professional Identity/Ethical Reasoning:** Graduates will possess a strong counselor identity, professionalism and ethical practice including:

- Professional identities of counselors/clinical mental health providers, including professional issues, organizations, advocacy role, preparation standards and credentialing
- ACA ethical standards, including those specific to the practice of clinical mental health counseling; applies them in an exceptionally professional manner
- Professional strengths and limitations
- Collaboration with professional colleagues
- Communicates respectfully
- Commitment to professional growth and wellness

**Professional Practice**  
 Graduates will demonstrate knowledge and skills related to the operation of mental health services and various professional counselor roles.

- Roles in various practice settings, including responsibilities in interdisciplinary treatment teams, expert witness status, and crisis management
- The use of consultation/clinical supervision in the counseling process
- The administrative/business aspects of public and private mental health agencies including program development and service delivery and clinical record keeping

## Action Plan

Budget Source	Amount	Due	Status
	\$0.00	no due date set	
Action Item 1	Created	Due	Status
	9/4/2019		

### 1.1.1 Measure/Source of Evidence

#### Comprehensive Exams

All students are required to successfully complete comprehensive exams during the final semester of their program. The comprehensive exam is based on the learning objectives.

Faculty evaluators assess the student using the Clinical Mental Health Counseling Comprehensive Exam Evaluation Form.

**1.1.1.1 Targets**  
See above

TARGET	Comprehensive Exam Scale The scale is Target = 2; Met = 1; Not Met = 0; The average score of all students who complete comps will be above .99.
RESULTS	Comprehensive Exam Scale Target (Pass/ Exceeds Expect)=1.5-2.0; Met (Pass/ Meet Expect) =1.0-1.49; Not Met (Fail) =0-.99 N=10, Range = 1.00- 1.71, Mean = 1.43 Areas Target = 19, Areas Met= 17 Areas Not Met=0
ANALYSIS OF FINDINGS	Strength Areas: All areas are indicated as strengths given 100% of students at Target or Met, and 0 Not Met's.  Growth Areas: While all areas are at met or target, a score of 1.00 is in the area of "Applies Multicultural Competencies" emerges from the data across all three semesters during this review period.
IMPROVEMENT TYPE	Academic
IMPROVEMENT DESCRIPTION	Implemented new instructional techniques
IMPROVEMENT	Comprehensive exam rubrics have been added to the student handbook to provide CMHC students access to study guides and expectations at admission to the program. Further, Compressive Exams are now discussed in the new student orientation. Comprehensive exam questions have been revised as has the assessment process with an updated rubric. The Multicultural class instructor(s) will continue to utilize case studies to help improve application of these concepts in Comprehensive Exams. Continue to monitor the data for needed changes next reporting period.

**1.1.2 Measure/Source of Evidence**  
Internship Evaluation

All students are required to successfully complete an internship experience which involves direct field experience in a specialized professional work setting under the supervision of a qualified professional and the Department internship coordinator. A program faculty member in consultation with the site supervisor assesses competence related to the learning

objectives.

**1.1.2.1 Targets**  
See above

TARGET	The average score of all students' final evaluation from their supervisor(s) will be above a grand mean of .76.
RESULTS	Internship Evaluation Scale Target=1.5-2.0 Met=.76-1.49 Not Met=0-.75 Clinical Mental Health Counseling N = 17 (20F=10, 21S=6, 21U=1) Grand Mean Average Range = 1.69-2.0; Grand Mean = 1.92; Target = 28, Met = 0, Not Met = 0
ANALYSIS OF FINDINGS	During this review period, a new Internship Evaluation assessment instrument was created and implemented in the Summer of 2021 as part of CACREP accreditation for the CMHC program.

Former Assessment Instrument:

Strength Areas Overall:

Results indicate that students were very strong in all 28 performance areas. The grand mean was very similar to the prior year (1.92 vs. 1.92) indicating the students performed high. The lowest score in the prior year for an individual semester, and individual item, was 1.6; this year the lowest score is 1.33 (Conducts an intake interview and mental status exam) from Spring 2021. In the Fall 2020 semester, that same item was 1.75, and the Summer 2021 semester a 2.0. This seems to indicate the score (1.33) to be an outlier.

Growth Areas Overall:

While all students were at target for these expectations, the lowest grand means of 1.69 was found in one item (significantly lowered by the 1.33 outlier discussed above), "Conducts an intake interview and mental status exam". This score falls within the target category, however, is the lowest rated areas.

New Assessment Instrument:

Clinical Mental Health Counseling N = 2 (20F=0, 21S=0, 21U=2) Grand Mean Average Range = 1.0- 2.0; Grand Mean = 1.50; Target = 10, Met = 0, Not Met = 1

#### Strength Areas Overall:

Results indicate that students were very strong in 10 of 12 performance areas assessed. One area (KPI 5) had no data for either student. The grand mean of 1.50 indicated that students performed high in all areas and considered “target”.

#### Growth Areas Overall:

Results indicate that program improvement may be needed around “Strategies to promote client understanding of and access to a variety of community based resources”. That said, this new assessment instrument was implemented in the Summer of 2021 and data on just two students is present. Of particular note, the other student during the same time period, scored a 2.0 on this item. More data is needed to determine if this area is low, and if so, how best to improve it.

IMPROVEMENT  
TYPE

Assessment Process Modifications

IMPROVEMENT  
DESCRIPTION

Assessment Method Revised

IMPROVEMENT

Improvement Type - Continue to watch for trends in the data.

### 1.1.3 **Measure/Source of Evidence** Graduate Exit Survey

The Graduate Exit Survey is a graduation requirement for all clinical mental health counseling students. The survey is an evaluation of the program effectiveness related to student learning and professional preparation.

#### 1.1.3.1 **Targets** See above

TARGET

The average score of all students’ exit surveys will be above a grand mean of .76.

RESULTS

Scale: 2=Target Exemplary in preparing counselors; 1=Met Adequately prepares counselors; 0=Not Met Fails to prepare N= 12, Range 1.5-1.92, Grand Means = 1.75

ANALYSIS OF  
FINDINGS

Qualitative Improvement Areas indicated all were positive and no additional changes were noted from students.

Program Goals and Learning Objective Domains:

Global Evaluation of Program:

Overall evaluations of the clinical competence of the CMHC program were positive with an overall mean of 1.84 across the reporting period by the students. By key indicators within the CMHC program (General Evaluation = 1.77, CMHC Counseling Discipline = 1.76, CMHC Clinical Competence = 1.88, CMHC Professional Identity and Ethical Practice = 1.80, CMHC Professional Practice = 1.7)

Strength Areas:

General Evaluation:

“The Academic/Professional Knowledge Taught to You” 1.92

CMHC Counseling Discipline:

“Human Development theories, the impact of atypical development resilience/wellness factors, crisis/trauma, and neurobiological behavior.” with a mean average of 1.85.

CMHC Clinical Competency Key Indicator:

“Applies human development to develop differentiated interventions to treat various client populations” was noted as strengths of the program with a mean average of 1.85.

CMHC Professional Identity and Ethical Practice:

“Graduates will possess a strong counseling identity, professionalism and ethical/multicultural practice” 1.92

Growth Areas:

All areas evaluated are at target. Academic Process Modifications

IMPROVEMENT  
TYPE

IMPROVEMENT  
DESCRIPTION

IMPROVEMENT      Action Plan implemented; will assess next cycle Continue to monitor data for trends that need addressed after implementation of new CACREP assessment plan.  
Improvement(s) Achieved - Students indicated in their comments the clinical coursework was most beneficial.

**1.1.4 Measure/Source of Evidence**  
Employer/Site Supervisor Survey

The Employer/Site Supervisor Survey is an evaluation of the clinical mental health counseling program's effectiveness related to student learning and professional preparation.

**1.1.4.1 Targets**  
90% of employers/site supervisors will score student learning and professional preparation items at met or target.

TARGET              90% of employers/site supervisors will score student learning and professional preparation items at met or target.

RESULTS              Scale: Not met =0-.74 Met=.75-1.49 Target= 1.5-2.0 Clinical Mental Health Counseling (CMHC) N= 8, Range=1.38 to 1.88, M= 1.67

ANALYSIS OF FINDINGS      Qualitative Improvement included more specific education with assessment and ability to explore research based interventions.

Program Goals and Learning Objective Domains

General Evaluation of Program:

Overall evaluations of the CMHC program were positive with an overall mean of 1.67 across the reporting period.

Strength Areas:

Selected highlighted strengths include "Clinical Mental Health Counseling Professional Identity and Ethical Practice - Graduates will possess a strong counselor identity, professionalism, and ethical/multicultural practice. ACA ethical standards, including those specific to the practice of clinical mental health counseling; applies them in an exceptionally professional manner" M=1.88.

Growth Areas The lowest item:

Growth areas in the CMHC program included “Roles in various practice setting, including responsibilities in interdisciplinary treatment teams, expert witness status, and crisis management.” M=1.38 across the reporting period.

IMPROVEMENT TYPE	Academic Process Modifications
IMPROVEMENT DESCRIPTION	Incorporate more resources for students
IMPROVEMENT	Improvement suggestions: Academic Process Modifications > The CMHC program implemented a new electronic health record into Advanced Practicum to increase student experience with clinical record keeping. CSP 862 Administration and Consultation added additional curriculum to address interdisciplinary treatment teams, expert witness status, and crisis management. Added training for Int4ernship Supervisors to enhance their ability to evaluate supervisees.

### 1.1.5 Measure/Source of Evidence

#### National Counselor Exam (NCE)

National Counselor Examination (NCE) for Clinical Mental Health Counseling (CMHC) The NCE is a national exam required for professional counselor licensure and National Counseling Certification. It is a 200-item multiple-choice examination designed to assess knowledge, skills and abilities determined to be important for providing effective counseling services. The NCE is a requirement for counselor licensure in many states and for the National Certified Counselor (NCC) certification.

### 1.1.5.1 Targets

#### National Counselor Examination (NCE) for Clinical Mental Health Counseling (CMHC)

TARGET	80% of our students will pass the NCE on the first attempt.
RESULTS	Fall 2020 NCE Number Tested = 2, Number Passed = 2 (100%), Number Failed = 0 (0%); Spring 2021 Number Tested = 6, Number Passed = 5 (83%), Number Failed = 1 (17%). For the reporting period, 87% passed the NCE on the first attempt.
ANALYSIS OF FINDINGS	Fall 2020 data indicated that 100% of UNK CMHC students passed the national counselor exam. Fall 2020 NCE Number Tested = 2, Number Passed = 2 (100%),

Number Failed = 0 (0%); Spring 2021 NCE data Spring 2021 Number Tested = 6, Number Passed = 5 (83%), Number Failed = 1 (17%). For the reporting period, 87% passed the NCE on the first attempt exceeding our goal of 80%.

:

The results from Fall 2020 indicated that CMHC students were at the national average (or within one standard deviation) in all but four areas (Professional Practice and Ethics, Professional Counseling Orientation and Ethical Practice, Human Growth and Development, and Counseling and Helping Relationships). The results from Spring 2021 indicated that CMHC students were at the national average (or within one standard deviation) in all but four areas (Career Development, Professional Counseling Orientation and Ethical Practice, Human Growth and Development, and Areas of Clinical Focus).

IMPROVEMENT  
TYPE

Academic Process Modifications

IMPROVEMENT  
DESCRIPTION

Improved Scores

IMPROVEMENT

Improvement - Although meeting our goal of “80% of our students will pass the NCE on the first attempt” by 7% (80% goal and 87% actual), themes emerged from the data around “Professional Counseling Orientation and Ethical Practice” and “Human Growth and Development”. The new assessment plan to comply with CACREP accreditation, highlights two key performance indicators (KPI 1 and KPI 4) to enhance student learning in these areas. Advisors and internships supervisors will also continue to make efforts to prepare students to better prepare for the NCE and encourage all to access study materials (e.g., Rosenthal, Encyclopedia of Counseling, etc.) available in the UNK Calvin T. Ryan Library. Improvement Plan - Prepare students better for the NCE. Make students aware of the NCE Study resources that are available to them at UNK to prepare for their exam.

### 1.1.6 Measure/Source of Evidence Key Professional Dispositions

The CMHC program underwent significant updating and enhancement preparing for accreditation. The former Student Progress Review (formerly reported here) is no longer completed. Assessment of student progress is now conducted at four strategic points 1) Intakes (entry), 2) CSP 855 Techniques of Counseling & Application for Candidacy (early on-going), 3) CSP 885 Practicum in Counseling (mid on-going), and 4) CSP 892 Internship (end

and summative). Student progress is also conducted extensively throughout Internship in consultation with the Site Supervisor. These assessments of student progress on the Key Professional Dispositions are formative assessments where students are given feedback from program faculty with which they may monitor their own progress and make necessary improvements in their academic work, clinical skills, and dispositions.

### 1.1.6.1 **Targets**

KPD Mean Rating Scale; Average of score, based on the following rating scale: 0-.99 = Does Not Meet Expectations 1.0 - 1.49 = Meets Expectations 1.50 - 2.00 = Exceed Expectations

TARGET	KPD Mean Rating Scale; Average of score, based on the following rating scale: 0-.99 = Does Not Meet Expectations 1.0 - 1.49 = Meets Expectations 1.50 - 2.00 = Exceed Expectations
RESULTS	Results from Fall 2020 to Summer 2021 at ) Intakes (entry), 2) CSP 855 Techniques of Counseling & Application for Candidacy (early on-going), 3) CSP 885 Practicum in Counseling (mid on-going), and 4) CSP 892 Internship are reported below.
ANALYSIS OF FINDINGS	<p>-Intakes Summer 2021 data only, score reflects three students not admitted.  N= 18,  Range 1.0-2.0  Grand Mean = 1.83  Areas Exceed Expectations = 15  Areas Meets Expectations = 3  Areas Does not Meet Expectations = 0</p> <p>855</p> <p>F20  N=11  Range 2.0-2.0  Grand Mean = 2.0  Areas Exceed Expectations = 11  Areas Meets Expectations = 0  Areas Does not Meet Expectations = 0</p> <p>Sp21</p>

N=12  
Range 1.0-2.0  
Grand Mean = 1.83  
Areas Exceed Expectations = 10  
Areas Meets Expectations = 2  
Areas Does not Meet Expectations = 0

U21  
N=3  
Range 1.0-2.0  
Grand Mean = 1.33  
Areas Exceed Expectations = 1  
Areas Meets Expectations = 2  
Areas Does not Meet Expectations = 0

885

F20  
N=7  
Range 2.0-2.0  
Grand Mean = 2.0  
Areas Exceed Expectations = 7  
Areas Meets Expectations = 0  
Areas Does not Meet Expectations = 0

Sp21  
N=4  
Range 2.0-2.0  
Grand Mean = 2.0  
Areas Exceed Expectations = 4  
Areas Meets Expectations = 0  
Areas Does not Meet Expectations = 0

U21  
N=5

Range 2.0-2.0  
Grand Mean = 2.0  
Areas Exceed Expectations = 5  
Areas Meets Expectations = 0  
Areas Does not Meet Expectations = 0

892

F20  
N=6  
Range 1.0-2.0  
Grand Mean = 1.66  
Areas Exceed Expectations = 4  
Areas Meets Expectations = 2  
Areas Does not Meet Expectations = 0

Sp21  
N=4  
Range 2.0-2.0  
Grand Mean = 2.0  
Areas Exceed Expectations = 4  
Areas Meets Expectations = 0  
Areas Does not Meet Expectations = 0

U21  
N=5  
Range 2.0-2.0  
Grand Mean = 2.0  
Areas Exceed Expectations = 5  
Areas Meets Expectations = 0  
Areas Does not Meet Expectations = 0

Analysis

Further, all key CMHC program indicators were at target or at met for this review period.

IMPROVEMENT TYPE	Academic Process Modifications
IMPROVEMENT DESCRIPTION	Action Plan implemented; will assess next cycle
IMPROVEMENT	No Improvements Deemed Necessary at this time. Continue to monitor the Key Professional Dispositions assessment process in the coming year for any changes needed.

**1.1.7 Measure/Source of Evidence**

Annual Advisory Council Meeting

Department and Clinical Mental Health Advisory Council members (e.g., alumni, public, institutional administrators, cooperating agencies, site- supervisors, employers, etc.) are presented annual program assessment results and asked for feedback to inform program strengths, growth points, and improvements.

**1.1.7.1 Targets**

Annual AC Meeting Powerpoint Presentation, Agenda & Minutes

TARGET Annual AC Meeting is directed by CACREP to gain input from the field on program changes to better prepare future students.

RESULTS See Below

ANALYSIS OF FINDINGS  
 Advisory Council  
 Clinical Mental Health Counseling Breakout Meeting  
 May 12, 2021

I. CMHC Data Review – Reviewed the below items with members of the Advisory Council. Informational in nature with no questions from members.

- a. Comprehensive Exams
- b. Internship Evaluation
- c. Graduate Exit Survey
- d. Employer/Site Supervisor Survey
- e. National Counseling Exam

II. CACREP 2016 Standards – Reviewed the items below and the CACREP data assessment plan with members of the Advisory Council. Responses to the plan were

positive by members and believed the plan to be thorough and appropriate. The student member of the council discussed how students often experience “imposter syndrome” and knowing the lengths that the CMHC program evaluates them might help build confidence. Emailed documents to members for further review and feedback.

- a. Syllabi have been transitioned
- b. Drs. Tillman and Hof spearheading the efforts
- c. Updated Assessment Plan and Visual
- d. Timeline
- e. Feedback on Assessment Plan

### III. Input Needed

a. Telehealth – Discussed the CMHC programs steps (pre-pandemic) to prepare students. Following COVID, students were almost exclusively providing telehealth services. A supervisor in the field believed Interns to be nicely prepared for service delivery on this platform. Student felt prepared and supervised well. Suggestions from the council members were to increase training on interventions to use with children and engagement with all clients.

b. COVID and response to online (and Zoom) training – Council members report the CMHC program is maintaining the same standards as always in the training of students. No concerns noted.

c. Large increase in CMHC students – Council members report the CMHC program is maintaining the same standards as always in the training of students. No concerns noted.

d. Alumni of the year nominations – Encouraged council members to be on the “look out” for alumni in the field doing exceptional things, and consider nominating them.

### IV. Misc

Council member and field supervisor for the CMHC program discussed supervising an intern from another program who had a previous mental health board commitment which impacted the internship site. Perhaps the UNK CMHC program should screen for this at intakes.

IMPROVEMENT  
TYPE

Academic

IMPROVEMENT  
DESCRIPTION

## No Improvements Deemed Necessary

IMPROVEMENT

Clinical Mental Health Counseling  
Program Review Report 2020-2021

## Table of Contents

1. - Response .....	1
2. - Response .....	3
3. - Response .....	4
4. - Response .....	5
5. - Response .....	6

## 1. - Response

Briefly discuss strengths and weaknesses of your department/program based on your assessment data.

### Response

The average score of all students' exit surveys will be above a grand mean of .76.

2=Target Exemplary in preparing counselors; 1=Met Adequately prepares counselors; 0=Not Met Fails to prepare

Not met =0-.74 Met=.75-1.49 Target= 1.5-2.0

Clinical Mental Health Counseling (CMHC) N= 12, Range 1.5-1.92, Grand Means = 1.75

#### Analysis

Qualitative Improvement Areas indicated all were positive and no additional changes were noted from students.

Program Goals and Learning Objective Domains:

Global Evaluation of Program:

Overall evaluations of the clinical competence of the CMHC program were positive with an overall mean of 1.84 across the reporting period by the students. By key indicators within the CMHC program (General Evaluation = 1.77, CMHC Counseling Discipline = 1.76, CMHC Clinical Competence = 1.88, CMHC Professional Identity and Ethical Practice = 1.80, CMHC Professional Practice = 1.7)

Strength Areas:

General Evaluation:

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CMHC Counseling Discipline:

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CMHC Clinical Competency Key Indicator:

“Applies human development to develop differentiated interventions to treat various client populations” was noted as strengths of the program with a mean average of 1.85.

CMHC Professional Identity and Ethical Practice:

“Graduates will possess a strong counseling identity, professionalism and ethical/multicultural practice” 1.92

Growth Areas:

All areas evaluated are at target. Academic Process Modifications

Continue to monitor data for trends that need addressed after implementation of new CACREP assessment plan. Will assess next cycle.

## **Evidence Attachments**

## **2. - Response**

Provide a description of when/how assessment results were shared with department/program faculty. Were the assessment results discussed at a faculty meeting or retreat? Is the entire department/program involved in decision making related to actions to be taken based on assessment data?

### **Response**

The process of evaluating the assessment data was completed by the CMHC subcommittee and then shared with the larger Counselor Education committee at a meeting of this group. Yearly, this information will also be shared with the CMHC Advisory Council and at CMHC New Student Orientation.

### **Evidence Attachments**

### **3. - Response**

Critically evaluate the assessment process. Did your assessment plan allow you to assess department/program learning outcomes well? Was the data gathered useful? If not, how would you propose to change your assessment plan moving forward?

#### **Response**

Overall, collecting data at multiple points in the student's matriculation through the program appears to meet the needs of the program. Employer data will now be secured every two years, and was most recently gathered in the Fall of 2021. All current evaluation procedures will be reviewed as the program completes the transition to the 2016 CACREP standards. Finally, since the last reporting period a new assessment plan has been created to include Key Performance Indicators and Key Professional Dispositions. All syllabi have also been converted to reflect the new CACREP standards and assessment plan.

#### **Evidence Attachments**

#### **4. - Response**

Based on your assessment results, what changes has your department/program made over the last 2 years to improve student learning? Give 2-3 specific examples of the changes made, and any results you have of further evaluation indicating how well these changes accomplished their goals to improve student learning.

#### **Response**

To respond to the growth of electronic health records in CMHC, the program has evaluated technology frequently to ensure the highest experience for students, and when needed, made changes to more up-to-date technology. In the spring of 2020, a new and more up-to-date electronic health record was selected and implemented. Next, the CMHC program has infused more hands-on experiences allowing students to practice skills in classes. Finally, the CMHC program has implemented hands on learning with telemental health (distance counseling). Beginning in spring of 2020, students are allowed to complete Practicum hours on telemental health. Finally, since the last reporting period, a new assessment plan has been created to include Key Performance Indicators and Key Professional Dispositions. All syllabi have also been converted to reflect the new CACREP standards and assessment plan.

#### **Evidence Attachments**

## **5. - Response**

Based on your assessment results, what are the next steps for your program? What plans have you made for the next year or two?

### **Response**

In the last reporting period, the CMHC program has completed the transition to the 2016 CACREP standards. A new assessment plan has been created to include Key Performance Indicators and Key Professional Dispositions. All syllabi have also been converted to reflect the new CACREP standards and assessment plan. We will now monitor the results for additional changes needed in the CMHC program to better meet student needs.

### **Evidence Attachments**