

Clinical Mental Health Counseling
Program Review Report 2020-2021

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1.

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

Narrative

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.

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

Clinical Mental Health Counseling (CMHC) N= 19, Range 1.52-2.0, Grand Means =1.82

ANALYSIS

Qualitative Improvement Areas indicated all were positive and no additional changes were noted from students. Students indicated in their comments that the faculty's availability and commitment to students was most beneficial.

Program Goals and Learning Objective Domains:

Global Evaluation of Program:

Overall evaluations of the CMHC program were positive with an overall mean of 1.82 across the reporting period by the students. By key indicators within the CMHC program (General Evaluation = 1.85, CMHC Counseling Discipline = 1.79, CMHC Clinical Competence = 1.78, CMHC Professional Identity and Ethical Practice = 1.87, CMHC Professional Practice = 1.75)

Strength Areas:

General Evaluation:

"The UNK Faculty Supervisors for Internship Experiences" 2.0

CMHC Counseling Discipline:

"Group counseling theories and use in conceptualization of client concerns" 2.0.

CMHC Clinical Competency:

"Group counseling skills, assessments, and interventions to address client concerns" 1.95.

CMHC Professional Identity and Ethical Practice:

"Awareness of strengths and limitations" 2.0

“ACA ethical standards, including those specific to the practice of clinical mental health counseling; applies then in an exceptionally professional manner” 2.0

All areas evaluated are at target. Continue to monitor data for trends that need addressed after implementation of new CACREP assessment plan. Will assess next cycle.

2.

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? (The answer should be yes.)

Narrative

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.

3.

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?

Narrative

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.

4.

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.

Narrative

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 (i.e., distance counseling). Beginning in spring of 2020, students are allowed to complete Practicum hours on telemental health. Next, 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. Finally, the CMHC program has implemented twice yearly new student orientation to better meet the needs of in-coming students.

5.

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

Narrative

In the last reporting period, the CMHC program has completed and submitted the CACREP self-study. A new assessment plan has been created and implemented 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 await the results of the accreditation process and make modifications as needed.

6.

What resources would you need to make these changes? This may include funds, equipment, personnel, facilities, or any other resource you feel you need to move forward.

Narrative

In order to maintain the CACREP accreditation ratios, the CMHC program needs additional faculty to grow the program and admit more students.

7.

Is there any other information about your department/program you would like to share that is not covered in your assessment report that may speak to academic quality? This may include faculty and student accomplishments, grant funding secured, awards, new hires that filled a gap in your faculty expertise, results of program accreditation visits, etc.

Narrative

We will be reporting on the outcome of the CACREP accreditation next WEAVE report.