



Clinical Mental Health Counseling Annual Program Assessment Report

October 2, 2018

This report is a brief summary of our on-going program evaluation efforts and is intended for current students, alumni, site supervisors and employers of alumni. Each group provided essential feedback that helped us better understand our successes and areas needing improvement. We thank you for your candid responses and many suggestions. We hope that this report will also be useful to applicants, faculty, staff, administrators, and the general public.

The CMHC Faculty

The Assessment Process

Each year we survey New Students, Graduating Students, Alumni, Site Supervisors, and Employers of our graduates. We analyze characteristics of applicants and results of the exit exam (CPCE). We also assess Key Performance Indicators (KPIs) that measure essential counseling competencies for entry-level clinical mental health counselors, covering knowledge, skills, and dispositions. In the fall, CMHC Faculty review these program assessment data to determine what we are doing well and where there are opportunities for improvement. We identify changes to make with curriculum, staffing, policy, and procedures and establish a timeline for the changes.

Important Changes Implemented in 2017-18

Academic year 2017-18 was an important transition year for the assessment process within the CMHC program, due to several major related initiatives:

- In preparation for our next CACREP accreditation cycle (to be completed by 2020), we focused on the following initiatives:
 - Revised course syllabi to reflect CACREP's 2016 Standards;
 - Implemented revised Key Performance Indicators (KPIs) into our class syllabi and evaluation forms;
 - Implemented our revised KPIs and associated measures into SOU's TracDat system, tying KPIs to SOU's strategic planning core themes and goals, incorporated CHMC's assessment results into SOU's institution-wide reporting;
 - Began the CACREP "Self Study" process which is a prerequisite for applying for renewed accreditation (we plan to submit in December 2018);
 - Implemented the Tevera (formerly Clinical Training Manager) software platform to reflect revised forms and assessments, to automate the workflow associated with those forms, and to allow for consolidated reporting of student and program performance. The software was introduced with the incoming cohort in 2017, and is being rolled out to all internship sites in 2018 as these students begin their internships.
- Technology: In addition to implementing the Tevera software, we eliminated the use of cumbersome DVDs for recording practicum client sessions and replaced them with direct

loading and encryption of session recordings to a secure server, which also allows for anytime, anywhere review of sessions by authorized personnel (i.e. the student and their supervisor).

Despite the many identified strengths of our program, we nonetheless strive for continuous improvement, and in addition to the major projects listed above, the following actions were taken over the last year in response to survey comments and other identified opportunities:

- We simplified the annual surveys conducted with each of our constituencies in order to make them more focused, concise, and shorter to complete.
- We held discussion meetings with our pool of pre-practicum and practicum supervisors to identify ways to better prepare first-year students for clinical work, resulting in some changes to pre-practicum and practicum syllabi and procedures.
- Through the revised program assessment process implemented this year, we have increased our focus on the dispositional aspects of counselor clinical training: the dominant qualities and behaviors appropriate to becoming an effective professional counselor, establishing the Counselor Competency Scale – Revised (CCS-R) as both a formative and summative evaluation of student skills and dispositions in all pre-practicum and practicum classes; this will be extended to all internships in the 2018-19 academic year, in conjunction with the Tevera rollout.
- We had committed in last year's report to form of "focus group" project with current students to better understand concerns related to course workloads and work-life balance. Logistical problems resulted in this event not occurring, and instead we introduced a new question in this year's Graduating Students survey to collect qualitative data on this issue. This resulted in some related program refinements and actions (see "Program Changes 2018-19" below).

Assessment Results 2018

Applicants: In 2018 our applicant pool increased for the second successive year to 68 (60 the previous year) completed applications, with a reduced 15% (compared to 22% the previous year) declaring ethnicity identified as being members of a racial minority. Of applicants accepted into and enrolled in the program's incoming 2018 cohort and identifying their ethnicity, 24% identify as being of a racial minority, which is down from the previous year (29%), but significantly higher than the applicant pool as a whole. GRE and GPA are, on average, fairly consistent with previous years.

Program strengths

Many program strengths were identified by survey respondents (new, graduating and former students, as well as site supervisors and employers). Scores across the board were consistently high. To highlight just a few, Likert scale survey scores normalized to percentage scores with overall mean scores equal to/greater than 90% positive include:

- CMHC faculty have encouraged me to join professional mental health organizations (New Students – 92%)
- The application process was managed effectively (New Students – 91.4%)
- The acceptance process was managed effectively (New Students – 92.1%)
- The CMHC Faculty are helpful to students (New Students – 96.4%)
- I have access to the educational resources I need (technology, library, etc.) (New Students – 92.9%)
- The CMHC program is meeting my expectations (New Students – 90%)

- I would recommend this program to other potential students (New Students – 94.3%, Alumni – 92%)
- In general, grading is fair (New Students – 92.1%, Graduating Students – 91.1%)
- Class size in content courses (e.g. 571, 570) is conducive to learning (New Students – 92.9%)
- Class size in experiential courses (e.g. 502, 504, 506, 510) is conducive to learning (New Students – 95.7%)
- The Clinical Coordinator is helpful to students (Graduating Students – 94.6%)
- Improvement in Professional Identity (96.7%), Helping Relationships (98.3%), Group Counseling (90.3%), Career Development (92%) (Graduating Students)
- Field placements matched well with my career goals (Alumni – 93.7%)
- The program helped me achieve my career goals (Alumni – 92%)
- Usefulness of the Internship Fair in getting the word out about your agency (Site Supervisors – 96%)
- Usefulness of the Internship Fair in meeting and selecting next year's intern(s) (Site Supervisors – 92%)
- The SOU CMHC Program internship expectations and requirements are clear to me (Site Supervisors – 91.1%)
- The student evaluation procedures are appropriate and manageable (Site Supervisors – 94.7%)
- The SOU clinical coordinator and/or faculty group supervisor are accessible and helpful (Site Supervisors – 94.7%)
- CMHC Preparation for Work: Role and function of mental health counselors (Site Supervisors – 90%)
- NOTE: Multiple items rated 90% positive in the Employer survey are not included in this report due to low sample size.

Exit exam results: Our students once again continued to score significantly above the national average in all eight CACREP sub-areas and in overall total score of the Counselor Preparation Comprehensive Exam (CPCE). We also provide the opportunity for our graduating students to take the National Counselor Examination (NCE) required for licensure. In this examination, our students also scored above the national average compared against every demographic group (CACREP, non-CACREP schools, and Professionals) in every subject area. Thus, our students demonstrate a strong basic fund of knowledge in the counseling field in comparison to a national sample of masters and doctoral level students and professionals.

KPI results: As we completely redesigned our student assessment measures in Fall 2017 and implemented them in January 2018, we assessed students based on the newly implemented Key Performance Indicators (KPIs) for only 3 quarters at the time of this report (Winter, Spring, and Summer 2018). During this period, we assessed all 28 measures due in this time period, which provided measurement data points for all 14 KPIs. Of those 28 measures, 23 met all target criteria - this means that all eligible students in a class or group met the target criteria. Of the 5 measures where not all students met criteria, 1 was due to an Incomplete at the end of a class which was subsequently corrected, 3 involved a single student scoring a C on a measured assignment (below the B target), and 1 involved 2 students falling below the B target for the measured assignment. In all of those cases, the average class score met the target criterion. These results indicate that we are effectively teaching the counseling competencies we intend to teach.

Concerns & Opportunities for improvement

Useful suggestions for small improvements were made in some survey responses, with a few items occurring with greater frequency than others. Some the suggestions made (particularly those with greater frequency of mention in survey comments) are the subject of action items identified below. Likert scale survey scores normalized to percentage scores with overall mean scores below 70% positive include:

- Improvement in Research and Program Evaluation (Graduating Students – 60%)
- CMHC courses are academically challenging (Graduating Students – 68.7%)

Items of qualitative feedback occurring with some frequency related to:

- Work-life balance considerations and difficulties
- Inconsistency in student advising and mentoring
- Various curriculum-related specific comments and suggestions

Program Changes 2018-19

Taking into account the overall very positive program evaluations and all the assessment data and feedback received balanced against constraints of curriculum requirements, available resources, demands of our upcoming reaccreditation process, and logistical considerations, the CMHC faculty agreed to focus on a few key areas of program improvement for the coming year:

- Complete the CACREP reaccreditation Self Study and continue the reaccreditation process.
- Conduct a new review of potential curriculum changes with a view to addressing specific suggestions, introducing elective, focused population- and intervention-specific short classes, consider more hybrid online/classroom delivery models, possibly combining some existing classes to make room for new classes within the same overall tuition cost structure. Such changes would likely be for introduction in Fall 2020.
- Increase the emphasis on expectation-setting regarding time, financial, and emotional commitments involved in the program at the new student orientation session.
- Introduce individual self-care planning in the Summer internship supervision class, with ongoing review throughout the second-year internship through supervision and advising.
- Increase the emphasis with students on the importance and value of 1-on-1 student advising, beyond advising group sessions, especially in the first year of the program.
- Improve the timeliness of assignment of site supervisors in internships in order to allow the creation of internship forms in Tevera as soon as internships begin. Do this by initiating identification of supervisors during the Internship Fair and incorporating it into the standard internship site “match process”.

Victor Chang holds the position of Assessment Coordinator. Please address comments about our assessment efforts to him.

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